Child Care and Development Fund (CCDF) Plan
For
Kentucky
FFY 2019-2021

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1 Define CCDF Leadership and Coordination with Relevant Systems

This section identifies the leadership for the CCDF program in each Lead Agency and the entities and individuals who will participate in the implementation of the program. It also identifies the stakeholders that were consulted to develop the Plan and who the Lead Agency collaborates with to implement services. In this section respondents are asked to identify how match and maintenance-of-effort (MOE) funds are identified. Lead Agencies explain their coordination with child care resource and referral (CCR&R) systems, and outline the work they have done on their disaster preparedness and response plans.

1.1 CCDF Leadership

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

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

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

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Cabinet for Health and Family Services (CHFS) / Department for Community Based Services (DCBS) / Division of Child Care

Street Address: 275 East Main Street, 3W-A

City: Frankfort

State: Kentucky

ZIP Code: 40621

Web Address for Lead Agency: http://chfs.ky.gov

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Eric

Lead Agency Official Last Name: Clark

Title: DCBS Commissioner

Phone Number: 502-564-3703

Email Address: EricT.Clark@ky.gov

1.1.2 Who is the CCDF Administrator?

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

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Sarah

CCDF Administrator Last Name: Vanover

Title of the CCDF Administrator: Director - Division of Child Care

Phone Number: 502-564-2524 ext. 3762

Email Address: sarah.vanover@ky.gov

Address for the CCDF Administrator (if different from the Lead Agency):

Street Address:

City:

State:

ZIP Code:

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

CCDF Co-Administrator First Name: Elizabeth M

CCDF Co-Administrator Last Name: Caywood

Title of the CCDF Co-Administrator: Deputy Commissioner

Description of the role of the Co-Administrator: Support the Division of Child Care Director and Lead Agency with regulatory oversight

Phone Number: 502-564-3703 ext. 3792

Email Address: Elizabeth.Caywood@ky.gov

Address for the CCDF Co-Administrator (if different from the Lead Agency):

Street Address:

City:

State:

ZIP Code:

1.2 CCDF Policy Decision Authority

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

1.2.1 Which of the following CCDF program rules and policies are administered (i.e., set or established) at the state or territory level or local level? Identify whether CCDF program rules and policies are established by the state or territory (even if operated locally) or whether the CCDF policies or rules are established by local entities, such as counties or workforce boards (98.16(i)(3)). Check one.

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

1. Eligibility rules and policies (e.g., income limits) are set by the:
   - [ ] State or territory
   - [ ] Local entity (e.g., counties, workforce boards, early learning coalitions).

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

   - [ ] Other.

   Describe:

2. Sliding-fee scale is set by the:

- [ ] State or territory
- [ ] Local entity (e.g., counties, workforce boards, early learning coalitions).

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

- [ ] Other.

Describe:

3. Payment rates are set by the:

- [ ] State or territory
- [ ] Local entity (e.g., counties, workforce boards, early learning coalitions).

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

- [ ] Other.

Describe:

4. Other. List and describe other program rules and policies and describe (e.g., quality rating and improvement systems [QRIS], payment practices):

1.2.2 How is the CCDF program operated? In other words, which entity(ies) implement or perform these CCDF services? Check all that apply

a) Who conducts eligibility determinations?

- [x] CCDF Lead Agency
- [ ] Temporary Assistance for Needy Families (TANF) agency
- [ ] Other state or territory agency
- [ ] Local government agencies, such as county welfare or social services departments

- [ ] Child care resource and referral agencies
- [ ] Community-based organizations
- [ ] Other.

Describe

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

- [x] CCDF Lead Agency
- [x] TANF agency
- [ ] Other state or territory agency
- [ ] Local government agencies, such as county welfare or social services departments
- [x] Child care resource and referral agencies
- [ ] Community-based organizations
- [ ] Other.

Describe

c) Who issues payments?

- [x] CCDF Lead Agency
- [ ] TANF agency
- [ ] Other state or territory agency
- [ ] Local government agencies, such as county welfare or social services departments
- [ ] Child care resource and referral agencies
- [ ] Community-based organizations
- [ ] Other.

Describe

1.2.3 Describe the processes the Lead Agency uses to monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.2, including written agreements, monitoring and auditing procedures, and indicators or measures to assess performance of those agencies (98.16(b)). Note : The contents of the

written agreement may vary based on the role the agency is asked to assume or type of project, but must include at a minimum, tasks to be performed, schedule for completing tasks, budget which itemizes categorical expenditures in accordance with CCDF requirements, and indicators or measures to assess performance (98.11(a)(3)).

The Lead Agency's Division of Administration and Financial Management (DAFM) is responsible for the department's financial management and budget activities through oversight, monitoring, auditing and assuring process compliance with CCDF requirements at § 98.65(h), federal auditing procedures, and CHFS' policies and procedures. This includes routine monitoring of contracts and agreements. CHFS may issue penalties of up to 5% of the total amount of a contract for failure to perform services outlined within a contract's scope of work. If CHFS elects not to exercise any of the penalty clauses in a particular instance, a corrective action plan may be issued to facilitate resolving performance issues prior to imposing penalties.

The agency's current contract requires the monitoring of the scope of work. The scope of work outlines activities and expected outcomes, timeframes, and a submitted budget which itemizes the expenditures associated with contract deliverables.

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

Assure by describing how the Lead Agency makes child care information systems available to public agencies in other states to the extent practicable and appropriate.

CHFS' information systems and information technology policy apply to all internal CHFS employees, consultants, temporary personnel, third party providers under contract with a CHFS agency, and other entities that interact with CHFS information related resources. This policy covers the applicable computer hardware, software, application, configuration, business data, and data communication systems. Although such a request has not been

received to date, Kentucky would share information technology or systems upon request of another public agency to the extent practicable and appropriate.

The Kentucky Integrated Child Care System (KICCS) is the data management system for child care in the state. Data from this site is compiled annually through reports generated by the Kentucky Center for Statstics (KYSTATS). Reports are also available to the public upon request.
Web Link: KYSTATS

In 2018, CHFS introduced Benefind, an on-line portal for Kentucky assistance and support programs, for the state's child care subsidy program. Benefind pulls real-time data directly from KICCS. The portal includes a child care provider search that allows any member to search licensed and certified child care providers by numerous criteria. Provider profiles include a detailed inspection history, costs, hours of operation, and subsidies available.
Web Link: Benefind

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

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

Kentucky statutes prohibit accessing or releasing confidential information and/or records, or causing confidential information and/or records to be accessed or released to self, other individuals, clients, relatives, etc., outside the scope of the employee assigned job duties. Violation may result in disciplinary action taken against the employee up to and including dismissal and may be subject to civil and criminal liability for the disclosure of confidential information to unauthorized persons.

Under KRS 194A.060, all records and reports of CHFS, which directly or indirectly identify a patient or client, or former patient or client, of CHFS or CHFS by a former name (CHR, CHS, and CFC), are confidential.

Under KRS 205.175, all public assistance communications, both written and oral, generated during the course of business are confidential and privileged. KRS 205.835 prohibits the unauthorized use of information by an employee.

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Under KRS 205.175, all public assistance communications, both written and oral, generated during the course of business are confidential and privileged. KRS 205.835 prohibits the unauthorized use of information by an employee.

Citation: KRS 194A.060 Confidentiality of record and reports
Citation: KRS 205.175 Confidential treatment of information and records

1.3 Consultation in the Development of the CCDF Plan

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

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

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

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

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

1.3.1 Describe the Lead Agency's consultation in the development of the CCDF plan.

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

DCBS consults with general-purpose local government through its participation on Community Early Childhood Councils. Membership to individual councils is statutorily mandated and charged with creating a local vision for early childhood service delivery, including child care. Individuals receiving CCDF funds are members of these councils,

along with other general-purpose local government representatives.

Regional Child Care Administrators through the Kentucky Child Care Aware Network of Services also solicit feedback from local government entities within their assigned regions and share this input back with the Lead Agency through established structures for communication and information sharing.

Citation: KRS 200.707 Community early childhood councils

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

Per KRS 200.700, the Kentucky State Child Care Administrator is a statutorily mandated, voting member of the Early Childhood Advisory Council (ECAC), as is the CHFS Secretary. The ECAC meets at least quarterly and at other times upon call of the chair or majority of the council. The ECAC is charged with making recommendations to CHFS.

The State Administrator presented information about the State Plan at a quarterly ECAC meeting and solicited feedback. Members were also asked to volunteer to serve on a stakeholders group that will meet outside of the quarterly ECAC meeting to have a more focused and detailed discussion on the State Plan. The stakeholders convened in May 2018. Recommendations have been integrated into this plan and will continue to be part of discussions for future initiatives.

On August 1, 2018, Governor Bevin issued Executive Order 2018-0581 abolishing the ECAC as established under KRS 200.700 and reforming the council to align with USC 42, Title 42, Chapter 105(II), 9837b and Section 642(b)(1)(a)(i) of the head Start Act. EO 2018-0581 reduces the number of appointed members from 26 to 12. One representative of the state agency responsible for child care will be appointed. As of 08/28/2018 that appointment as not yet been made.

Kentucky also has a Child Care Advisory Council. This Council was consulted at the quarterly meetings that fell during the development of the State Plan prior to submission. Additionally, council members were asked to volunteer to serve on the stakeholders group.

Citation: KRS 199.8983 Kentucky Child Care Advisory Council
Citation: KRS 200.700 Early Childhood Advisory Council - Membership - Meetings
Citation: EO 2018-0581 Executive order relating to the reorganization of various education boards & councils

c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for States to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many States and Tribes have consultation policies and procedures in place.

N/A

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

The CCDF State Plan preliminary draft goes through multiple opportunities for review and revisions. The process includes an internal review, a recommendations and comments period for fellow state agencies and departments involved in the development of the state plan, and a 30-day public comment period for which public and private entities may submit written comments and attend a public hearing regarding the state plan. The state plan draft is posted on the Lead Agency's website and was circulated for feedback through the advisory councils.

Web Link: Division of Child Care landing page

The following list of agencies and partnerships is not all-inclusive.

Office of the Inspector General
Department of Public Health
State coordinator for Homelessness
Division of Protection and Permanency
Division of Family Support
Department of Behavioral Health and Intellectual Disabilities
Kentucky Child Care Aware Child Care Resource and Referral Network of Services
Department of Workforce Development

Department of Education Child and Adult Care Food Program

Early Head Start-Child Care Partnership grantees

Kentucky Head Start Association

Governor's Office of Early Childhood

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

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

a) Date of the public hearing. 04/24/2018

Reminder: Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g. the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).

b) Date of notice of public hearing (date for the notice of public hearing identified in (a). 04/02/2018

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

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

DCBS advertises in regional newspapers, distributes notice via email distribution lists, and posts the preliminary state plan on its website for public comment.

Web Link: Division of Child Care landing page

The Legislative Research Commission posts a calendar of the standing and interim committees, as well as a daily calendar, accessible from the main site.

Web Link: Kentucky Legislature website (scroll down the page for calendars)

The DCBS-Division of Child Care also distributed the notice of the plan in the state's major newspapers, and through email distribution lists, and on its website.

d) Hearing site or method, including how geographic regions of the state or territory were addressed. A public hearing for the preliminary State Plan was held. Prior to the hearing, the date and location were advertised in regional newspapers to ensure stakeholders from all areas of the state were informed. Other solicitation methods included statewide email distribution and posting the preliminary plan on the DCBS-Division of Child Care website.

e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.) The preliminary plan is submitted in hardcopy to the Legislative Research Commission and made available through the Internet, email, and newspaper advertisement. The Kentucky Legislature makes an effort to ensure the pages of their website are accessible to individuals with disabilities in accordance with Section 508 of the Rehabilitation Act. Additionally, the Commonwealth of Kentucky has adopted the World Wide Web Consortium's Web Content Accessibility Guidelines 1.0 Conformance Level "Double-A". The Commonwealth of Kentucky provides, upon request, reasonable accommodations, including auxiliary aids and services necessary to afford an individual with a disability an equal opportunity to participate in all services, programs, and activities. To request materials in an alternative format, each agency's website provides information for contacting the person or persons responsible for providing the service within the agency. Persons with hearing and speech impairments can contact each agency by using the Kentucky Relay Service, a toll- free telecommunication device for the deaf (TDD). For voice to TDD, call 800-648-6057. For TDD to voice, call 800-648-6056.

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? Public comments received through the public hearing(s), stakeholder meetings, and written submissions are recorded and reviewed for consideration. Amendments to the drafted content were made as a result of public comment when appropriate.

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

2009-01)

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

Division of Child Care landing page

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

☑ Working with advisory committees.

Describe:

The State Plan Pre-Print is provided to the Child Care Advisory Council and Early Childhood Advisory Council for recommendations and input.

☑ Working with child care resource and referral agencies.

Describe:

The lead agency contracts with the University of Kentucky for Child Care Aware Network of Services, which works in coordination on the development of the CCDF State Plan.

☐ Providing translation in other languages.

Describe:

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

Describe:

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

Describe:

Kentucky's State Plan draft is posted on the division's website and filed with the Legislative Research Commission, which coordinates an opportunity for public hearing(s) in accordance with Kentucky Revised Statute (KRS) Chapter 45. Notices to stakeholder groups are also made via the Lead Agency's listserv. A stakeholder group

convened in May 2018 to provide feedback on the State Pan Pre-Print.

☐ Other.

Describe:

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

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

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

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

Include in the descriptions the goals of this coordination, such as:
- -- extending the day or year of services for families;
- -- smoothing transitions for children between programs or as they age into school;
- -- enhancing and aligning the quality of services for infants and toddlers through school-age children;
- -- linking comprehensive services to children in child care or school age settings; or
- -- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings

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

☑ (REQUIRED) Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns.

Describe the coordination goals and process:

The Department of Education and Kentucky Head Start grantees are partners with DCBS. These entities work collaboratively to ensure children are ready to succeed in school, including wrap-around service coordination with child care providers to expand accessibility and continuity of care, and to assist children enrolled in early childhood programs to receive full-day services. Additionally, DCBS coordinates with local government through the work of the Community Early Childhood Councils. Through a contract with the University of Kentucky's Network of Services, Regional Child Care Administrators are also tasked to coordinate with local government. These relationships help to align goals and coordinate efforts to expand accessibility and continuity of care for children receiving full day services to meet the needs of working families.

☑ (REQUIRED) State Advisory Council on Early Childhood Education and Care (or similar coordinating body) (pursuant to 642B(b)(I)(A)(i) of the Head Start Act).

Describe the coordination goals and process:

On August 1, 2018, Governor Bevin issued Executive Order 2018-0581 abolishing the ECAC as established under KRS 200.700 and reforming the council to align with USC 42, Title 42, Chapter 105(II), 9837b and Section 642(b)(1)(a)(i) of the head Start Act. EO 2018-0581 reduces the number of appointed members from 26 to 12. DCC has seen no interruption of communication with the ECAC during the re-establishment of ECAC. ECAC meetings occur quarterly and a representative of the Led Agency has been present throughout the transition. The Director of the Division of Child Care will represent the Department of Community Based Services on ECAC.

Goals of the ECAC include improving the quality of early childhood programs, increasing supply and access to quality care, creating an aligned and unified early childhood system across Head Start, public preschool, and child care settings, and improving kindergarten readiness.

Citation: KRS 200.700 Early Childhood Advisory Council -- Membership - Meetings
Citation: EO 2018-0581 Executive order relating to the reorganization of various

education boards & councils

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

☐ (REQUIRED) Indian tribe(s) and/or tribal organization(s), at the option of individual tribes.

Describe the coordination goals and process, including which tribe(s) was consulted:

☑ N/A-There are no Indian tribes and/or tribal organizations in the State.

☑ (REQUIRED) State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and and Part B, Section 619 for preschool).

Describe the coordination goals and process:

DCBS collaborates with the Department for Public Health First Steps early intervention program providing services to families and children age's birth to three who have developmental disabilities. Early Intervention Services are comprised of specially designed strategies provided in a group or individual setting including the child's natural caregiver environment through coordination with the child care facility and parent.

☑ (REQUIRED) State/territory office/director for Head Start state collaboration.

Describe the coordination goals and process:

DCBS coordinates with the Kentucky Head Start State Collaboration Director to work with families and early care and education providers to provide healthy environments and developmental experiences that promote growth and learning to ensure that all children enter school eager and excited to learn. This collaboration leverages partnerships and resources to remove barriers so every child enters school ready to grow and learn. Additionally, DCBS/DCC works closely with the Kentucky Head Start Association in an intentional effort to align goals and activities.

Web Link: First Steps Program

☑ (REQUIRED) State agency responsible for public health, including the agency responsible for immunizations.

Describe the coordination goals and process:

The Division of Child Care coordinates with the Department for Public Health (DPH), Division of Maternal and Child Health, which includes the First Steps Program (Part C), the Health Access Nurturing Development and Services (HANDS) program (Home Visitation), and Child Care Health Consultation Program. The Division of Child Care coordinates with each of these programs through shared training, information exchange, and committee workgroups. The Strengthening Families initiative through DPH is utilized throughout state agencies and represents a multi-disciplinary partnership of more than 20 public and private national, state, and local organizations dedicated to promoting six research-based protective factors into services and supports for children and their families. Kentucky Strengthening Families is part of the nationally recognized Strengthening Families: A Protective Factors Framework initiative coordinated nationally by the Center for the Study of Social Policy.

Web Link: Kentucky Strengthening Families

Web Link: Hands Program

☑ (REQUIRED) State/territory agency responsible for employment services/workforce development.

Describe the coordination goals and process:

The Department for Workforce Investment, Office of Employment and Training connects clients to employment, workforce information, education and training. This agency refers clients for DCBS and child care assistance services. Additionally, Kentucky's Resource and Referral Network utilizes regional workforce development specialists to provide training, skill development, and consultation for small business.

☑ (REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK).

Describe the coordination goals and process:

The Kentucky Department of Education (KDE) is a major partner with DCBS, as both entities work collaboratively to assure children are ready to succeed in school, including wrap-around service coordination with providers. KDE and DCBS serve on

multiple advisory committees and meet regularly to coordinate services. Currently, KDE and DCBS are drafting a Memorandum of Understanding to ensure a unified tiered quality rating and improvement system for both child care and public preschool.

☑ (REQUIRED) State/territory agency responsible for child care licensing.

Describe the coordination goals and process:

DCBS contracts with the Cabinet's Office of Inspector General (OIG) Division of Regulated Child Care (DRCC) for the inspection, licensing and certification of licensed child-care centers and certified family child-care homes pursuant to Kentucky statutes and regulations.

Regional DRCC staff are responsible for conducting on-site visits and investigating complaints of all Kentucky licensed child-care centers, certified family child care homes and registered providers to determine compliance with applicable child care regulations.

☑ (REQUIRED) State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs.

Describe the coordination goals and process:

Child care centers can participate in the Child and Adult Care Food Program independently or through a sponsoring organization, that accepts full administrative and financial responsibility for the program. The Child and Adult Care Food Program (CACFP) partners with childcare centers, daycares, Head Starts, family child-care homes to provide healthy meals to Kentuckians. The CACFP contributes to the wellness, healthy growth, and development of young children by providing institutions monetary reimbursement for serving healthy meals. This USDA program, administered by the Kentucky Department of Education, provides teaching the principles of good nutrition throughout the state.

The Lead Agency ensures that technical assistance staff and providers are aware of CACFP guidelines and how they intersect with child care regulations. Information on the CACFP is presented as part of the new provider orientation. Technical assistance staff are trained to make referrals for providers who are interested in enrolling in the CACFP. Coaches integrate CACFP resources into technical assistance visits when

appropriate.

☑ (REQUIRED) McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons.

Describe the coordination goals and process:

DCBS works in collaboration with the McKinney-Vento State Coordinator housed in the Kentucky Department of Education to identify children experiencing homelessness and prioritize services to those families. Those experiencing homelessness applying for child care assistance are eligible for expedited services. They are entitled to immediate approval and enrollment with a child care provider. Families experiencing homelessness have up to three calendar months from the date of application to return all other verification.

☑ (REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program.

Describe the coordination goals and process:

The agency responsible for the Temporary Assistance for Needy Families program is also located within DCBS. The Division of Family Support is responsible for administering and determining eligibility through Benefind, a single access point for the Supplemental Nutrition Assistance Program (SNAP), the Kentucky Transitional Assistance Program (K-TAP), Kentucky Works Program (KWP), Medicaid, and Child Care Assistance Program (CCAP). Division of Child Care staff have daily interaction and coordination of services with the Division of Family Support.

☑ (REQUIRED) Agency responsible for Medicaid and the state Children's Health Insurance Program.

Describe the coordination goals and process:

DCBS coordinates with the Department for Medicaid Services and the Department of Public Health to include access to comprehensive services to children in child care settings. Both agencies are housed within CHFS and work closely together on a daily basis. As noted above, eligibility for Medicaid programs is also determined in conjunction with eligibility determination for all other public assistance programs,

including child care.

☑ (REQUIRED) State/territory agency responsible for mental health

Describe the coordination goals and process:

DCBS and Department for Behavioral Health, Developmental and Intellectual Disabilities work cooperatively to ensure effective delivery of behavioral health, developmental and intellectual disability services to Kentuckians. The Division of Child Care coordinates with this agency through shared training, information exchange, and joint steering committees with common goals.

☑ (REQUIRED) Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development.

Describe the coordination goals and process:

CHFS contracts with the University of Kentucky's Interdisciplinary Human Development Institute (UK-HDI) to provide coordination and leadership to support the professional development of child care providers and trainers. These supports include a statewide regional network of Child Care Resource and Referral (CCR&R) services, which at a minimum include CCR&R services and coordination of professional development delivery, attainment, and content initiatives to support CCDF programs. Professional development supports and provides opportunities for early care and education trainers and higher education faculty to have access to knowledge and training to develop and enhance their skills as trainers of adults who work with young children and families. CHFS also coordinates with UK-HDI to provide services regarding child care development programs pertaining to Kentucky Higher Education Assistance Authority (KHEAA) scholarships, non-college scholarships, Commonwealth Child Care Credential, mini-grants and the development of individual professional growth plans for early care and education professionals participating in the scholarship program. Coordination of quality and health/safety initiatives to support the CCDF programs is also accomplished through this partnership.

☑ (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable).

Describe the coordination goals and process:

The Division of Child Care collaborates with Kentucky Out of School Alliance (KYOSA)

to establish afterschool quality standards as well as professional development training targeted to providers in afterschool settings. This collaboration with KYOSA seeks to establish afterschool quality standards as well as professional development training targeted to providers in afterschool settings.

☑ (REQUIRED) Agency responsible for emergency management and response.

Describe the coordination goals and process:

Kentucky's Division of Emergency Management is responsible for coordinating the state's emergency management and response. The Lead Agency partners with Emergency Management to ensure state and county level planning efforts are reviewed and updated in regular intervals.

Kentucky's Division of Emergency Management Authority: KRS 39A.050 2(c) designates responsibility for coordinating disaster and emergency services.

Planning guidance ensures that local, regional and state emergency operations plans meet minimum federal and state requirements for standard content, format and usability in the development and integration of Emergency Operations Plans.

Both the Division of Emergency Management and the Department for Public Health staff emergency operation centers during these times and coordinate with the lead agency for emergency social services, child care, and public assistance as needed.

Citation: KRS 39A.050 Responsibility of division for coordinating disaster and emergency services

Web Link: County ESF and EOP

Web Link: State ESF and EOP

The following are examples of optional partners a state might coordinate with to provide services. Check all that apply.

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

Describe

The Kentucky Department of Education (KDE), in collaboration with the State Board of

Education, ECAC, the Child Care Advisory Council, and CHFS, is offering the Preschool Partnership Grant designed to incentivize cooperative public/private partnerships between public school districts and child care providers to develop full day, high-quality programs for at-risk children. The incentive grant program represents an opportunity for school districts and child care providers to improve the quality of services in their communities.

Citation: FY19 Preschool Partnership Grant

☑ State/territory institutions for higher education, including community colleges

Describe

Under the direction of the Early Childhood Advisory Council (ECAC), the Lead Agency collaborates with system-level partners to promote scholarships administered by the Kentucky Higher Education Association Authority. Child Care Aware Professional Development (PD) Coaches disseminate scholarship information, recruit potential scholars, and assist individuals with professional development planning and enrollment procedures. The scholarships are awarded to individuals who take college-credit courses to earn the Child Development Associate Credential, Director's Credential, or pursue degrees in early childhood development. Faculty and staff at approved universities and colleges deliver a planned program of instruction that aligns with current research and promotes quality practices. After courses are successfully completed, scholars may apply for education-related expense reimbursement at the amount specified by the ECAC. Based on funding availability, scholars may also apply for milestone achievement awards upon completion of their program of study. These awards are paid jointly with state funds (90%) and by the scholar's employer (10%). Child Care Aware PD Coaches are available to support individuals to realize their professional development plans and achieve their goals.

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

Describe

N/A

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

Describe

Efforts between DCBS and Department for Public Health- Division of Maternal and Child Health are geared toward joint screening and training of practitioners. Home visitors are also provided updates to child care rules and regulations as a means of helping first-time parents choose quality arrangements for their children.

☑ Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment.

Describe

DCBS coordinates with the Department for Medicaid Services and the Department of Public Health to include access to comprehensive services to children in child care settings. These agencies are internal to CHFS.

☑ State/territory agency responsible for child welfare.

Describe

The Division of Protection and Permanency (DPP), also within the Department for Community Based Services, coordinates the state's child welfare and violence prevention efforts to prevent or intervene in child maltreatment. Preventive and protective child care assistance is provided statewide on a case-by-case basis as referred by protection and permanency staff, both in Central Office and the Division of Service Regions, to Division of Child Care for approval processing.

☐ State/territory liaison for military child care programs.

Describe

N/A

☑ Provider groups or associations.

Describe

DCBS leadership have regular meetings with provider advocacy groups to receive input to improve the quality of child care in the state and meet provider and family

needs.

☑ Parent groups or organizations.

Describe

The Lead Agency engages with parent groups and organizations through membership in or attendance of the Kentucky Child Care Advisory Council.

The 2015 Legislative session passed House Bill 429, an act establishing the Kentucky Child Care Advisory Council, which has been codified as KRS 199.8983. Members appointed by the Governor serve a term of three (3) years meeting quarterly. The council advises on matters affecting the operations, funding, and licensing of child-care centers and family child-care homes with recommendations address availability, affordability, accessibility and quality to the Department for Community Based Services, Division of Child Care.

Citation: KRS 199.8983 Kentucky Child Care Advisory Council

The 18 members include:

Commissioner of the department, or designee;

Four (4) members appointed by the Governor representing licensed child-care centers;

Two (2) members appointed by the Governor representing certified family child-care home;

Three (3) members appointed by the Governor who are parents and/or guardians receiving services in licensed centers or certified homes;

Three (3) members appointed by the Governor from the private sector who are knowledgeable about education, health, and development of children;

Director of the Division of Child Care within the department, or designee;

Commissioner of education, Education and Workforce Development Cabinet, or designee;

Executive director of the Governor's Office of Early Childhood, or designee;

Commissioner of the Department for Public Health within the cabinet, or designee;

State fire marshal, Public Protection Cabinet, or designee.

Unlike the Early Childhood Advisory Council, this statute includes child care providers

and parents among membership to offer their expertise and guidance from working as a provider in the field of early child care. The Child Care Advisory Council convened for the first time in October 2017 and meets quarterly.

☐ Other.

Describe

N/A

1.5 Optional Use of Combined Funds, CCDF Matching and Maintenance-of-Effort Funds

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

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

https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf
).

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

☐ No (If no, skip to question 1.5.2)

☑ Yes. If yes, describe at a minimum:

a) How you define "combine"

The Lead Agency defines "combine" as the comingling of state, federal and general funds into one child care-funding stream.

b) Which funds you will combine

Kentucky's Master Tobacco Settlement Agreement funds, State General Funds, Temporary Assistance for Needy Families block grant (TANF), and Child Care Development Funds (CCDF)

c) Your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations

Continued outcomes, as funds are available, include:

Ensure access to childcare services for homeless children;

Maintain qualifications and reliability training for licensing inspectors;

Maintain a system for annual inspection of child-care providers to ensure compliance with licensing standards and regulations;

Provide a comprehensive criminal background checks for child-care providers and childcare staff members;

Continue to enhance current quality activities that relate to improving the quality of care for infants and toddlers;

Maintain recent addition of initial 90-day job search to support workforce development and self-sufficiency of families; and
Maintain a graduated phase-out of assistance for families whose income has increased at the time of redetermination.

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

The DCBS-Division of Administration and Financial Management (DAFM) supports and oversees DCBS' budgeting accounting functions. DAFM prepares the Comprehensive Annual Financial Report and components of the CHFS Cost Allocation Plan, manages grants and payments, performs audits, and conducts contract development, maintenance, and monitoring.

e) How are the funds tracked and method of oversight

CHFS tracks funds through a system of internal controls within the accounting and policy organizational structure of DCBS and its CHFS-level partners, the Division of General Accounting and the Office of Finance and Budget. Within the State's financial management system, the enhanced Management Administrative Reporting System (eMARs) tracks and provides accountability for federal and state fund disbursements.

Web link: eMARS

The State Auditor of Public Accounts annually assesses the lead agency internal controls.

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

Note:
The Lead Agency must check at least public and/or private funds as matching, even if preK funds also will be used.

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

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

- [ ] N/A - The territory is not required to meet CCDF matching and MOE requirements
- [x] Public funds are used to meet the CCDF matching fund requirement. Public funds may include any general revenue funds, county or other local public funds, state/territory-specific funds (tobacco tax, lottery), or any other public funds.

  -- If checked, identify the source of funds:

  Kentucky's Master Tobacco Settlement Agreement funds, State General Funds, restricted funds (motor vehicle)

  -- If known, identify the estimated amount of public funds that the Lead Agency will receive: $ 37,125,500
- [ ] Private donated funds are used to meet the CCDF matching funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes (98.53(f)).

  -- 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 name, address, contact, and type of entities designated to receive private donated funds:

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

☐ State expenditures for preK programs are used to meet the CCDF matching funds requirement.

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

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

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: $

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

☐ State expenditures for preK programs are used to meet the CCDF maintenance-of-effort 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 98.55(h)(1) and 98.15(6).

☑ No

☐ Yes

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

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

-- If the percentage is more than 10 percent of the MOE requirement, describe how the State will coordinate its preK and child care services to expand the availability of child care:

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the MOE Fund requirement: $

1.6 Public-Private Partnerships

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

1.6.1 Identify and describe the entities with which and the levels at which the state/territory is partnering (level-state/territory, county/local, and/or programs), the goals of the partnerships, the ways that partnerships are expected to leverage existing service-delivery systems, the method of partnering, and examples of activities that have resulted from these partnerships (98.16(d)(2)).

CHFS has committed to ongoing endeavors to encourage the private sector to meet employee needs for child care. DCC, through subcontracts with Kentucky's Child Care Resource and Referral Network, has conducted several outreach activities targeted at local businesses, inclusive of a marketing plan with material and information to employers on the importance of high quality child care to the business community. CCDF-funded programs regularly meet with private, faith based, and community-based organization to strategize ways to collaborate and minimize duplication of service delivery.

Community Early Childhood Councils (CECC) created under KRS 200.707 to improve the quality and availability of child care, especially in low resource or high need areas, are a vehicle for bringing together community members to support issues of importance to children and families. CECCs provide a mechanism for attracting and assessing the unique local early care and education needs of a community. CECCs may apply for additional resources to meet these needs, as well as afford citizens the opportunity to provide input to state policy makers and planners.

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

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

- If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency, provide parents in the State with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.

- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).

- Collect data and provide information on the coordination of services and supports, including services under Section 619 and Part C of the Individuals with Disabilities Education Act;

- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State;

- Work to establish partnerships with public agencies and private entities, including faith- based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

Nothing in the statute or rule prohibits States from using CCR&R agencies to conduct or provide

additional services beyond those required by statute or rule.

Note: Use 1.7.1 to address if a state/territory funds a CCR&R organization, what services are provided and how it is structured and use section 7.6.1 to address the indicators of progress met by CCR&R organizations if they are funded by quality set-aside funds.

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

☐ No. The state/territory does not fund a CCR&R organization(s) and has no plans to establish one.

☑ Yes. The state/territory funds a CCR&R system. If yes, describe the following:

a) What services are provided through the CCR&R organization?

The Kentucky Partnership for Early Childhood Services, housed at the University of Kentucky Human Development Institute, is funded through a contract with CHFS to provide coordination and administration of statewide Child Care Resource and Referral (CCR&R) network of services. The contract deliverable is to ensure adequate supply of quality child care programs and services are available in each regional hub covering the Area Development District. DCBS-Division of Child Care, through its CCR&R contract, works actively to meet the needs of families, provide referral information to families seeking child care, increase family knowledge of the characteristics of high quality early care and education services, and increase provider access to training and/or professional development opportunities. CCR&R technical assistance staff can assist the public with the Child Care Provider Search function of Benefind. Eligibility questions are managed by local DCBS offices and not supported by CCR&R staff.

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

The CCR&R regional network of services include eight Regional Child Care Administrators, five Content Area Coordinators, one Technical Assistance (TA) Specialist for Health/Safety, four Technical Assistance QRIS Specialists, 24 Quality Coaches, four Technical Assistance Health/Safety Coaches, four Training Coaches,

and 13 Professional Development Coaches. Although services are divided by region to be responsive to local needs, there is central oversight for the entire network of services to ensure consistency.

1.8 Disaster Preparedness and Response Plan

Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they will address the needs of children'including the need for safe child care, before, during, and after a state of emergency declared by the Governor or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122)'through a Statewide Disaster Plan that, for a State, is developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to section 642B(b)(I)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i))) or similar coordinating body (98.16(aa)).

1.8.1 Describe how the Statewide Child Care Disaster Plan was developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care or similar coordinating body:

In the 2011 Regular Session, KRS 199.895 was created to required licensed child-care centers to create and maintain evacuation plans, inclusive of a reunification component and considerations of children with special needs, and share those plans annually with local emergency management personnel and parents. In the 2012 Regular Session, this statute was amended to also apply to certified family child-care homes, providers serving a smaller number of children in the provider's home. Enforcement of the statute began in 2012 following better than a year of collaborative work with the Kentucky Department of Public Health and Division of Emergency Management to include the development of a free, online evacuation plan template and training for child care providers, and enhanced awareness on the part of local emergency management. On September 13, 2012, DCBS formally proposed six administrative regulations to incorporate the evacuation plan requirement within

the standards for all child care providers in Kentucky, including registered providers in CCAP (i.e., family, friend, or neighbor providers). The administrative regulations were adopted into law March 8, 2013.

Citation: KRS 199.895 Evacuation plan required for child care centers and family child care homes

In child care, every employee of a licensed, certified, or registered child care provider with care responsibilities is required to have a six-hour orientation training within the first 90 days of employment. An entire section of the training is devoted to emergency procedures. This section was modified in 2010 to address evacuation of children with special needs and emphasize the importance of knowing community emergency response plans.

Child care providers are required to update their evacuation plan annual. Providers are required to share a copy of the plan with local emergency management officials and to guardians of children served as well as provide training to staff each time the plan is updated.

The Child Care Resource and Referral Agencies (represented statewide) are members of Child Care Aware (CAA) and provide ongoing training and technical assistance on emergency preparedness through their websites and other continuing education and professional development opportunities.

The Child Care Health Consultation for Healthy Start in Child Care Program, through the Department for Public Health, provides training and technical assistance to child care providers utilizing the Child Care Emergency / Disaster Preparedness Guide as a basis for "best practice".

Web Link: Child Care Emergency / Disaster Preparedness Guide

1.8.2 Describe how the Statewide Disaster Plan includes the Lead Agency's guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster and temporary operating standards for child care after a disaster:

DCBS continues to gain more in-house expertise with continuity of operations planning and emergency preparedness. DCBS staff participate in trainings, conferences, webcasts, and informational calls to the extent agency priorities and resources allow.

DCBS Central Office, in partnership with its regional offices and service agents, can mobilize staff from surrounding counties/regions and other resources to ensure service coverage for a local office with compromised capabilities as a result of a disaster or an emergency. Benefind is available via the Internet to staff statewide and is tested for disaster compliance/recovery. In addition to resources within the agency, DCBS is able to access additional communication and a technology resource through sister state agencies and has means through these partnerships to better adapt to the scope of an emergency or disaster. DCBS Central Office regularly, if not daily, also participates in debriefings and supports communications among state agency partners when a state/federal disaster or emergency is declared.

The Cabinet for Health and Family Services' Office of Inspector General (OIG) helps keep Kentucky's children safe by performing inspections and investigations of child care centers. The OIG is responsible for certifying homes and licensing day care centers throughout Kentucky. One aspect of the licensure process includes verifying that a child care center has documentation of practiced emergency drills and procedures.

Kentucky law requires all child care centers to have written records of practiced fire, earthquake and tornado drills. In addition, child care centers must have written plans and diagrams outlining the course of action in the event of a natural or manmade disaster.

Child care centers per regulation are mandated to develop reunification plans for parents and their children in case staff and children have to evacuate a center because of an emergency and file with the local emergency management director. Child Care facilities provide parents information about drills and the procedures that a center follows during disaster situations,

including a designated place to meet in the event the center must be evacuated.

Web Link: Child Care Emergency / Disaster Preparedness Guide
Citation: State Emergency Operation Plan

1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services:

1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place-evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions:

KRS 199.895 requires that a child-care center licensed under KRS 199.896 and a family child-care home certified under KRS 199.8982 shall have a written plan for evacuation in the event of fire, natural disaster, or other threatening situation that may pose a health or safety hazard to the children in the center or home.

The written plan shall include but not be limited to:
(a) A designated relocation site and evacuation route;
(b) Procedures for notifying parents of the relocation and ensuring family reunification;
(c) Procedures to address the needs of individual children including children with special needs;
(d) Instructions relating to the training of staff or the reassignment of staff duties, as appropriate;
(e) Coordination with local emergency management officials; and
(f) A program to ensure that appropriate staff are familiar with the plan's components.

A child-care center and family child-care home are statutorily required to update the

evacuation plan by December 31 each year, retain an updated copy of the plan for evacuation, and provide an updated copy to appropriate local emergency management officials. In addition, a copy shall be provided to each parent, custodian, or guardian at the time of the child's enrollment and whenever the plan is updated.

Citation: KRS 199.895 Evacuation plan required for child-care centers and family child-care homes

Recommendations for developing procedures on in place-evacuation, relocation, shelter-in-place, lockdown, communications with and reunification of families, continuity of operations, and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions are provided in the child care resource : Things to Know when Preparing for an Emergency and/or Disaster in Child Care and in the online training Child Care Emergency/Disaster Preparedness. Providers are encouraged to contact a Child Care Health Consultant for recommendations on supporting the needs of specific children when developing a response plan.

Weblink: Things to Know when Preparing for an Emergency and/or Disaster in Child Care
Weblink: Child Care Emergency/Disaster Preparedness training

1.8.5 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place for child care staff and volunteers-emergency preparedness training and practice drills as required in 98.41(a)(1)(vii):

922 KAR 2:090 requires that a child care center shall maintain and document a written record of quarterly practiced earthquake drills, tornado drills, fire drills conducted during the hours of operation detailing the date, time, and children who participated with a written plan and diagram outlining the course of action in the event of a natural or manmade disaster, posted in a prominent place.

Child care facilities are required to notify the cabinet of any incident involving fire, natural

disaster within 24 hours and if facility is damaged and requires temporary or permanent closure as soon as practicable.

Licensing surveyor's inspection of child care facilities include review of the written plan to ensure it describes, in detail, how children will be kept safe during a disaster, and ensure the plan includes specific information listed in KRS 199.895. If facility is found not to be in regulatory compliance, the cabinet completes a written statement of deficiency that requires a written plan of correction from the facility.

Citation: 922 KAR 2:090 Child-care center licensure[A1]

In the 2011 Regular Session, KRS 199.895 was created to required licensed child-care centers to create and maintain evacuation plans, inclusive of a reunification component and considerations of children with special needs, and share those plans annually with local emergency management personnel and parents. In the 2012 Regular Session, this statute was amended to also apply to certified family child-care homes, providers serving a smaller number of children in the provider's home. Enforcement of the statute began in 2012 following better than a year of collaborative work with the Kentucky Department of Public Health and Division of Emergency Management to include the development of a free, online evacuation plan template and training for child care providers, and enhanced awareness on the part of local emergency management. On September 13, 2012, DCBS formally proposed six administrative regulations to incorporate the evacuation plan requirement within the standards for all child care providers in Kentucky, including registered providers in CCAP (i.e., family, friend, or neighbor providers). The administrative regulations were adopted into law March 8, 2013.

Citation: KRS 199.895 Evacuation plan required for child care centers and family child care homes

1.8.6 Provide the link to the website where the statewide child care disaster plan is available:

Citation: State Emergency Operation Plan

2 Promote Family Engagement through Outreach and Consumer Education

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

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

In this section, Lead Agencies will delineate the consumer and provider education information related to child care, as well as other services, including developmental screenings, that is made available to parents, providers, and the general public and the ways that it is made available. This section also covers the parental complaint process and the consumer education website that has been developed by the Lead Agency and the manner in which it links to the national website and hotline. Finally, this section addresses the consumer statement that is provided to parents supported with CCDF funds.

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

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

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

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

Describe:

CHFS employees receive training on cultural competency, effective communication, and the use of interpreters/translators, as well as the policy and procedures on access to LEP services at no cost and without unreasonable delay.

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

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

Describe:

The Commonwealth of Kentucky provides, upon request, reasonable accommodations, including auxiliary aids and services necessary to afford an individual with a disability an equal opportunity to participate in all services, programs, and activities. DCBS collaborates with the Department for Public Health First Steps early intervention program providing services to families and children age's birth to three who have developmental disabilities.

2.2 Parental Complaint Process

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

providers; the process for substantiating complaints; the manner in which the Lead Agency maintains a record of substantiated parental complaints; and ways that the Lead Agency makes information on such parental complaints available to the public on request (98.16; 98.32).

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

DCBS contracts with the Cabinet's Office of Inspector General (OIG) Division of Regulated Child Care (DRCC) for the inspection, licensing and certification of licensed child-care centers and certified family child-care homes pursuant to Kentucky statutes and regulations.

Complaints may be submitted via phone, email, fax, or in-person to the regional DRCC Enforcement Branch. The Enforcement Branch staff receive and investigate complaints concerning licensed centers, certified homes and registered providers. A complaint is directed to DRCC Central Office or its Enforcement Branch located in four regions of the state or the Division of Child Care, which routes to DRCC. A complaint may be submitted in written form, by phone, or email from the parent or other concerned party regarding a licensed child-care center, family child-care home, or registered child care provider, including allegations of operating as an illegal childcare provider within the Commonwealth.

Web link: Placing a Complaint (How-To Document)

2.2.2 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring:

Complaints may be submitted via phone, email, fax, or in-person to the regional DRCC Enforcement Branch. The Enforcement Branch, upon receipt of a complaint or allegation, conducts an investigation within 30 days using methodology for prioritization of investigations. The process for screening begins with the intake report information, name of center or provider, name of complainant, description of complaint situation, who the alledged perpetrator(s) are, how the child was affected, witnesses, names of staff or children involved,

and what actions were taken by the provider.

Once the parent complaint is documented, a surveyor will offer an unannounced visit to the child care provider to collect information on the provider's explanation of the situation. Staff members will be interviewed for information, and the licensing body will review all needed information (ex. Video footage, staff handbooks, etc) before making a decision on whether or not the complaint is substantiated. If the complaint is substantiated, then the licensing body will work with the provider to create a corrective action plan to resolve the problem.

Web link: Placing a Complaint (How-To Document)

2.2.3 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring:

DRCC Regional Enforcement Branch, upon receipt of a complaint or allegation, conducts an investigation within 30 days using methodology for prioritization of investigations. The process for screening begins with the intake report information, name of center or provider, name of complainant, description of complaint situation, who the alledged perpetrator(s) are, how was the child affected, witnesses, names of staff or children involved, and what action were taken by the provider.

Web link: Placing a Complaint (How-To Document)

2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints:

DRCC maintains an electronic history of parental complaints within the Kentucky Integrated Child Care System (KICCS). Electronic records are maintained for a period of five years and paper copies for records older than five years are stored in historical archives and may be located through Kentucky Libraries and Archives. The KICCS system contains detailed

history notes and results of every inspection report are available to the public on Benefind through the Kentucky Child Care Provider Search.

Web Link: Kentucky Child Care Provider Search

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

DRCC's inspection history contains information on the provider renewal inspection and results of any complaint investigations. The public can review the inspection history on all active providers by accessing the Benefind public child care search.

Web Link: Kentucky Child Care Provider Search

2.2.6 Provide the citation to the Lead Agency's policy and process related to parental complaints:

The Division of Regulated Child Care processes complaints that stem from multiple sources. DCBS, Division of Child Care, Kentucky Department of Education and the public are a few of the entities that report complaints. Complaints may be taken in writing, by phone and via email. The Division of Regulated Child Care has a priority list that determines levels of priority about the complaint and response times. In accordance with the list, regional office Human Services Surveyors conduct an investigation on complaints received. Documentation and findings of the inspection are kept in the Kentucky Integrated Child Care System (KICCS) and the Division of Regulated Child Care's SharePoint library.

Citation: KRS 199.896 License requirement Section 5
Citation: 922 KAR 2:090. Child-care center licensure Section 12

2.3 Consumer Education Website

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

To certify, respond to questions 2.3.1 through 2.3.10 by describing how the Lead Agency meets these requirements and provide the link in 2.3.11. If the Lead Agency has not fully implemented the Consumer Education website elements identified in Section 2.3, then respond to question 2.3.12. Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved will require a CCDF Plan amendment.

2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible:

In May of 2018, CHFS transitioned to a new web platform. The new platform is designed to meet website accessibility standards in accordance with Section 508 of the Rehabilitation Act. The Division of Child Care landing page can be easily found through a basic web search. The landing page connects providers, parents, and the general public to regulations, FAQs, and resources. For example, the Kentucky All STARS landing page provides a brief overview of the quality rating and improvement system and also links to sub-pages, such as the Provider Information Page, to find additional resources on more concentrated. All CHFS web pages include contact information, links to related services, and Spanish translation. The Division of Child Care also has a Policies and Procedures Coordinator who is responsible for website updates. That staff member is constantly evaluating the site for potential improvements and making additions and changes as the need is identified.

Benefind was introduced in 2017 as a one-stop-shop for assistance and support programs in Kentucky. By interagency agreement, the Office of Administrative Technology Services unifies the Kentucky Integrated Child Care System (KICCS) and Public Child Care Provider Search through the Benefind portal. Benefind ensures information is accessible to families and the general public. Benefind allows consumers to learn about subsidy program eligibility, to start and application for assistance, and to search for child care. Benefind also contains consumer education information and links to resources located on related CHFS websites. Benefind translates site information into the nine languages primarily spoken in Kentucky. The Lead Agency meets weekly with technology support to discuss improvements and required changes to ensure Benefind remains consumer-friendly and easily accessible.

Web Link: Department for Community Based Services
Web link: Benefind

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

Information on the Benefind system is available in the following languages: English, Spanish, Arabic, Bosnian, Chinese, French, Russian, Somali, and Vietnamese

CHFS makes Language Access Services available to persons with Limited English Proficiency. Interpretation is provided free-of-charge to clients of the Cabinet. Language Access staff provide translation of written materials as well as interpreter services for direct communication.

The primary language offered is Spanish, but information is readily available in the top nine most common languages in Kentucky. In the event there is an interpretation need for a less common language, the Language Access staff will assist with identification of interpreters. DCBS and its contractual partners follow the CHFS Office of Human Resource Management's procedures for providing Language Access Services to client with LEP. Other languages common in Kentucky's population include Vietnamese, Somalian, and

Russian.

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

In May of 2018, CHFS transitioned to a new web platform. The new platform is designed to meet website accessibility standards in accordance with Section 508 of the Rehabilitation Act. Images on the CHFS website include alternative text describing the graphics. Pages are designed to be compatible with screen reading software.

Accomodations Statement from the CHFS website: The Commonwealth of Kentucky provides, upon request, reasonable accommodations including auxiliary aids and services necessary to afford an individual with a disability an equal opportunity to participate in all services, programs and activities. To request materials in an alternative format, each agency web site provides information for contacting the person or persons responsible for providing the service within the agency. Persons with hearing and speech impairments can contact each agency by using the Kentucky Relay Service, a toll-free telecommunication device for the deaf (TDD). For voice to TDD, call 800-648-6057. For TDD to voice, call 800-648-6056.

Web Link: Department for Community Based Services

2.3.4 Lead Agency processes related to child care.

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

a) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in

section 5.3.6:

Web Link: Division of Child Care Provider Information Page

b) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2:

Prior to licensure approval, DRCC staff conduct at least one unannounced on-site inspection to determine whether the childcare applicant meets the Kentucky Administrative Regulations 922 KAR 2:090, 922 KAR 2:120, and 922 KAR 2:280; and one follow-up inspection during the preliminary period prior to issuance of a regular license.

Monitoring and Inspection Requirements:

922 KAR 2:090 Child-care center licensure Section 6

c) Provide the link to the policies and procedures related to criminal background checks for staff members of child care providers and the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in sections 5.4.1 and 5.4.11:

Disqualifying offenses are outlined in 922 KAR 2:280 Background checks for child care Section 6.

922 KAR 2:280 is linked on the Division of Child Care landing page. General information on the National Background Check Program can be found on the Division of Child Care landing page. Additional resources such as FAQs and a Tip Sheet are available in the links located in the right hand text box.

Web Link: Division of Child Care landing page

2.3.5 List of providers

The consumer education website must include a list of all licensed providers and, at the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt. Providers caring for children to whom they are related do not

need to be included. The list of providers must be searchable by ZIP Code.

a) Provide the website link to the searchable list of child care providers:
Web Link: Kentucky Child Care Provider Search

By interagency agreement, the Office of Administrative Technology Services maintains the Kentucky Integrated Child Care System (KICCS) and Public Child Care Provider Search through the Benefind system. This ensures information is accessible to families and the general public. Benefind system information is available in the following languages: English, Spanish, Arabic, Bosnian, Chinese, French, Russian, Somali, and Vietnamese.

Parents may search for child care by provider address, provider name, and by license/certification number. Advance search allows you to search by provider type, age group served, distance from either home or work county, Quality Rating Level, and whether Child Care Assistance subsidy payments are accepted. The provider summary also includes hours of operation, ages served from infant to school-age, special needs services, accreditations, transportation services, and food service permit as well as complaint and inspection reports for parents to make informed decisions in choosing quality child care.

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

- ☐ License-exempt center-based CCDF providers
- ☐ License-exempt family child care (FCC) CCDF providers
- ☐ License-exempt non-CCDF providers
- ☐ Relative CCDF child care providers
- ☐ Other.

Describe

N/A

c) Identify what informational elements, if any, are available in the searchable results. Note: Quality information (if available) and monitoring results are required on the website

but are not required to be a part of the search results.

Licensed Providers

- [x] Contact Information
- [x] Enrollment Capacity
- [ ] Years in Operation
- [ ] Provider Education and Training
- [ ] Languages Spoken
- [x] Quality Information
- [x] Monitoring Reports
- [x] Other.

Describe:

Additional search criterea include distance from location, hours of operation, accredidations, food permit, transportation, and CCAP subsidy.

License-Exempt, non-CCDF Providers

- [ ] Contact Information
- [ ] Enrollment Capacity
- [ ] Years in Operation
- [ ] Provider Education and Training
- [ ] Languages Spoken
- [ ] Quality Information
- [ ] Monitoring Reports
- [ ] Other.

Describe:

N/A

License-Exempt CCDF Center Based Providers

- [ ] Contact Information
- [ ] Enrollment Capacity
- [ ] Years in Operation
- [ ] Provider Education and Training

- ☐ Languages Spoken
- ☐ Quality Information
- ☐ Monitoring Reports
- ☐ Other.

Describe:

N/A

License-Exempt CCDF Family Child Care

- ☐ Contact Information
- ☐ Enrollment Capacity
- ☐ Years in Operation
- ☐ Provider Education and Training
- ☐ Languages Spoken
- ☐ Quality Information
- ☐ Monitoring Reports
- ☐ Other.

Describe:

N/A

Relative CCDF Providers

- ☐ Contact Information
- ☐ Enrollment Capacity
- ☐ Years in Operation
- ☐ Provider Education and Training
- ☐ Languages Spoken
- ☐ Quality Information
- ☐ Monitoring Reports
- ☐ Other.

Describe:

N/A

Other.

Describe:

N/A

- [ ] Contact Information
- [ ] Enrollment Capacity
- [ ] Years in Operation
- [ ] Provider Education and Training
- [ ] Languages Spoken
- [ ] Quality Information
- [ ] Monitoring Reports
- [ ] Other.

Describe:

N/A

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

a) How does the Lead Agency determine quality ratings or other quality information to include on the website?

- [x] Quality rating and improvement system
- [x] National accreditation
- [ ] Enhanced licensing system
- [ ] Meeting Head Start/Early Head Start requirements
- [ ] Meeting prekindergarten quality requirements

☐ School-age standards, where applicable

☐ Other.

Describe

N/A

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

☑ Licensed CCDF providers.

Describe the quality information:

The Kentucky All STARS tiered quality rating and improvement system consists of 5 stars, with 3 to 5 stars considered high quality. Quality ratings are reflected in the Benefind Child Care Provider Search. Participation in All STARS is mandatory for providers receiving public funds.

☑ Licensed non-CCDF providers.

Describe the quality information:

Providers not receiving public funds may opt-out of Kentucky All STARS. Providers who have opted-out are listed in the Child Care Provider Search as "Not Participating."

☐ License-exempt center-based CCDF providers.

Describe the quality information:

N/A

☐ License-exempt FCC CCDF providers.

Describe the quality information:

N/A

☐ License-exempt non-CCDF providers.

Describe the quality information:

N/A

☐ Relative child care providers.

Describe the quality information:

N/A

☐ Other.

Describe

N/A

2.3.7 Lead Agencies are required to post monitoring and inspection reports on the consumer education website for each licensed provider and for each non-relative provider eligible to provide CCDF services on the consumer education website. These reports must include results of required annual monitoring visits and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. The reports must be in plain language and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of reports when available, going forward (not retrospectively), beginning October 1, 2018.

Certify by responding to the questions below:

a) What is the Lead Agency's definition of plain language and describe the process for receiving feedback from parents and the public about readability of reports.

Cabinet standards define plain language to mean that materials are written at a 6th grade reading level and accessible to a broad audience. Inspection reports include health and safety requirements as specified in 922 KAR 2:120 Child-care health and safety standards. The report header includes clear contact information for the Division or Regulated Child Care should a parent or member of the public have questions regarding the report. Parent and public feedback for child care policy and procedures is elicited through participation in the Child Care Advisory Council or Community Early Childhood Councils.

The Kentucky Public Child Care Provider portal search is accessible to families and the

public to review complete history of completed investigations and inspections, including the last date of inspection and all history of violations if applicable.

Web Link: Sample monitoring report
Citation: 922 KAR 2:120 Child-care health and safety standards

b) Are monitoring and inspection reports in plain language?

☑ If yes,

include a website link to a sample monitoring report.

Monitoring and inspection reports, including any fatalities or serious injuries, are available to the public through the Benefind Child Care Provider Search.

Web Link: Kentucky Child Care Provider Search

☐ If no,

describe how plain language summaries are used to meet the regulatory requirements and include a link to a sample summary.

N/A

c) Check to certify what the monitoring and inspection reports and/or their plain language summaries include:

☑ Date of inspection

☑ Health and safety violations, including those violations that resulted in fatalities or serious injuries.

Describe how these health and safety violations are prominently displayed.

Monitoring and inspection reports, including any fatalities or serious injuries, are available to the public through the Benefind Child Care Provider Search.

Web Link: Benefind Child Care Provider Search

☑ Corrective action plans taken by the State and/or child care provider.

Describe

Corrective action plans (CAPs) will be included in a future release of Benefind. The

Lead Agency has developed a change request for submission to Benfind developers to include corrective action plans in the provider's Inspection History found within the Kentucky Child Care Provider Search. That release is currently schedule for September 2019.

d) The process for correcting inaccuracies in reports.

Benefind displays information housed within the Kentucky Integrated Child Care System. This information is entered by central office staff.

If a provider would like to dispute the content of an investigation report, they may submit a written complaint to the Division of Regulated Child Care stating the inaccuracies in the inspection or deficeiency report within thirty (30) calendar days after the date of the action. Corrections or changes made to reports are reflected immediately in KICCS and updated nightly in Benefind.

e) The process for providers to appeal the findings in reports, including the time requirements, timeframes for filing the appeal, for the investigation, and for removal of any violations from the website determined on appeal to be unfounded.

A provider may request an administrative hearing regarding certification, licensure, or civil monetary penalty through the Office of Inspector General, Division of Regulated Child Care submitting a written complaint within thirty (30) calendar days after the date of the action. Unfounded violations are removed immediately from the system. Corrections or changes made to reports are reflected immediately in KICCS and updated nightly in Benefind.

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

An action completed within thirty (30) working days from date of action imposed is considered timely. Once an action is taken, it will be updated in KICCS. Information found within the Kentucky Child Care Provider Search is populated directly from KICCS.

The systems communicate nightly. Changes made in KICCS are refected in the provider profile the following day.

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

All system information and data on the Benefind website will remain available indefinitely. Requests to remove reports must be submitted by way of appeal to the Division of Regulated Child Care.

An action completed within thirty (30) working days from date of action imposed is considered timely. Once an action is taken, it will be updated in KICCS. Information found within the Kentucky Child Care Provider Search is populated directly from KICCS. The systems communicate nightly. Changes made in KICCS are refected in the provider profile the following day.

h) Any additional providers on which the Lead Agency chooses to include reports. Note - Licensed providers and CCDF providers must have monitoring and inspection reports posted on their consumer education website.

- ☐ License-exempt non-CCDF providers
- ☐ Relative child care providers
- ☐ Other.

Describe

N/A

2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted on the consumer education website. This aggregate information on serious injuries and deaths must be organized by category of care (e.g., center, FCC, etc.) and licensing status for all eligible CCDF provider categories in the state. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. The aggregate report should not list individual provider-specific information or names.

Certify by providing:

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

Regulation requires a provider to report accident or injury requiring medical care within 24 hours from time of incident to the DCBS-Division of Protection and Permanency, DCBS- Division of Child Care, and OIG-Division of Regulated Child Care. A child fatality must be reported within one hour.

Citation: 922 KAR 2:090 Child care licensure (Section 12)
Citation: 22 KAR 2:100 Certification of Family Child-care Homes (Section 19)

The Child Protection Branch maintains records and prepares the Child Fatality/Near Fatality Annual Report available to inter-departmental agencies and the public.
Web Link: Child Fatality Review and Injury Prevention

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

Substantiated child abuse is the admission of abuse or neglect by the person responsible; or judicial finding of child abuse or neglect; or a preponderance of evidence exists that abuse or neglect was committed.

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

Any injury to a child that requires medical attention and care.

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

Web Link: Child Fatality Review and Injury Prevention

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

The lead agency contracts with the Kentucky Partnership for Early Childhood Services to provide assistance with referrals throughout the commonwealth. The Benefind Child Care Provider Search features the Kentucky Partnership for Early Childhood Services on the main landing page.

Web Link: Kentucky Partnership for Early Childhood Services
Web Link: Child Care Aware 5 Steps to Choosing Child Care

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

The Kentucky Child Care Provider Search, available through Benefind, allows families to access information on child care services at any hour of the day. This information is available in nine languages.

Information and the availability of child care services are also provided through brochures, a quarterly newsletter, provider and public listservs used to disseminate important information related to child care services, and through direct communications, such as public forums and direct contact by Kentucky Child Care Aware Coaches through mentoring and coaching.

Information about child care assistance is posted in every local DCBS office in all 120 counties. Each applicant for any type of public assistance is screened for other types of assistance for which they may qualify, including child care assistance/subsidy.

Web Link: Kentucky Child Care Provider Search

Web Link: Division of Child Care - Child Care Assistance

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

Web Link: Benefind Child Care Provider Search

Web Link: Division of Child Care Website

2.3.12 Other. Identify and describe the components that are still pending per the instructions on
CCDF Plan Response Options for Areas where Implementation is Still in Progress
in the Introduction.

N/A

2.4 Additional Consumer and Provider Education

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

In questions 2.4.1 through 2.4.5, certify by describing:

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

The Kentucky Child Care Provider Search, available through Benfind, allows families to access information on child care services at any hour of the day. This information is available in nine languages.

Information and the availability of child care services are also provided through brochures, a quarterly newsletter, provider and public listservs used to disseminate important information related to child care services, and through direct communications, such as public forums and direct contact by Kentucky Child Care Aware Coaches through mentoring and coaching.

Information about child care assistance is also posted in every local DCBS office in all 120 counties. Each applicant for any type of public assistance is screened for other types of assistance for which they may qualify, including child care assistance/subsidy.

Web Link: Kentucky Child Care Provider Search
Web Link: Division of Child Care - Child Care Assistance

2.4.2 The partnerships formed to make information about the availability of child care services available to families.

The Early Head Start-Child Care Partnership (EHS-CCP) initiative brings together the best of Early Head Start and child care through layering of funding to provide comprehensive and continuous services to low-income infants, toddlers, and their families. EHS-CCP enhances developmental services and supports for low-income infants and toddlers and their families by providing strong relationship-based experiences and preparing them for the transition into

Head Start and preschool.

Partnership for Early Childhood Services at the University of Kentucky provides research, professional learning, and development supporting high quality research, professional learning and development activities focused on young children, their families, and those who serve them.

DCBS also partners with various human services agencies and advocacy groups on the local level to disseminate information abou the availability of child care services to families.

Web Link: Partnership for Early Childhood Services

2.4.3 How the Lead Agency provides the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers. In the description include, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners who assist in providing this information.

- ☑ Temporary Assistance for Needy Families program:
  Information is provided at application for assistance for child care through Benefind
  Web Link: Benefind

- ☑ Head Start and Early Head Start programs:
  Information is provided at application for assistance for child care and Department of Education website.

- ☑ Low Income Home Energy Assistance Program (LIHEAP):
  Information is provided at application for assistance for child care and Department for Community Based Services web site.
  Web Link: Appying for LIHEAP

☑ Supplemental Nutrition Assistance Programs (SNAP) Program:

Information is provided at application for assistance for child care and Benefind web site.

Web Link: Benefind

☑ Women, Infants, and Children Program (WIC) program:

Information is provided at application for assistance for child care and Department for Public Health and Division of Child Care web site.

Web Link: Applying for WIC

☑ Child and Adult Care Food Program(CACFP):

Information is provided with provider license and certification application and Kentucky Department of Education website.

Web Link: Applying for CACFP

☑ Medicaid and Children's Health Insurance Program (CHIP):

Information is provided at application for assistance for child care and Benefind web site.

Web Link: Benefind

☑ Programs carried out under IDEA Part B, Section 619 and Part C:

Information is provided at application for assistance for child care and Department for Public Health and Division of Child Care web site.

Web Link: First Steps Program

2.4.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children's development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information

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

State-level partners include the Governor's Office of Early Childhood, the University of Kentucky Human Development Institute, Eastern Kentucky University, Family Resource and Youth Service Centers, Department for Behavioral Health, Developmental, and Intellectual Disabilities, Department for Public Health, Strengthening Families Kentucky (multidisciplinary group), Kentucky Department of Education, Head Start, Kentucky Partnership for Families and Children, Inc., and numerous independent trainers. National partners include entities such as Zero to Three and Strengthening Families.

Providers and families can be connected to these resources through the website, coaching, or various other methods. The DCBS-Division of Child Care partners with the Governor's Office of Early Childhood and the Division of Regulated Child Care to provide parents, providers, and the general public access to web-based information and electronic newsletters. Parents have access to electronic resources, including newsletters, parent guides, and additional print ready materials with tips and information regarding child development. The DCBS-Division of Child Care partners with the University of Kentucky Human Development Institute to administer the statewide Child Care Aware Resource and Referral Network of Services, which provides technical assistance regarding health and safety and quality child care. The network includes content coordinators who maintain expertise in current best practice in order to equip technical assistance coaches with the resources necessary to encourage providers to share information with parents of the children they serve. Additional partners include Family Resource Youth Services Centers (school based), the Department for Public Health Maternal and Child Health (HANDS Home Visitation and Early Childhood Mental Health), the Department for Behavioral Health, Developmental and Intellectual Disabilities (Community Mental Health Centers, Early Childhood Mental Health), First Steps (field staff), Head Start, Kentucky Partnership for Families and Children Inc., and independent trainers.

2.4.5 Describe how information on the Lead Agency's policies regarding the social-emotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models based on research and

best practices for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include what information is provided, how the information is provided, and how information is tailored to a variety of audiences and include any partners in providing this information.

Kentucky Strengthening Families (KYSF) represents a multi-disciplinary partnership of over 20 national, state and local, and public and private organizations dedicated to embedding six research-based Protective Factors into services and supports for children and their families.

Supporting families is a key strategy to promote school readiness and prevent child abuse and neglect. All families experience times of stress. Research demonstrates that children grow and learn best in families with the supports and skills to deal with those times. By supporting families and building their skills to cope with stressors, we can increase school readiness and reduce the likelihood abuse will occur in families. Kentucky Strengthening Families is part of the nationally recognized Strengthening Families: A Protective Factors Framework initiative coordinated nationally by the Center for the Study of Social Policy.

The DCBS-Division of Child Care partners with the Governor's Office of Early Childhood and the Division of Regulated Child Care to provide parents, providers, and the general public access to web-based information and electronic newsletters. Parents have access to electronic resources, including newsletters, parent guides, and additional print ready materials with tips and information regarding child development. The DCBS-Division of Child Care partners with the University of Kentucky Human Development Institute to administer the statewide Child Care Aware Resource and Referral Network of Services, which provides technical assistance regarding health and safety and quality child care. The network includes content coordinators who maintain expertise in current best practice in order to equip technical assistance coaches with the resources necessary to encourage providers to share information with parents of the children they serve. Additional partners include Family Resource Youth Services Centers (school based), the Department for Public Health Maternal and Child Health (HANDS Home Visitation and Early Childhood Mental Health), the Department for Behavioral Health, Developmental and Intellectual Disabilities (Community Mental Health Centers, Early Childhood Mental Health), First Steps (field staff), Head Start, Kentucky Partnership for Families and Children Inc., and independent trainers.

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

Kentucky Child Care Aware Coaches provide technical assistance to prevent and address discipline issues in child care programs and recommend best practices to develop policies that support children's social-emotional and behavioral health to prevent suspension and expulsion from early childhood programs.

Connect the Dots is a joint collaboration between multiple early education and mental health specialists across Kentucky. The collaboration was built to address a common need: The need for a short yet powerful skills-based training teaching the basics of social and emotional best practices. Connect the Dots highlights 4 easy to remember steps to address challenging behaviors. The 4 steps encompass both the "well-being" and the "well-doing" of children to ensure strong social and emotional skills needed for success in school and life. Connect the Dots resources and trainings are for anyone who works with children ages two to five years old.

Web Link: Connect the Dots

2.5 Procedures for Providing Information on Developmental Screenings

Lead Agencies are required to provide information on developmental screenings, including information on resources and services that the State can deploy, such as the use of the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C, in conducting those developmental screenings and in providing referrals to services for children who receive subsidies. Lead Agencies must also include a description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). Lead Agencies are required to

provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)).

2.5.1 Certify by describing:

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

The Kentucky All STARS tiered quality rating and improvement system is a 5 star hybrid system that groups standards under four domains. The Classroom and Instructional Quality Domain includes completing a developmental screening within 90 days of enrollment and making a referral if needed. The system is intended to allow parents the ability to compare quality across all early care and education programs, including child care, public preschool, and Head Start. The lead agency works in close partnership with the Kentucky Child Care Aware coaches to ensure providers have access to resources for conducting developmental screenings, as well as relevant professional development opportunities.

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

The Kentucky Division of Child Care promotes the referral of children to First Steps Early Intervention System that serves children from birth to age three who may have a developmental delay or a particular medical condition that is known to cause a developmental delay. First Steps services are provided statewide and are coordinated by the Kentucky Department for Public Health. The First Steps program provides a variety of services and supports including service coordination, evaluation, assessment, developmental intervention, occupational therapy, speech therapy, physical therapy, audiology services, vision services, and nutrition counseling. Once determined eligible through comprehensive screening and assessment, families must pay a participation fee based on the family's total household income and household size. No family is denied

services due to the lack of insurance or inability to pay.

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

Upon intake, Child Care providers may make referrals to Early Childhood Mental Health (ECMH) consultation services through the Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities and the Department for Public Health within the Cabinet for Health and Family Services. The ECMH Program provides program and child-level consultation on social, emotional, and behavioral issues that serve children birth through age five and their families including evaluation, assessment, and therapeutic services. In an effort to support timely developmental screenings, the All STARS tiered quality rating and improvement system has integrated developmental screening practices into the standards of quality. Information on All STARS is provided to the parent upon intake.

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

Families and child care providers have access to multiple agencies and/or programs within CHFS for screening and assessment. These programs include First Steps Early Intervention System, the Early Childhood Mental Health Program, and the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program. Each of these programs accepts referrals from child care providers and/or individuals who may have a developmental and/or cognitive delay.

e) How child care providers receive this information through training and professional development.

The Kentucky Child Care Aware Network of Services staff provide access to available trainings on screening and assessment at little to no cost to providers.

f) Provide the citation for this policy and procedure related to providing information on developmental screenings.

Citation: 922 KAR 2:270 Kentucky All STARS quality-based graduated early childhood

rating system for licensed child-care centers and certified family child-care homes (Section 4)

2.6 Consumer Statement for Parents Receiving CCDF Funds

Lead Agencies must provide CCDF parents with a consumer statement in hard copy or electronically (such as referral to a consumer education website) that contains specific information about the child care provider they select. This information about the child care provider selected by the parent includes health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider. It must also describe how CCDF subsidies are designed to promote equal access, how to submit a complaint through a hotline, and how to contact local resource and referral agencies or other community-based supports that assist parents in finding and enrolling in quality child care (98.33(d)). Please note that if the consumer statement is provided electronically, Lead Agencies should consider how to ensure that the statement is accessible to parents and that parents have a way to contact someone to address questions they have.

2.6.1 Certify by describing:

a) How the Lead Agency provides parents receiving CCDF funds with a consumer statement.

For parent referral services, parents choosing child care have access to provider information from generated informational forms (DCC-112 and DCC-113) on choosing quality child care given to them at application which includes electronic links to a provider portal:

Benefind Provider Portal at: https://benefind.ky.gov/kccps/

Kentucky Partnership-Child Care Aware of Kentucky
https://www.kentuckypartnership.org/Services/child-care-referral

b) What is included in the statement, including when the consumer statement is provided to families.

At application, parents receive forms DCC-112 (Facts about Kentucky All STARS) and DCC-113 (Facts about the Child Care Assistance Program). The DCC-112 provides information the the quality rating and improvement system and why the system is important to quality care. The DCC-113 connects parents to information on applying for child care assistance.

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

Consumer statement includes how to access and obtain child care, eligibility requirements, reporting changes, income eligibility, what is considered quality child care, and how quality child care promotes school readiness and social-emotional development.

3 Provide Stable Child Care Financial Assistance to Families

In providing child care assistance to families, Lead Agencies are required to implement these policies and procedures: a minimum 12-month eligibility and redetermination periods, a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not disrupted by program requirements, policies to provide for a job search of not fewer than 3 months if the Lead Agency exercises the option to discontinue assistance, and policies for the graduated phase-out of assistance. Also, procedures for the enrollment of homeless children and children in foster care, if served, pending the completion of documentation, are required.

Note: Lead Agencies are not prohibited from establishing policies that extend eligibility beyond 12 months to align program requirements. For example, Lead Agencies can allow children enrolled in Head Start, Early Head Start, state or local prekindergarten, and other collaborative programs to finish the program year. This type pf policy promotes continuity for families receiving services through multiple benefit programs.

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

child care payment.

3.1 Eligible Children and Families

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

3.1.1 Eligibility criteria based on a child's age

a) The CCDF program serves children

from 0

(weeks/months/years)

through 12

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

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

☐ No

☑ Yes,

and the upper age is 18

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity: Means a child who has multiple or severe functional needs requiring ongoing specialized care.

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

☐ No.

☑ Yes

and the upper age is 18

(may not equal or exceed age 19)

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

"residing with":

Means eligible children who are living with a parent or parents (by blood, marriage or adoption), including a legal guardian or other person with standing in loco parentis, or a caretaker/relative considered to be "residing with" a family.

"in loco parentis":

Means a caretaker/relative, a person acting in place of a parent, including a legal guardian, an individual related by blood, marriage, or adoption of a child or non-relative, if the non-relative is pursuing legal custody within one year of application.

3.1.2 Eligibility criteria based on reason for care

a) How does the Lead Agency define "working or attending a job training and educational program" for the purposes of CCDF eligibility at the time of determination? Provide the definitions below for:

"Working":

Employment means public or private, permanent or temporary work that is performed for a wage, is self-employment, or is unpaid such as student teaching, an internship, or practicum, public or self-employment, permanent or temporary work. A combination of employment activities can be used to meet the required number of hours.

For single-parent families, the requirement is an average of 20 hours per week.

For two-parent families, the requirement is a combined average of 40 hours per week unless one adult is mentally or physically unable to provide care for the children. In those instances, the requirement is an average of 20 hours per week for the adult able to work. The minimum work requirement for one adult in a two-parent family is an average of five hours per week.

If a two-parent household requests child care assistance and one parent is not working due to being incapacitated, that parent must have a doctor's statement indicating they are unable to care for the child.

Recipients of Kentucky Transitional Assistance Program (K-TAP) who need child care while they participate in the Kentucky Works Program to meet TANF participation requirements must be actively involved with activities including employment, education, job preparation activities, job search, or other activities designed to assist the family to attain self-sufficiency.

Low-income working families, who have suffered loss of employment or a reduction in hours due to no fault of their own, may receive child care services for a subsequent job search to secure new employment for a period up to three months.

"Job training":

Recipients of Kentucky Transitional Assistance Program (K-TAP) who need child care while they participate in the Kentucky Works Program to meet TANF participation requirements must be actively involved with activities including employment, education, job preparation activities, job search, or other activities designed to assist the family to attain self-sufficiency.

In accordance with 922 KAR 2:160 Section 6:
Kentucky Works Child Care Eligibility Determination.
(1) A child shall be eligible for CCAP if the child:
(a) Resides with an applicant who is participating in the Kentucky Works Program described in 921 KAR 2:370; and
(b) Meets the requirements listed in Section 3 of this administrative regulation.
(2) A child shall be approved for child care assistance by the cabinet in accordance with subsection (1) of this section without a separate application as an integral part of

a Kentucky Works Program self-sufficiency plan.

"Education":

The Lead Agency's definition of "working" is inclusive of unpaid work performed as part of higher education such as a practicum or work-study. The DCC-90L, Student Enrollment and Unpaid Work Verification form, is used to obtain enrollment information from the school. Other acceptable verification of enrollment includes a class schedule or a written statement from a school official.

A proposal has been drafted to ammend 922 KAR 2:160 to include full-time enrollment in an accredited school or certified trade school or participation in the SNAP Education & Training program or pert-time enrollment combined with 10 work hours to meet the eligibility requirements for CCAP. If adopted, this anticipated implementation date is June of 2019.

"Attending job training or education" (e.g. number of hours, travel time):

Travel time is not included in work, education, or job training hours. Applicants must show 20 hours of combined work, job training, or education hours in order to qualify for CCAP.

3.1.2 Eligibility criteria based on reason for care

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

☐ No.

If no, describe the additional work requirements:

☑ Yes.

If yes, describe the policy or procedure:

Work Requirements for Low Income Working Families - Unpaid work, such as a practicum, clinical, internship, student teaching, and job training related to Unemployment Insurance Benefits (UIB), can be used to meet part or all of the work

requirement and must be entered on Benefind in order for technical requirements to be met. The DCC-102 We Need Information for CCAP (RFI), will be issued upon application with the DCC-90L, Student Enrollment and Unpaid Work Verification, to be completed and returned within 30 days. The unpaid work must be a requirement to obtain their degree or receive unemployment benefits.

3.1.2 Eligibility criteria based on reason for care

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

- ☐ No.
- ☑ Yes.

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

Work Requirements for Low Income Working Families - Households of One and Two parents may gain initial CCAP eligibility to job search for up to three (3) calendar months from the date of application in a twelve (12) month period without meeting the CCAP work requirement. Households must agree to work register to qualify for job search. An unemployed adult, after work registration, must participate in an initial job search activity for up to three (3) calendar months in order to receive child care assistance. The client uses the DCC-90P, CCAP Job Search Documentation form, to capture information. A client MUST have a minimum of ten (10) contacts to constitute a complete form. Redetermination and initial eligibility processes are the same.

3.1.2 Eligibility criteria based on reason for care

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

- ☐ No.
- ☑ Yes. If yes:

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

Means an open and active case in which a child protective case file contains appropriate documentation that substantiates child abuse, neglect, dependency or

exploitation. This category may include child care services to prevent abuse, neglect, or dependency with appropriate supervisory approval. "Dependency" means the quality of being dependent as defined per KRS 600.020(19): "Dependent child" means any child, other than an abused or neglected child, who is under improper care, custody, control, or guardianship that is not due to an intentional act of the parent, guardian, or person exercising custodial control or supervision of the child.

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

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

- [x] No
- [ ] Yes

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

- [ ] No
- [x] Yes

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

- [x] No
- [ ] Yes

3.1.3 Eligibility criteria based on family income. Note: The question in 3.1.3 relates to initial determination. Redetermination is addressed in 3.1.7.

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

The money received from statutory benefits, wages, self-employment, rental property,

investments, business operations, etc.

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

	(a)	(b)	(c)	(d)
Family Size	100% of SMI($/Month)	85% of SMI ($/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) ($/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	0	0	0	0
2	$5,052	$4,294	$2,195	43
3	$5,656	$4,808	$2,771	48
4	$7,144	$6,072	$3,347	46
5	$7,967	$6,772	$3,923	48

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

Reminder: Income limits must be established and reported in terms of current SMI based on the most recent data published by the Bureau of the Census (98.20(a)(2)(i)) even if the federal poverty level is used in implementing the program. SMI guidelines are available at: https://www.acf.hhs.gov/ocs/resource/liheap-im2017-03.

d) SMI source and year. 2017 Census Bureau Median Family Income by Size

e) Identify the most populous area of the State used to complete the chart above.

Jefferson County

f) What was the date (mm/dd/yyyy) that these eligibility limits in column (c) became

effective? 04/01/2018

g) Provide the citation or link, if available, for the income eligibility limits.
https://chfs.ky.gov/agencies/dcbs/dcc/Documents/dcc1131118.pdf

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

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

The Lead Agency requires families to certify that the family assets do not exceed $1,000,000 by requiring response to this question during the application process, which may include verification of assets for other public assistance programs.

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

- [ ] No.
- [x] Yes.

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

The Lead Agency does not require verification of assets for protection and prevention cases.

Citation: 922 KAR 2:160 Child care assistance program (Section 7 (3))

3.1.5 Describe any additional eligibility conditions or priority rules applied by the Lead Agency during eligibility determination or redetermination (98.20(b)).

CHFS limits any requirements for reporting changes in income unless the change would make a positive change in the case or that the income is above 85% of the SMI. Families that report a change and their income exceeds the income limits, but do not exceed 85% of the SMI, will remain eligible until recertification.

3.1.6 Lead Agencies are required to take into consideration children's development and promote continuity of care when authorizing child care services (98.21(f); 98.16(h)(6)). Check the approaches, if applicable, that the Lead Agency uses when considering children's development and promoting continuity of care when authorizing child care services.

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

Describe:

Licensed child-care centers and certified family child-care homes are required to report ages of children they are able to serve. Efforts are made to ensure that children are placed in settings that will serve all children in the family and will not require children to change placements as they age. Efforts are made to ensure full-day coverage of services for children that includes before- and after-school as needed. Regional needs assessments are conducted to look at child care partnerships and identify barriers to high quality services that meet the developmental needs of all children as well as family needs, including type and hours of care.

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

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

i. 85 percent of SMI for a family of the same size
ii. An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold that:

(A) Takes into account the typical household budget of a low-income family
(B) Provides justification that the second eligibility threshold is:
(1) Sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability
(2) Reasonably allows a family to continue accessing child care services without unnecessary disruption.

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

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

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

- [ ] N/A - The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- [ ] N/A - The Lead Agency sets its exit eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- [ ] The Lead Agency sets the second tier of eligibility at 85 percent of SMI.

Describe the policies and procedures.

Provide the citation for this policy or procedure.

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

Provide the second tier of eligibility for a family of three.

The Lead Agency sets the second eligibility level at 165 percent of FPL. This rate was set to allow families to grow income from the initial eligibility determination below 160 percent FPL while still maintaining services. While this tiered eligibility structure allows families the flexibility to grow income while still remaining eligible for child care subsidy, the margin for growth is small and stakeholders have advocated for a higher FPL at redetermination. The Lead Agency has conducted a fiscal analysis on increasing the FPL to 300% at redetermination. An emergency regulation has been drafted to increase the percent FPL at redetermination to 200% effective December 1, 2018. This increase will allow families greater flexibility to increase income before phasing out of child care subsidy.

Describe how the second eligibility threshold:

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

The Lead Agency determines income eligibility based only on monthly gross wages from earned, contract, or self-employment.

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

stability:

The Lead Agency sets the income eligibility threshold at 160 percent of the federal poverty level at initial application and at 165 percent of federal poverty level for recertification/recalculation as adjusted annually by the U.S. Department of Health and Human Services for the initial application as funds are appropriated. This allows for a 5% income increase before recaluculation of child care subsidy.

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

The Lead Agency allows for continued child care services without unnesessary disruption if the change is the result of temporary increase or decrease in income. This is outlined in 922 KAR 2:160 Child care assistance program Section 4

iv. Provide the citation for this policy or procedure:

Citation: 922 KAR 2:160 Child care assistance programSection 4

☐ Other.

Identify and describe the components that are still pending per the instructions on *CCDF Plan Response Options for Areas where Implementation is Still in Progress* in the Introduction.

3.1.7 b) To help families transition from assistance, does the Lead Agency gradually adjust copays for families eligible under the graduated phase-out period?

☑ No

☐ Yes

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

ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? *(Note: Additional reporting requirements are also discussed in section 3.3.3 of the plan.)*

☐ No.

☐ Yes.

Describe:

3.1.8 Fluctuation in earnings.

Lead Agencies are required to demonstrate how their processes for initial determination and redetermination take into account irregular fluctuations in earnings (658E(c)(2)(N)(i)(II)). The Lead Agency must put in place policies that ensure that temporary increases in income, including temporary increases that can result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) from seasonal employment or other temporary work schedules, do not affect eligibility or family copayments (98.21(c)). Check the processes, if applicable, that the Lead Agency uses to take into account irregular fluctuations in earnings and describe, at a minimum, how temporary increases that result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) do not affect eligibility or family copayments.

☑ Average the family's earnings over a period of time (i.e. 12 months).

Describe:

Benefind assesses the family copay at initial application for the application month and the next month ongoing. Once the family copay is established at initial application or redetermination, the family copay will not increase during the 12 month eligibility period; however, the copay will decrease if the household reports a change of loss or decrease of income.

☐ Request earning statements that are most representative of the family's monthly income.

Describe:

☑ Deduct temporary or irregular increases in wages from the family's standard income level.

Describe:

The Benefind Worker Portal income screens and calculations prevent temporary fluctuations in income resulting in loss of eligibility and/or increased copayments. When entering income, such as wages, the worker may exclude wages that are not representative of ongoing income. The non-excluded wages are averaged to

determine initial and ongoing eligibility as well as family copay. Seasonal and irregular income is averaged and only counted for the period the income is intended.

☐ Other.

Describe:

3.1.9 Lead Agencies are required to have procedures for documenting and verifying that children receiving CCDF funds meet eligibility criteria at the time of eligibility determination and redetermination (98.68(c)). Check the information that the Lead Agency documents and verifies and describe, at a minimum, what information is required and how often. Check all that apply.

☑ Applicant identity.

Describe:

Driver's license, Student I.D., Military I.D., or two other forms of verification.

☑ Applicant's relationship to the child.

Describe:

Birth Index, Birth Records.

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

Describe:

Birth Index, Birth Records, School Records.

☑ Work.

Describe:

Work Verification System, PAFS-700 Verification of Employment and Wages check stubs, Federal tax forms.

☑ Job training or educational program.

Describe:

DCC-90L Student Work Verification Form

☑ Family income.

Describe:

Work Verification System, PAFS -700 Verification of Employment and Wages, check stubs, Federal tax forms.

☑ Household composition.

Describe:

PAFS-21 Household Information Request or similar statement from a collateral contact familiar with the family's living situation who is not a member of the child care case.

☑ Applicant residence.

Describe:

PAFS-21 Household Information Request or similar statement from a collateral contact familiar with the family's living situation who is not a member of the child care case.

☐ Other.

Describe:

3.1.10 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:

Thirty (30) days

☑ Track and monitor the eligibility determination process

☐ Other.

Describe:

☐ None

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

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

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

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

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

a) Identify the TANF agency that established these criteria or definitions: DCBS - Division of Family Support

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

"Appropriate child care":

Means an eligible child care provider as defined in 45 C.F.R. part 98.2

"Reasonable distance":

Means the distance customarily available within a locality.

"Unsuitability of informal child care":

Means care, not regulated under Kentucky law, which does not meet the quality child

care needs as defined by the parent or the health and safety requirements applicable to regulated child care in the Commonwealth.

"Affordable child care arrangements":

Means appropriate child care, at a reasonable distance, which is suitable and charges at or below the maximum provider payment rate under the CCDF Plan.

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

- [ ] In writing
- [ ] Verbally
- [x] Other.

Describe:

A TANF recipient receives information from a DCBS worker regarding the exception to the individual penalties associated with work requirements for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under six years of age. Eligibility for TANF recipient is determined by the DCBS Family Support focused staff.

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

Citation: 921 KAR 2:370 Technical requirements for Kentucky Works Program Section 6.

3.2 Increasing Access for Vulnerable Children and Families

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

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

3.2.1 Describe how the Lead Agency defines:

a) "Children with special needs":

A child with special needs is defined as a child who has multiple or severe functional needs requiring ongoing specialized care with priority given over other CCDF families. This includes children in need of child care for the puposes of protection or prevention

b) "Families with very low incomes":

A family whose income does not exceed 100% of the Federal Poverty Level Families receive priority over other eligible CCDF families.

3.2.2 Describe how the Lead Agency will prioritize or target child care services for the following children and families.

a) Identify how services are prioritized for children with special needs. Check all that apply:

- [x] Prioritize for enrollment
- [x] Serve without placing these populations on waiting lists
- [ ] Waive copayments
- [x] Pay higher rates for access to higher-quality care
- [ ] Use grants or contracts to reserve slots for priority populations
- [ ] Other.

  Describe:

b) Identify how services are prioritized for families with very low incomes. Check all that apply:

- [ ] Prioritize for enrollment
- [x] Serve without placing these populations on waiting lists
- [ ] Waive copayments

- [ ] Pay higher rates for access to higher-quality care
- [ ] Use grants or contracts to reserve slots for priority populations
- [x] Other.

Describe:

Income based sliding scale is utilized for assigning co-payments.

Web Link: CCAP Income Guideline

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

- [x] Prioritize for enrollment
- [x] Serve without placing these populations on waiting lists
- [ ] Waive copayments
- [ ] Pay higher rates for access to higher-quality care
- [ ] Use grants or contracts to reserve slots for priority populations
- [x] Other.

Describe:

Homeless households during an initial application are unique from other eligibility types as the household is entitled to up to three calendar months from the date of application to return verification. This allows the household to return all required documentation gradually, if needed. Homeless cases are approved and enrollment starts when the head of household provides ID. (If a driver's license is provided, it does not matter if it is expired.) Households that return all required information and are technically and financially eligible at the end of the three (3) calendar month period, will not see a change in the certification period at approval of application. Homeless households must meet all other technical and financial eligibility criteria in order to continue with the program.

Homeless households can qualify to gain initial eligibility via Job Search if the client does not meet the work requirement and wants to use the once in twelve (12) months Job Search at the time of application. The client must work register and complete the DCC-90P, CCAP Job Search Documentation form, with a minimum of ten (10) contacts to constitute a complete form.

d) Identify how services are prioritized, if applicable, for families receiving TANF program funds, those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF (98.16(i)(4)). Check all that apply:

- ☐ Prioritize for enrollment
- ☑ Serve without placing these populations on waiting lists
- ☐ Waive copayments
- ☐ Pay higher rates for access to higher-quality care
- ☐ Use grants or contracts to reserve slots for priority populations
- ☐ Other.

Describe:

TANF families are given priority after special needs children and a priority over families with very low incomes.

3.2.3 List and define any other priority groups established by the Lead Agency.

Protection and Permanency (P&P) staff may approve child care when families need services for purposes of protection or prevention. A case is deemed to be a Protection or Prevention case when one of the following apply:

1) A prevention service to meet the child care needs of a family with a case opened due to the submission of a Family in Need of Services Assessment (FINSA). Care is provded in order to stabilize the family situation and prevent escalation to an environment at increased risk of abuse or neglect.

2) A protective service provided when abuse, neglect, or dependency is substantiated and the family has need for child care services, as indicated in the case plan and/or after care.

3.2.4 Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.2.3.

Form DCC-85 Approval for Child Care Assistance is used by the Protection & Permanency staff to notify the local child care worker that a client is approved and eligible for the Child Care Assistance Program (CCAP).

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

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

Families experiencing homelessness are eligible for expedited services. They are entitled to immediate approval of cases and pend for lack of verification. During eligibility, homeless families have a three (3) calendar month period to return all verifications. Families that return all required information at the end of the three (3) calendar month period, will not see a change in their certification as the maximum allowable certification period as assigned based on program rules. Families experiencing homelessness must meet all other technical eligibility criteria in order to continue with the program. If information has not been provided within the three (3) calendar month timeframe, the application will be discontinued.

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

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

Information regarding the Lead Agency's child care assistance program is provided to entities serving families experiencing homelessness across the state. Regional leads are familiar with resources for families experiencing homelessness and can connect them to supportive services when needed. Through the Child Care

Resource and Referral Network of Services, coordinators participate in regular meetings to promote outreach to families experiencing homelessness, such as through the Central Kentucky Housing and Homeless Initiative.

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

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

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

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

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

During eligibility, families experiencing homelessness have a three calendar month period to return all verifications. Households that return all required information at the end of the three (3) calendar month period will not see a change in their certification period as the maximum allowable certification period as assigned based on program rules.

Provide the citation for this policy and procedure.

Citation: 922 KAR 2:160 Child care assistance program Section 2(4)(c)

Children who are in foster care.

Currently, child care for foster children is built into foster care reimbursement rates

and is not funded by CCDBG funds. Therefor, foster families are not eligible for CCAP subsidies. However, children approved through the DCC-85, P&P Approval for Child Care, as preventive or protective care are eligible for CCAP subsides.

The Lead Agency has recommended that the language in 922 KAR 2:160 be ammended to allow child care for foster children to be funded by the CCDF. If adopted, the change will take place in December 1, 2018.

Provide the citation for this policy and procedure.

Citation: 922 KAR 2:160. Child Care Assistance Program. Section 5

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

During eligibility, homeless households are placed in their applicable eligibility, but have a three calendar month period to return all verifications.

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

☐ No.

☑ Yes.

Describe:

Families engaged in a job search can qualify immediately for child care for up to three months.

3.3 Protection for Working Families

3.3.1 12-Month eligibility.

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period, regardless of changes in income (as long as the income does not exceed the federal threshold of 85 percent of the state median income) or temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)).

This change means that a Lead Agency may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the state's income eligibility threshold, but not the federal threshold of 85 percent of SMI. The Lead Agency may not terminate assistance prior to the end of the 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. A temporary change in eligible activity includes, at a minimum, any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working; any student holiday or break for a parent participating in a training or educational program; any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program; any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency; a child turning 13 years old during the 12-month eligibility period (except as described in 3.1.1); and any changes in residency within the state, territory, or tribal service area.

a) Describe the Lead Agency's policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements, including when a family experiences a temporary change in activity.

If an application is approved for benefits, the certification is valid for 12 months. A family experiencing a temporary change in activity as outlined in 922 KAR 2:160 Child care assistance program Section 4 is given a three month grace period.

Citation:

(2) A child shall be eligible to receive CCAP for up to three (3) months or in accordance with Section 8 of this administrative regulation if the child meets the requirements specified in Section 3 of this administrative regulation and resides with:

(a) An applicant who is homeless;

(b) An applicant who: 1. Is engaged in job search; and 2. Submits a completed DCC-90P, CCAP Job Search Documentation, within the three (3) months of job search verifying a minimum of ten (10) contacts with prospective employers;

(c) A recipient after the loss of employment, a reduction in the required number of employment hours, or cessation of attendance at a job training or educational program in accordance with 42 U.S.C. 9858c(c)(2)(N)(iii), to allow for job search or resumption of work or attendance at job training or educational program; or
(d) A recipient on maternity leave or other medical leave from employment as verified by a health professional, unless a temporary disability as verified by a health professional necessitates longer than three (3) months of CCAP eligibility.

b) How does the Lead Agency define "temporary change?'

A "temporary change" includes an absence from employment due to maternity leave or extended medical leave, changes in seasonal work schedule, or if a parent enrolled in training or education program is temporarily not attending class between semesters.

Recipients can continue to maintain CCAP Eligibility for up to three (3) months during a temporary change if:

- Maternity leave or medical leave, unless a temporary disability as verified by a health professional necessi-tates longer than three (3) months of CCAP eligibility.
- Change in self-employment activity, change in scheduled hours, loss of employment, or cessation of attendance at a job training or educational program to allows for up to three (3) months of job search verifying a minimum of ten (10) contacts with perspective employers.

c) Provide the citation for this policy and/or procedure.

Citation: 922 KAR 2:160 Child care assistance program Section 4

3.3.2 Option to discontinue assistance during the 12-month eligibility period.

Lead Agencies have the option, but are not required, to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program, otherwise known as a parent's eligible activity (i.e., if the parent experiences a temporary change in his or her status as working or participating in a training or educational program, as described in section 3.3.1 of the plan).

If the Lead Agency chooses the option to discontinue assistance due to a parent's non-temporary loss or cessation of eligible activity, it must continue assistance at least at the same

level for a period of not fewer than 3 months after each such loss or cessation for the parent to engage in a job search and to resume work or resume attendance in a job training or educational program. At the end of the minimum 3-month period of continued assistance, if the parent has engaged in a qualifying work, training, or educational program activity with an income below 85 percent of SMI, assistance cannot be terminated, and the child must continue receiving assistance until the next scheduled redetermination or, at the Lead Agency option, for an additional minimum 12-month eligibility period.

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

- ☐ No, the state/territory does not allow this option to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program.
- ☑ Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:

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

Eligibility staff has 30 calendar days from the date of application to determine eligibility and approve for 12 months. If there were a reported change that would discontinue the case, a grace period of three months would apply up to the last day of certification period, whichever comes first. This is inclusive of a job search.

Citation: 922 KAR 2:160 Child care assistance program Section 4(2)

(2) A child shall be eligible to receive CCAP for up to three (3) months or in accordance with Section 8 of this administrative regulation if the child meets the requirements specified in Section 3 of this administrative regulation and resides with:

(a) An applicant who is homeless;

(b) An applicant who: 1. Is engaged in job search; and 2. Submits a completed DCC-90P, CCAP Job Search Documentation, within the three (3) months of job search verifying a minimum of ten (10) contacts with prospective employers;

(c) A recipient after the loss of employment, a reduction in the required number of employment hours, or cessation of attendance at a job training or educational

program in accordance with 42 U.S.C. 9858c(c)(2)(N)(iii), to allow for job search or resumption of work or attendance at job training or educational program; or
(d) A recipient on maternity leave or other medical leave from employment as verified by a health professional, unless a temporary disability as verified by a health professional necessitates longer than three (3) months of CCAP eligibility.

ii. Describe what specific actions/changes trigger the job-search period.
Income change, job loss, or child age 12 turns age 13.

iii. How long is the job-search period (must be at least 3 months)?
After initial eligibility, if a household member reports a job loss, the household member has three months period for job search. The system allows "up to" three months or the last day of the certification period, whichever comes first.

iv. Provide the citation for this policy or procedure.
Citation: 922 KAR 2:160 Child care assistance program Section 4(2)

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

☐ Not applicable.

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

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

ii. Provide the citation for this policy or procedure:

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

Provide the citation for this policy or procedure:

Citation: 922 KAR 2:160 Child care assistance program Section 2(4)

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

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

1) Misrepresentation of information by making a false statement either orally or in writing to obtain or attempt to obtain services for which they are not eligible.

2) Concealment of information to obtain services to which they are not eligible.

3) Deliberately withheld information needed to accurately determine eligibility.

4) Deliberate failure to report a change timely in order to continue to receive services to which they are not entitled.

5) Falsification or alteration of documents to obtain services to which they are entitled.

3.3.3 Change reporting during the 12-month eligibility period.

The Lead Agency must describe the requirements for parents to report changes in circumstances during the 12-month eligibility period and describe efforts to ensure that such requirements do not place an undue burden on eligible families, which could impact the continuity of care for children and stability for families receiving CCDF services (98.16(h)(1)).

Note: Responses should exclude reporting requirements for a graduated phase-out, which were described in question 3.1.7(b).

Families are required to report a change to the Lead Agency at any time during the 12-month eligibility period if the family's income exceeds 85 percent of the state median income, taking into account irregular fluctuations in income (98.21(e)(1)). If the Lead Agency chooses the option to terminate assistance, as described in section 3.3.2 of the plan, they may require families to report a non-temporary change (as described in section 3.3.3 of the plan) in work, training or educational activities (otherwise known as a parent's eligible activity).

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

☐ No

☑ Yes

b) Any additional reporting requirements during the 12-month eligibility period must be limited to items that impact a family's eligibility (e.g., income changes over 85 percent of SMI or that impact the Lead Agency's ability to contact the family or pay the child care providers (e.g., a family's change of address, a change in the parent's choice of child care provider).

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

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

Describe:

1) Change in an employer;

2) Increase or decrease in the number of work hours;

3) Increase or decrease in the rate of pay;

4) Increase or decrease in recipient members;

5) Change in self-employment activities;

6) Change in the scheduled hours of care is needed;

7) Beginning or ending of an educational activity;

8) Change in marital status;

9) Beginning or ending of receipt of any type of unearned income; and

10) Increase or decrease in any type of unearned income.

If there's a change in circumstances such as an increase or decrease in the number of work hours a child shall be eligible to continue CCAP if the following requirements are met:

(a) An applicant has employment an average twenty (20) hours per week;

(b) An applicant and a responsible adult have employment an average of forty (40) hours per week combined, if the individual with the least employment has an average of at least five (5) hours of employment per week;

(c) An applicant and a responsible adult if either the applicant or the responsible adult has employment an average of twenty (20) hours per week, and the other is physically or mentally unable to provide adequate care or supervision as documented by a written statement from a health professional;

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

Describe:

1) Change in address or residence; and

2) Unreported change in phone/cell number.

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

Describe:

Criteria for nonpayment to provider according to 922 KAR 2:160 include:

1) Death of child or applicant;

2) The family or provider defaults on a payment of claim as outlined in 922 KAR 2:020;

3) Family no longer meets the technical or financial eligibility requirements; and

4) Provider denies access to child in care to parent of a child in care, CHFS, CHFS' designee, or a representative of an agency with regulatory authority.

Any additional reporting requirements that the Lead Agency chooses, as its option to require from parents during the 12-month eligibility period, shall not require an office visit. In addition, the Lead Agency must offer a range of notification options to accommodate families.

c) How does the Lead Agency allow for families to report changes to ensure that reporting requirements are not burdensome and to avoid an impact on continued eligibility between redeterminations? Check all that apply.

- [x] Phone
- [ ] Email
- [x] Online forms
- [ ] Extended submission hours
- [x] Postal Mail
- [x] FAX
- [x] In-person submission
- [ ] Other.

Describe:

d) Families must have the option to voluntarily report changes on an ongoing basis during the 12-month eligibility period. Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's

subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

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

A temporary change will adversely affect a case after initial or recert approval, if the client is not compliant with work requirements by the end of the three (3) month grace period.

ii. Provide the citation for this policy or procedure.

Citation: 922 KAR 2:160 Child care assistance program Section 4(2)

3.3.4 Prevent the disruption of employment, education, or job training activities

Lead Agencies are required to have procedures and policies in place to ensure that parents (especially parents receiving assistance under the TANF program) are not required to unduly disrupt their employment, education, or job training activities to comply with the Lead Agency's or designated local entity's requirements for the redetermination of eligibility for assistance (658E(c)(2)(N)(ii); 98.21(d)).

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

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

- [ ] Advance notice to parents of pending redetermination
- [ ] Advance notice to providers of pending redetermination
- [ ] Pre-populated subsidy renewal form
- [x] Online documentation submission
- [x] Cross-program redeterminations
- [ ] Extended office hours (evenings and/or weekends)
- [ ] Other.

Describe:

b) How are families allowed to submit documentation, described in 3.1.9, for redetermination? Check all that apply.

- [x] Postal Mail
- [ ] Email
- [x] Online forms
- [x] FAX
- [x] In-person submission
- [ ] Extended submission hours
- [ ] Other.

Describe:

3.4 Family Contribution to Payments

Lead Agencies are required to establish and periodically revise a sliding-fee scale for CCDF families that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) that is not a barrier to families receiving CCDF funds (658E(c)(5)). In addition to income and the size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. Lead Agencies, however, may NOT use cost of care or amount of subsidy payment in determining copayments (98.45(k)(2)).

Note: To help families transition off of child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. However, section 3.4 applies only to families in their initial/entry eligibility period. See section 3.1.7 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

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

a) Fill in the chart based on the most populous area of the State (area serving highest number of CCDF children).

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	**Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than $0)**	**What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?**	**The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?**	**Highest Initial or First Tier Income Level Before a Family Is No Longer Eligible**	**What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?**	**The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?**
1	0	0	0	0	0	0
2	900.00	44.00	4.8%	3,699.99	252.00	6.8%
3	900.00	44.00	4.8%	3,699.99	294.00	7.9%
4	900.00	44.00	4.8%	3,699.99	336.00	9.1%
5	900.00	44.00	4.8%	3,699.99	525.00	14.2%

b) What is the effective date of the sliding-fee scale(s)? 10/01/2017

c) Identify the most populous area of the state used to complete the chart above.

Jefferson County

d) Provide the link to the sliding-fee scale: Section 10:
http://www.lrc.ky.gov/kar/922/002/160.pdf

e) If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).

3.4.2 How will the family's contribution be calculated, and to whom will it be applied? Check all that apply.

- [x] The fee is a dollar amount and:
  - [ ] The fee is per child, with the same fee for each child.
  - [ ] The fee is per child and is discounted for two or more children.
  - [ ] The fee is per child up to a maximum per family.
  - [ ] No additional fee is charged after certain number of children.
  - [x] The fee is per family.
  - [ ] The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

    Describe:

  - [ ] Other.

    Describe:

- [ ] The fee is a percent of income and:
  - [ ] The fee is per child, with the same percentage applied for each child.
  - [ ] The fee is per child, and a discounted percentage is applied for two or more children.
  - [ ] The fee is per child up to a maximum per family.
  - [ ] No additional percentage is charged after certain number of children.
  - [ ] The fee is per family.
  - [ ] The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

    Describe:

  - [ ] Other.

    Describe:

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

- [x] No.
- [ ] Yes, check and describe those additional factors below.
  - [ ] Number of hours the child is in care.

    Describe:

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

    Describe:

  - [ ] Other.

    Describe:

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

- [ ] No, the Lead Agency does not waive family contributions/co-payments.
- [ ] Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the poverty level for families of the same size.
- [x] Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility.

Describe the policy and provide the policy citation.

Department for Community Based Services, Division of Protection and Permanency

are authorized to waive co-payments for protective and preventive cases and indicate wavier on the DCC-85, Approval for Child Care form.

Citation: 922 KAR 2:160 Child care assistance program Section 5

☐ Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency.

Describe the policy and provide the policy citation.

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

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care or care provided in the child's own home In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each State/Territory identifies and defines its own categories and types of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

4.1 Parental Choice in Relation to Certificates, Grants, or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling his or her child with a provider that has a grant or contract for providing child care services (658E(c)(2)(A); 98.30(a)). Even if a parent chooses to enroll his or her child with a provider who has a grant or contract, the parent will select the provider, to the extent practicable. If a parent

chooses to use a certificate, the Lead Agency shall provide information to the parent on the range of provider options, including care by sectarian providers and relatives. Lead Agencies must require providers chosen by families to meet health and safety standards and has the option to require higher standards of quality. Lead agencies are reminded that any policies and procedures should not restrict parental access to any type of care or provider (e.g. center care, home care, in-home care, for-profit provider, non-profit provider or faith-based provider, etc.) (98.15 (a)(5)).

4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)).

The certificate is issued after a provider is selected. To enroll a child with a provider, the DCC-94 Child Care Service Agreement and Certificate, must be signed and dated by the client and the provider. If the client choses a new provider, the DCC-94 is again sent to the client and the provider for signatures. The DCC-94 includes family information, child name, date of birth, care level, notes regarding special needs or need non-tradtional hours for care, start and end date of enrollment, scheduled days of care, daily rate amount for full or part day, amount of daily co-pay, and the rights and responsiblites of parent and provder.

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

- [ ] Certificate that provides information about the choice of providers
- [ ] Certificate that provides information about the quality of providers
- [ ] Certificate not linked to a specific provider, so parents can choose any provider
- [x] Consumer education materials on choosing child care
- [x] Referral to child care resource and referral agencies
- [ ] Co-located resource and referral in eligibility offices

- [x] Verbal communication at the time of the application
- [x] Community outreach, workshops, or other in-person activities
- [x] Other.

Describe:

Information is also available through the Division of Child Care website.

Web Link: Division of Child Care

4.1.3 Child care services available through grants or contracts.

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

- [x] No. If no, skip to 4.1.4.
- [ ] Yes, in some jurisdictions but not statewide.

  If yes, describe how many jurisdictions use grants or contracts for child care slots.

- [ ] Yes, statewide. If yes, describe:

  i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:

  ii. The type(s) of child care services available through grants or contracts:

  iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers):

  iv. The process for accessing grants or contracts:

  v. How rates for contracted slots are set through grants and contracts:

  vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality:

vii. If contracts are offered statewide and/or locally:

4.1.3 Child care services available through grants or contracts.

b) Will the Lead Agency use grants or contracts for child care services to increase the supply and/or quality of specific types of care? Check all that apply.

- ☐ Programs to serve children with disabilities
- ☐ Programs to serve infants and toddlers
- ☐ Programs to serve school-age children
- ☐ Programs to serve children needing non-traditional hour care
- ☐ Programs to serve children experiencing homelessness
- ☐ Programs to serve children in underserved areas
- ☐ Programs that serve children with diverse linguistic or cultural backgrounds
- ☐ Programs that serve specific geographic areas
  - ☐ Urban
  - ☐ Rural
- ☑ Other

Describe

Child care services are not made available through grants or contracts.

4.1.3 Child care services available through grants or contracts.

c) Will the Lead Agency use grants or contracts for child care services to increase the quality of specific types of care? Check all that apply.

- ☐ Programs to serve children with disabilities
- ☐ Programs to serve infants and toddlers
- ☐ Programs to serve school-age children
- ☐ Programs to serve children needing non-traditional hour care
- ☐ Programs to serve homeless children
- ☐ Programs to serve children in underserved areas
- ☐ Programs that serve children with diverse linguistic or cultural backgrounds

- [ ] Programs that serve specific geographic areas
  - [ ] Urban
  - [ ] Rural
- [x] Other

Describe

Child care services are not made available through grants or contracts.

4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds (658E(c)(2)(B); 98.16(t)).

Parental rights are outlined in KRS 199.898 and include the rights of parents to access their children at all times that the children are in care. The parental rights are distributed to parents and providers when a child care certificate and agreement is issued.

Citation: KRS 198.898 Rights for children in child-care programs

4.1.5 The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use (98.16(i)(2)). Will the Lead Agency limit the use of in-home care in any way?

- [ ] No.
- [x] Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.
  - [ ] Restricted based on minimum the number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements.

    Describe:

  - [x] Restricted based on the provider meeting a minimum age requirement. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2).

Describe:

In accordance with 922 KAR 2:180, any person making application to provide care in the child's own home must show proof of photo identification or birth certificate that the individual is a least eighteen years of age

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

Describe:

☐ Restricted to care by relatives.

Describe:

☐ Restricted to care for children with special needs or a medical condition.

Describe:

☑ Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF.

Describe:

922 KAR 2:180 Section 2 requires that in-home providers shall provide verification of six hours of training approved by the cabinet in the areas of:

1) Health, safety, and sanitation;

2) Recognition of child abuse and neglect, which may include cabinet-approved pediatric abusive head trauma training in accordance with KRS 199.896(16); and

3) Developmentally appropriate child care practice.

Citation: 922 KAR 2:180 Requirements for registered child care providers

☐ Other.

Describe:

4.2 Assessing Market Rates and Child Care Costs

Lead Agencies have the option to conduct a statistically valid and reliable (1) market rate survey (MRS) reflecting variations in the price to parents of child care services by geographic area, type of provider, and age of child and/or (2) an alternative methodology, such as a cost estimation model (658E(c)(4)(B)). A cost estimation model estimates the cost of care by incorporating both data and assumptions to model what expected costs would be incurred by child care providers and parents under different cost scenarios. Another approach would be a cost study that collects cost data at the facility or program level to measure the costs (or inputs used) to deliver child care services. The MRS or alternative methodology must be developed and conducted no earlier than 2 years before the date of submission of the Plan.

Note - Any Lead Agency considering using an alternative methodology, instead of a market rate survey, is required to submit a description of its proposed approach to its ACF Regional Child Care Program Office for pre-approval in advance of the Plan submittal (see https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2016-08). Advance approval is not required if the Lead Agency plans to implement both a market rate survey and an alternative methodology. In its request for ACF pre-approval, a Lead Agency must:

- Provide an overview of the Lead Agency's proposed approach (e.g., cost estimation model, cost study/survey, etc.), including a description of data sources.

- Describe how the Lead Agency will consult with the State's Early Childhood Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, organizations representing child care caregivers, teachers and directors, and other appropriate entities prior to conducting the identified alternative methodology.

- Describe how the alternative methodology will use methods that are statistically valid and reliable and will yield accurate results. For example, if using a survey, describe how the Lead Agency will ensure a representative sample and promote an adequate response rate. If using a cost estimation model, describe how the Lead Agency will validate the assumptions in the model.

- If the proposed alternative methodology includes an analysis of costs (e.g., cost estimation model or cost study/survey), describe how the alternative methodology will account for key factors that impact the cost of providing care'such as: staff salaries and benefits, training and professional development, curricula and supplies, group size and ratios, enrollment levels, licensing requirements, quality level, facility size, and other factors.

- Describe how the alternative methodology will provide complete information that captures the universe of providers in the child care market.

- Describe how the alternative methodology will reflect variations by provider type, age of children, geographic location and quality.

- Describe how the alternative methodology will use current, up to date data.

- Describe the estimated reporting burden and cost to conduct the approach.

4.2.1 Please identify the methodology(ies) used below to assess child care prices and/or costs.

- [x] MRS
- [ ] Alternative methodology.
  Describe:

- [ ] Both.
  Describe:

4.2.2 Prior to developing and conducting the MRS or alternative methodology, the Lead Agency is required to consult with the (1) State Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities and (2) organizations representing caregivers, teachers, and directors (98.45 (e)).

Describe how the Lead Agency consulted with the:

a) State Advisory Council or similar coordinating body:

The Market Rate Survey is developed in collaboration with the Division of Child Care, University of Kentucky Human Development Institute, and Child Care Aware of Kentucky. The Child Care Advisory Council was recently convened for the first time, with statutory

responsibility to consult on issues related to child care funding. This market rate survey was already underway prior to their initial convening, however, they will be consulted regarding the results and will be involved prior to any future market rate surveys.

b) Local child care program administrators:

Per KRS 199.892, child care providers are consulted through membership on the CCAC.

c) Local child care resource and referral agencies:

CCAC membership is avialable to Child Care Resource and Referral Agencies across Kentucky. Meetings are also open to the public for attendance.

d) Organizations representing caregivers, teachers, and directors:

Quarterly meetings are held by the lead agency with various advocacy groups representing child care providers to discuss child care issues, including the development of the Market Rate Survey.

e) Other. Describe:

N/A

4.2.3 Describe how the market rate survey is statistically valid and reliable. To be considered valid and reliable, the MRS must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variations, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data, such as child care resource and referral data, if they are representative of the market. If an alternative methodology, such as cost modeling, is used, demonstrate that the methodology used reliable methods.

The 2017 Kentucky Child Care Market Rate Survey (MRS) sampled three types of child care facilities: Licensed Type I, Licensed Type II, and Certified Family Child-Care Homes.

The Kentucky Division of Child Care (DCC) provided contact information for child care providers. Information included provider name, address, county, telephone number, e-mail address, provider identification number, provider type (licensed Type I, Type II, and Certified

Family Home), owner's name, address, telephone number, and e-mail address. The Early Care and Education Training Records Information System (ECE-TRIS), the professional development registry for early care and education professionals in Kentucky, was used to supplement email addresses. When the director email was absent from the DCC list, the email from ECE-TRIS was used.

Data Collection & Quality Assurance Procedures

The survey involved the use of three data collection formats: web-based, paper-based (mail-in), and telephone interviewing. The 2017 Kentucky MRS had an overall response rate of 57%. The sample included the population of 2,185 licensed and certified child care providers.

Web-Based Survey

The web-based survey was replicated from the 2015 Kentucky MRS and included the following changes:

•Identification of number of children the program stopped caring for (removed);
•Identification of number of children the program started caring for (removed);
•Identification of additional services provided on-site or through referrals (removed); and
•Identification of cost categories and their percentile distribution.

As the result, the updated version of the web-based survey included the following sections:

1) facility information;
2) hours of operation;
3) facility enrollment;
4) child care prices;
5) services;
6) child and family information; and
7) projection of costs.

The survey was administered through a web-based software platform Qualtrics®. A multiple-contact approach was used to increase the response rate. In October 2017, using the list of child care facilities and homes, an email containing background information about the survey and a direct survey link was sent to those whose e-mail addresses were available (Group I; Table 1) by the Regional Child Care Administrator. If the e-mail was returned due to an invalid e-mail address, secondary e-mail addresses (where available) were used to contact the provider. In November 2017, providers who had not completed the survey were sent a

reminder e-mail from a regional Child Care Aware coach asking them to complete the survey. Two (2) weeks later, coaches sent a second reminder to providers who had not completed their survey, this time using an anonymous link. Regional coaches were selected for the reminder since they generally work closely with providers on licensing and quality processes.

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

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

The survey examines daily price. Data were collected and analyzed separately for each age group, facility type, category of care (full- and part-time care), region, and geographical area designation to reflect current market differences.

The geographic distribution of the responses was also examined by calculating region-wide (East, Central, and West) and geographical area-wide (Urban and Rural) response rates for each provider type and among all providers. The overall geographical distribution of survey participants. Regionally, the response rate was higher in the East and West (63% each). Licensed Type II facilities had a 94% statewide response rate

b) Type of provider. Describe:

Licensed Type I Child-Care Center Licensed child care provider or home that offers child care services for four or more children in a non-residential setting, or thirteen (13) or more in a residential setting as designated in 922 KAR 2:090.

Licensed Type II Child-Care Center Licensed child care provider or home that provides child care for at least seven , but no more than 12 children including related children as designated in 922 KAR 2:090.

Certified Family Child-Care Home Certified child care home that serves no more than six unrelated children at any one time, or four related children in addition to six unrelated children for a maximum of 10 hours at any one time as designated in 922 KAR 2:100.

c) Age of child. Describe:

Defined ages for MRS:

Infant - 0 - 12 months

Toddler - 1-2 years of age

Preschool Child - 3-4 years of age

School Age Child - 5 years and older

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

N/A

4.2.5 After conducting the market rate survey or alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or alternative methodology. The detailed report must also include the estimated cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, pre-K standards, Head Start performance standards, or State defined quality measures.)

Describe how the Lead Agency made the results of the market rate survey or alternative methodology report widely available to the public (98.45(f)(1)). by responding to the questions below.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). 03/30/2018

b) Date the report containing results was made widely available - no later than 30 days after the completion of the report. 04/01/2018

c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted.

Posting to Division of Child Care website
Web Link: Division of Child Care MRS posting

Posting to Kentucky Partnership website
Web Link: Kentucky Partnership MRS posting

d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report.

The survey conducted with an analysis report through a contract with the University of Kentucky Human Development Institute. No public comments were solicited during the survey and final summary of survey results posted on Division of Child Care website for public view.

4.3 Setting Payment Rates

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or alternative methodology, at a level to ensure equal access for eligible families to child care services that are comparable with those provided to families not receiving CCDF funds. The Lead Agency must re-evaluate its payment rates at least every 3 years.

4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS) for the following categories below. Percentiles are not required if the Lead Agency conducted an alternative methodology only (with pre-approval from ACF), but must be reported if the Lead Agency conducted an MRS alone or in combination with an alternative methodology. The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. Please use the most populous geographic region (area serving highest number of CCDF children) to report base payment rates below, if they are not statewide. Note: If the Lead Agency obtained approval to conduct an alternative methodology, then reporting of percentiles is not required.

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

region
Rate $ 24 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 29th

b) Infant (6 months), full-time licensed FCC home in the most populous geographic region
Rate $ 21 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 37th

c) Toddler (18 months), full-time licensed center care in the most populous geographic region
Rate $ 24 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 35th

d) Toddler (18 months), full-time licensed FCC care in the most populous geographic region
Rate $ 21 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 47th

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region
Rate $ 21 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 30th

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region
Rate $ 19 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 39th

g) School-age child (6 years), full-time licensed center care in most populous geographic region
Rate $ 20 per day unit of time (e.g., daily, weekly, monthly, etc.)

Percentile of most recent MRS: 51st

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

Rate $ 18 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 46th

i) Describe how part-time and full-time care were defined and calculated.

Full-day means child care is provided for five or more hours per day

j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). February 2016

k) Identify the most populous area of the state used to complete the responses above.

Jefferson County

l) Provide the citation or link, if available, to the payment rates. Web Link: Kentucky Child Care Maximum Payment Rate Chart

m) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).

N/A

4.3.2 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

Check and describe the types of tiered reimbursement or differential rates, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS and/or an alternative methodology, and the amount of the rate. Check all that apply.

☑ Differential rate for *non-traditional hours*.

Describe:

Licensed or certified providers may also receive an additional one (1) dollar per day to provide child care during non-traditional hours.

☑ Differential rate for *children with special needs*, as defined by the state/territory.

Describe:

Licensed, certified, or registered child care providers may receive an additional one (1) dollar per day to serve a child with special needs

☑ Differential rate for *infants and toddlers*. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:

Rates differ for infants and toddlers accordance with the Market Rate Survey based on region. If a provider is enrolled in the Kentucky All STARS tiered quality rating and improvement system at a level 3 or higher and serves CCAP-eligable children, the provider will be awarded a subsidy enrollment award. This award pays higher rates for providers serving infants and toddlers.

☐ Differential rate for *school-age programs*. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

☑ Differential rate for higher quality, as defined by the state/territory.

Describe:

Through the Kentucky All STARS tiered quality rating and improvement system, providers serving CCAP children while operating at high quality (Levels 3-5) receive a subsidy enrollment award. The subsidy enrollment award awards pay higher awards for providers serving infants and toddlers.

Citation: All STARS Monetary Incentives

☑ Other differential rates or tiered rates.

Describe:

Licensed or certified providers who are accredited by a national organization will receive an additional two (2) dollars per day above the maximum rate of pay

☐ Tiered or differential rates are not implemented.

4.4 Summary of Facts Used To Determine That Payment Rates Are Sufficient To Ensure Equal Access

4.4.1 Lead Agencies must certify that CCDF payment rates are sufficient to ensure equal access for eligible families to child care services comparable to those provided by families not receiving CCDF assistance (98.16(a)). Certify that payment rates reported in 4.3.1 are sufficient to ensure equal access by providing the following summary of facts (98.45(b)):

a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices.

According to the current 2018 Market Rate Survey, 80.6% of licensed Type I; 84% of licensed Type II; and 80.5% of certified child care home providers in Kentucky report serving families and children who are receiving CCDF assistance. Approximately 20% of providers across the state do not accept CCDF assistance payments, representing an adequate level of participation.

Parents and providers have voiced concerns about the paperwork burden and processing time for subsidy payments. Providers also state that reimbursement rates are too low to sustain quality. To address these issues, the Benefind portal has automated the subsidy payment process. Payment requests are now submitted digitally and processing times have been significantly reduced. Technical assistants have helped providers navigate the new system.

The Lead Agency has conducted a fiscal analysis on raising reimburslement rates to the 40th percentile of the market rate for all licensed and certified providers and intends to file an emergency regulation effective December 1st, 2018.

b) Describe how payment rates are adequate and have been established based on the **most recent MRS or alternative methodology** . Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

Current payment rates are based on the 2015 MRS. The 2017 MRS (completed March 2018) saw an increase to cost of part time and full time care for all provider types. The Lead Agency has conducted a fiscal analysis of reimbursement rates based on the 2017 MRS. An emergency regulation has been drafted and will be filed in order to raise the payment rate for all licensed and certified providers to a minimum 40th percentile of the market rate. Rates currently set above the 40th percentile will not be reduced.

The Lead Agency offsets the cost of quality by offering technical assistance at no cost, and by offering free training materials and resources aligned with the All STARS standards of quality. The full cost of initial enrollment in the National Background Check Program was funded by the Lead Agency using CCDF dollars.

Providers may also qualify for additional funding through participation in the Kentucky All STARS tiered quality rating and improvement system. Monetary incentives are designed to reward the largest incentives to high quality providers serving CCAP-eligible children. For example, a Licensed Type I center with a Level 4 rating in All STARS would be awarded $3,000 initially and $1,800 annually for maintaining a Level 4 rating. If the same provider serves monthly an average of six CCAP-eligible children under the age of three and twelve CCAP-eligible children over the age of three, the center would be awarded an additional $4,896 annually. All STARS monetary incentives are funded through Tobacco Master Settlement funds.

Citation: Kentucky All STARS Monetary Incentives

c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF.

The market rate survey includes providers who meet licensing and certification requirements as well as provider programs participating in the state's quality rating and improvement system .

The 2017 Market Rate Survey, included an additional question focused on the costs associated with running the facility or child care home. Participants were asked to

provide information on the percentage of costs across eight expense categories. For analysis, the eight expense categories were further aggregated into three major categories of expenses:

1. Personnel (salary and benefits);
2. Overall Operation (facility, operational, food and transportation); and
3. Instructional (materials and professional development).

When examining expenses by the three major categories (personnel, overall operation, and
instruction) personnel made up the majority of overall costs. Personnel expenses were reported as highest for Type 1, lowest for Certified Homes, while overall operational

expenses were reported as highest for Certified Homes and lowest for Type 1 programs. Overall costs for instruction were similar regardless of program type.

The agency took into consideration daily rates and operational cost of facilities to set child care reimbursement rates within the availability of federal and state funds to support providers in meeting and maintaining health, safety, quality, and staffing requirements per child care regulations.

d) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, Pre-K standards, Head Start performance standards, or State defined quality measures).

The Market Rate Study indicates the Kentucky ALL STARS program, Type I providers at the highest levels charge higher prices for full-time care statewide. The highest prices for Type II and Certified homes vary by age group. Overall, the cost of care is highest in the Central region for Level 4-5 programs.

Determined by provider type, region, daily rates, and the current quality rating standards and trend analysis of the prior 4 Star Quality Rating System were all considered in setting monetary incentives for reaching and maintain quality at each of the 5-tiered rating levels.

The Lead Agency recognizes the cost of delivering higher quality through the integration of monetary incentives for programs operating at high quality while serving CCAP children. Through the Kentucky All STARS tiered quality rating and improvement system, providers serving CCAP children while operating at high quality (Levels 3-5) receive additional monetary incentives. This incentive is paid annually upon verification of quality standards and is calculated based on an average number of CCAP children served per month.

Licensed or certified providers who are accredited by a national organization will receive an additional two (2) dollars per day above the maximum rate of pay.

Citation: All STARS Monetary Incentives

e) How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds (98.16 (k))? Check all that apply.

☑ Limit the maximum co-payment per family.

Describe: .

The maximum co-pay is based upon family size and income limits.

☑ Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and

The maximum co-pay is based upon family size and income limits.

☑ Minimize the abrupt termination of assistance before a family can afford the full cost of care ('the cliff effect') as part of the graduated phase-out of assistance discussed in 3.1.7.

At initial application families must exceed 160% of the federal poverty limit. Upon renewal, the family must exceed 165%. Families can retain eligibility as long as they do not exceed 85% of the state median income.

☑ Other.

Describe:

Sliding scale fees are determined based on results of Market Rate Survey, considering regional differences; differences based on age of children served; and, income of family.

f) To support parental choice and equal access to the full range of child care options, does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

☐ No

☑ Yes. If yes:

i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families.

The provider understands and agrees that the cabinet shall reimburse the lesser amount of: (a) the customary and usual rate that is charged to the general public, less the family co-pay, or (b) the state maximum payment rate, less the family co-pay. Providers may NOT charge families receiving CCAP benefits more than the rate charged to parents whose children do not receive CCAP benefits.

The Lead Agency allows providers to charge an overage in order to increase the number of providers who participate in the CCAP program. This increases access and availability for families seeking subsidized child care

ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.

N/A

iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees.

The Lead Agency uses current MRS data to identify the gaps between the private

pay rates and the subsidy rates. We have identified the need to increase rates in some areas. The fiscal impact analysis has been conducted and the state will be making regulatory changes to address these concerns.

g) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers.

The Lead Agency considers provider fees based on results of Market Rate survey and take into consideration regional differences; type of care provided; and rates of programs that do and do not accept CCDF funding.

There is a range of child care provider types supporting parental choice such as- Licensed Type I, Licensed Type II, Certified and Family Friend and Neighbor. There are various payment options such as on-line billing and paper billing. Providers can submit CCAP billing the first day of the month. 90 % of providers who submit payment through the online billing portal are issued payment within the 1st two weeks of the month. Payments are issued monthly and daily. Providers also have access to receive their CCDF payments via direct deposit, whereas payments are issued within the first 4 days of the month.

h) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.

☑ Geographic area.

Describe:

The Lead Agency sets differential rates based on urban and rural designation as set by the state and consideration of regional differences reported in the Market Rate Study.

☑ Type of provider.

Describe:

The Lead agency sets provider rates based on provider type of License Child Care Center Type I, Licensed Child Care Homes Type II, Certified Child Care Home Provider.

☑ Age of child.

Describe:

The Lead Agency sets differential rates for the following age groups.

Infant - Child, who is less than one year old

Toddler - Child, who has reached the first birthday up to, but not including, the third birthday.

Preschool child - Child, who has reached the third birthday up to, but not including, the sixth birthday.

School-age child - Child, who has reached the sixth birthday.

☑ Quality level.

Describe:

The Lead Agency sets differential rates for higher quality centers in form of monthly quality incentive payments based on number of children receiving CCDF payments

☐ Other.

Describe:

i) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access. Check all that apply and describe:

☐ Payment rates are set at the 75th percentile benchmark or higher of the most recent MRS.

Describe:

☑ Based on the approved alternative methodology, payments rates ensure equal access.

Describe:

Current rates are based on the 2015 MRS. The 2017 Market rate survey was made avaiable in March 2018 and was used to determine new reimbursement rates which will be filed through emergency regulation in December 2018.

☐ Feedback from parents, including parent surveys or parental complaints.

Describe:

☐ Other.

Describe:

4.5 Payment Practices and the Timeliness of Payments

Lead Agencies are required to demonstrate that they have established payment practices applicable to all CCDF child care providers that include ensuring the timeliness of payments by either (1) paying prospectively prior to the delivery of services or (2) paying within no more than 21 calendar days of the receipt of a complete invoice for services. To the extent practicable, the Lead Agency must also support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by (1) paying based on a child's enrollment rather than attendance, (2) providing full payment if a child attends at least 85 percent of the authorized time, (3) providing full payment if a child is absent for 5 or fewer days in a month, or (4) using an alternative approach for which the Lead Agency provides a justification in its Plan (658E(c)(2)(S)(ii); 98.45(l)(2)).

Lead Agencies are required to use CCDF payment practices that reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF-funded assistance. Unless a Lead Agency is able to demonstrate that the following policies are not generally accepted in its particular state, territory, or service area or among particular categories or types of providers, Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents (658E(c)(2)(S); 98.45(l)(3)).

In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(l)(4) through (6); 658E(c)(2)(S)(ii); 98.45(l)(4); 98.45(l)(5); 98.45(l)(6)).

4.5.1 Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.

a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

☐ Paying prospectively prior to the delivery of services.

Describe the policy or procedure.

N/A

☑ Paying within no more than 21 calendar days of the receipt of a complete invoice for services.

Describe the policy or procedure.

The Lead Agency policy is to issue payment within ten (10) days of receipt of a completed invoice for pior month services.

b) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):

☐ Paying based on a child's enrollment rather than attendance.

Describe the policy or procedure.

N/A

☑ Providing full payment if a child attends at least 85 percent of the authorized time.

Describe the policy or procedure.

Licensed and certified providers may receive payment for up to five absences per month. Payments for more than five excused absences per child per month may be approved if the absence meets the following criteria for an extraordinary absence. An extraordinary absence is defined as: a) a death in the family; b) illness of the child or applicant; or c) a disaster verified by utility, local, state or federal government.

☐ Providing full payment if a child is absent for five or fewer days in a month.

Describe the policy or procedure.

N/A

☐ Use an alternative approach for which the Lead Agency provides a justification in its Plan.

If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

N/A

c) The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).

i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time).

Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time).

Payment rates are based on a full day, which is defined as care five or more hours per day, or part day defined as less than five hours of care per day.

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.

Describe the policy or procedure.

Enrollment fees are paid to Licensed Type I and Type II and Certified Family Child-Care Homes who charge enrollment fees to the public for recipients receiving Kentucky Tranistional Assitance Program (K-TAP) or having a referral under child protection and prevention.

d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe:

Family and provider both sign a service agreement for child care services detailing the

daily payment rate, copay payment amount, and child schedule. It also includes appeal process.

e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur. Describe:

Changes that reduce benefits, such as removing a child from the assistance case or income change resulting in an increase or decrease in co-pay and/or provider subsidy rate, require ten days advanced notice prior to case action being processed.

f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

An administrative hearing is a formal process by which an applicant, recipient or provider may appeal an action or inaction taken by the agency with which they do not agree. A client or provider must appeal a claim within 30 days of the date the claim was established.

g) Other. Describe:

N/A

4.5.2 Do payment practices vary across regions, counties, and/or geographic areas?

- [x] No, the practices do not vary across areas.
- [ ] Yes, the practices vary across areas.

Describe:

4.6 Supply-Building Strategies to Meet the Needs of Certain Populations

Lead Agencies are required to develop and implement strategies to increase the supply of and to improve the quality of child care services for children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours (658 E(c)(2)(M); 98.16 (x)).

4.6.1 Lead Agencies must identify shortages in the supply of high-quality child care providers. List the data sources used to identify shortages, and describe the method of tracking progress to support equal access and parental choice.

☑ In licensed family child care.

The Lead Agency, in collaboration with the Prichard Committee for Academic Excellence, has received a W.K. Kellogg Foundation grant to expand high-quality home-based child care for infant and toddlers in Kentucky. The grant is in the data collection phase with the goal to begin pilot programs this spring. Pilots will target infant/toddler family child care deserts in the state.

The Lead Agency conducts continuously evaluates the child care landscape in the state using data collected from the Kentucky Integrated Child Care System. The active provider listing for licensed child care programs is analyzed by region, county, and zip code. This data is used to inform provider recruitment of licensed family providers.

Staff from the Lead Agency and contracted partners frequently participate in continuaing education and technical assistance opportunities to help address child care deserts in the state.

☑ In licensed child care centers.

The Lead Agency conducts continuously evaluates the child care landscape in the state using data collected from the Kentucky Integrated Child Care System. The active provider listing for licensed child care programs is analyzed by region, county, and zip code. This data is used to inform provider recruitment of licensed child care providers.

Staff from the Lead Agency and contracted partners frequently participate in continuaing education and technical assistance opportunities to help address child care deserts in the state.

☐ Other.

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

a) Children in underserved areas. Check and describe all that apply.

☑ Grants and contracts (as discussed in 4.1.3).

Describe:

The Lead Agency, in collaboration with the Prichard Committee for Academic Excellence, has received a W.K. Kellogg Foundation grant to expand high-quality home-based child care for infant and toddlers in Kentucky. The grant is in the data collection phase with the goal to begin pilot programs this spring. Pilots will target child care deserts in the state.

☑ Family child care networks.

Describe:

Pilots created under the Kellogg Grant will utilize family child care network and HUB models.

☐ Start-up funding.

Describe:

☑ Technical assistance support.

Describe:

The Division of Child Care, through contractual services provided by the Child Care Resource and Referral Network of Services, provides regional coaching, technical assistance, and resources to support prospective and current child care providers.

A DCC developed and approved training is delivered by coaches as a requirement of licensure. This training includes information pertinent to the successful operation of a child care program to deliver quality child care.

☑ Recruitment of providers.

Describe:

Designated regional staff respond to expressed shortages and are available to assist in targeted recruiting efforts through community partnerships. Child Care Aware staff are employed and supported by the Human Development Institute/University of Kentucky.

☑ Tiered payment rates (as discussed in 4.3.2).

Describe:

Kentucky All STARS QRIS subsidy enrollment incentives grant monetary incentives to child care providers operating at high quality (All STARS levels 3-5) while serving families receiving subsidies. Quality incentives are higher for serving infants/toddlers.

Web Link: Kentucky All STARS Regulated Incentives

☑ Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Through the W.K. Kellogg Foundation grant, the Lead Agency will develop pilot programs to strengthen supports for in home family child care providers serving infants and toddlers in underserved areas.

☑ Accreditation supports.

Describe:

Licensed or certified providers who are accredited by a national organization will receive an additional two (2) dollars per day above the maximum rate of pay.

☑ Child Care Health Consultation.

Describe:

The Child Care Health Consultation for Healthy Start in Child Care Program, through the Department for Public Health, provides training and technical assistance to child care providers.

☑ Mental Health Consultation.

Describe:

Families and child care providers have access to multiple agencies and/or programs within CHFS for screening and assessment. These programs include First Steps Early Intervention System, the Early Childhood Mental Health Program, and the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program. Each of these programs accepts referrals from child care providers and/or individuals who may have a developmental and/or cognitive delay.

☐ Other.

Describe:

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

b) Infants and toddlers. Check and describe all that apply.

☑ Grants and contracts (as discussed in 4.1.3).

Describe:

The Lead Agency, in collaboration with the Prichard Committee for Academic Excellence, has received a W.K. Kellogg Foundation grant to expand high-quality home-based child care for infant and toddlers in Kentucky. The grant is in the data collection phase with the goal to begin pilot programs this spring. Pilots will target child care deserts in the state.

☑ Family child care networks.

Describe:

Pilots delivered through the Kellogg Grant will adopt family child care network models to support the expansion of in home care for infants and toddlers. Pilots are anticipated to to go live in the Spring of 2019.

☐ Start-up funding.

Describe:

☑ Technical assistance support.

Describe:

The Division of Child Care, through contractual services provided by the Child Care Resource and Referral Network of Services, provides regional coaching, technical assistance, and resources to support prospective and current child care providers. A DCC developed and approved training is delivered by coaches as a requirement of licensure. This training includes information pertinent to the successful operation of a child care program to deliver quality child care.

☑ Recruitment of providers.

Describe:

Designated regional staff respond to expressed shortages and are available to assist in targeted recruiting efforts through community partnerships. Child Care Aware staff are employed and supported by the Human Development Institute/University of Kentucky.

Through the W.K. Kellogg Foundation grant, the Lead Agency will develop pilot programs to strengthen supports for in home family child care providers serving infants and toddlers.

☑ Tiered payment rates (as discussed in 4.3.2) .

Describe:

Rates differ for infants and toddlers accordance with the Market Rate Survey based on region.

Web Link: Kentucky Child Care Maximum Payment Rate Chart

Kentucky All STARS QRIS subsidy enrollment incentives grant monetary incentives to child care providers operating at high quality (All STARS levels 3-5) while serving families receiving subsidies. Providers receive higher rates for serving infants and toddlers.

Web Link: Kentucky All STARS Regulated Incentives

☑ Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Through the W.K. Kellogg Foundation grant, the Lead Agency will develop pilot programs to strengthen supports for in home family child care providers serving infants and toddlers.

☑ Accreditation supports.

Describe:

Licensed or certified providers who are accredited by a national organization will receive an additional two dollars per day above the maximum rate of pay.

☑ Child Care Health Consultation.

Describe:

The Child Care Health Consultation for Healthy Start in Child Care Program, through the Department for Public Health, provides training and technical assistance to child care providers.

☑ Mental Health Consultation.

Describe:

Families and child care providers have access to multiple agencies and/or programs within CHFS for screening and assessment. These programs include First Steps Early Intervention System, the Early Childhood Mental Health Program, and the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program. Each of these programs accepts referrals from child care providers and/or individuals who may have a developmental and/or cognitive delay.

☐ Other.

Describe:

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

c) Children with disabilities. Check and describe all that apply.

- [ ] Grants and contracts (as discussed in 4.1.3).

  Describe:

- [ ] Family child care networks.

  Describe:

- [ ] Start-up funding.

  Describe:

- [x] Technical assistance support.

  Describe:

  Designated regional staff respond to expressed shortages and are available to assist in targeted recruiting efforts through community partnerships. Child Care Aware staff are employed and supported by the Human Development Institute/University of Kentucky. Because HDI is a University Center for Excellence in Developmental Disabilities, staff have access to support providers working with children with disabilities and work to ensure access to quality care for this population.

- [x] Recruitment of providers.

  Describe:

  Designated regional staff respond to expressed shortages of child care centers serving children with disabilities and are available to assist in targeted recruiting efforts through community partnerships. Child Care Aware staff are employed and supported by the Human Development Institute/University of Kentucky.

- [x] Tiered payment rates (as discussed in 4.3.2).

  Describe:

  Licensed, certified, or registered child care providers may receive an additional one dollar per day to serve a child with special needs.

☐ Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

☑ Accreditation supports.

Describe:

Licensed or certified providers who are accredited by a national organization will receive an additional two dollars per day above the maximum rate of pay.

☑ Child Care Health Consultation.

Describe:

The Child Care Health Consultation for Healthy Start in Child Care Program, through the Department for Public Health, provides training and technical assistance to child care providers.

☑ Mental Health Consultation.

Describe:

Families and child care providers have access to multiple agencies and/or programs within CHFS for screening and assessment. These programs include First Steps Early Intervention System, the Early Childhood Mental Health Program, and the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program. Each of these programs accepts referrals from child care providers and/or individuals who may have a developmental and/or cognitive delay.

☑ Other.

Describe:

The Lead Agency, through contractual services provided by the Child Care Resource and Referral Network, provides regional coaching, technical assistance, and resources to support prospective and current child care providers. Coaches deliver CHFS-approved training as a requirement of licensure. This training includes information pertinent to the successful operation of a child care program to

deliver quality child care including, but not limited to, fiscal management, human resource management, risk management, public relations and communications.

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

d) Children who receive care during non-traditional hours.Check and describe all that apply

- [x] Grants and contracts (as discussed in 4.1.3).

  Describe:

  Work through the Kellogg Grant Early Childhood Project will include recruitment and support of family child care during non-traditional hours.

- [ ] Family child care networks.

  Describe:

- [ ] Start-up funding.

  Describe:

- [x] Technical assistance support.

  Describe:

  Licensed child-care centers and certified family child-care homes providing non-traditional care (i.e. non-traditional hours of evening and nights) receive technical assistance regarding Health, safety and quality child care.

- [x] Recruitment of providers.

  Describe:

  Designated regional staff respond to expressed shortages in non-traditional child care and are available to assist in targeted recruiting efforts through community partnerships. Child Care Aware staff are employed and supported by the Human Development Institute/University of Kentucky.Designated regional staff respond to expressed shortages in non-traditional child care and are available to assist in targeted recruiting efforts through community partnerships. Child Care Aware staff are employed and supported by the Human Development Institute/University of

Kentucky.

☑ Tiered payment rates (as discussed in 4.3.2) .

Describe:

Licensed or certified providers may also receive an additional one dollar per day to provide child care during non-traditional hours.

☐ Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

☑ Accreditation supports.

Describe:

Licensed or certified providers who are accredited by a national organization will receive an additional two dollars per day above the maximum rate of pay.

☑ Child Care Health Consultation.

Describe:

The Child Care Health Consultation for Healthy Start in Child Care Program, through the Department for Public Health, provides training and technical assistance to child care providers.

☑ Mental Health Consultation.

Describe:

Families and child care providers have access to multiple agencies and/or programs within CHFS for screening and assessment. These programs include First Steps Early Intervention System, the Early Childhood Mental Health Program, and the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program. Each of these programs accepts referrals from child care providers and/or individuals who may have a developmental and/or cognitive delay.

☐ Other.

Describe:

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

e) Other. Check and describe all that apply:

- ☐ Grants and contracts (as discussed in 4.1.3).

  Describe:

  N/A

- ☐ Family child care networks.

  Describe:

  N/A

- ☐ Start-up funding.

  Describe:

  N/A

- ☐ Technical assistance support.

  Describe:

  N/A

- ☐ Recruitment of providers.

  Describe:

  N/A

- ☐ Tiered payment rates (as discussed in 4.3.2).

  Describe:

  N/A

- ☐ Support for improving business practices, such as management training, paid sick leave, and shared services.

  Describe:

  N/A

☐ Accreditation supports.

Describe:

N/A

☐ Child Care Health Consultation.

Describe:

N/A

☐ Mental Health Consultation.

Describe:

N/A

☐ Other.

Describe:

N/A

4.6.3 Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs.

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment?

The Lead Agency refers to current census data and Kentucky unemployment rates reported by Bureau of Labor Statistics to compare with regional populations to determine the areas with greatest concentration of poverty and unemployment.

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs

The Lead Agency focuses on targeted recruitment and retention of high quality programs in areas of high poverty and with high unemployment rates. This includes regional focus

on outreach to local government and small business to enhance knowledge of quality child care and benefit of this service to help retain a stable workforce.

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

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children, whether they are licensed or license-exempt. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for providers of child care in a state or territory and then moves to focus in on CCDF providers who may be licensed, exempt from licensing, or relative providers. The section then covers the health and safety requirements and training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Lead Agencies are also asked to describe any exemptions for relative providers (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children.

Note: When responding to questions in this section, the OCC recognizes that each State/Territory identifies and defines its own categories of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important to note that these requirements are in effect for all child care staff members that are licensed,

regulated or registered under state/territory law and all other providers eligible to deliver CCDF services.

5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check all that apply and provide a citation to the licensing rule.

☑ Center-based child care.

Describe and Provide the citation:

Licensed Type I child care centers provide care for 4 or more children in a non-residential setting or 13 or more children in a designated space separate from the primary residence of the licensee. Exemptions from licensing requirements are outlined in 922 KAR 2:090 Section 3.

Type I child care centers are regulated by the following:

KRS 199.896 - License requirements

922 KAR 2:020- Child Care Assistance Program (CCAP) improper payments, claims and penalties

922 KAR 2:090 - Child Care Center Licensure

922 KAR 2:120 - Child Care Facility Health and Safety Standards

922 KAR 2:160 - Child Care Assistance Program

922 KAR 2:190 - Civil Penalities
922 KAR 2:270 - Kentucky All STARS Quality-based Graduated Early Childhood Rating System for Licensed Child Care Centers and Certified Family Child Care Homes
922 KAR 2:280 - Background Checks for Child Care Staff Members, Reporting Requirements and Appeals

☑ Family child care.

Describe and Provide the citation:

A Type II child-care provider delivers care in the residence of the licensee in which child care is regularly provided for seven (7), but not more than twelve (12), children including children related to the licensee. Exemptions from licensing requirements are outlined in 922 KAR 2:090 Section 3.

Type II child care providers are regulated by the following:
KRS 199.896 - License requirements
922 KAR 2:020- Child Care Assistance Program (CCAP) improper payments, claims and penalties
922 KAR 2:090 - Child Care Center Licensure
922 KAR 2:120 - Child Care Facility Health and Safety Standards
922 KAR 2:160 - Child Care Assistance Program
922 KAR 2:180 - Requirement for Registered Child Care Providers in the Child Care Assistance Program
922 KAR 2:190 - Civil Penalities
922 KAR 2:270 - Kentucky All STARS Quality-based Graduated Early Childhood Rating System for Licensed Child Care Centers and Certified Family Child Care Homes
922 KAR 2:280 - Background Checks for Child Care Staff Members, Reporting Requirements and Appeals

A Certified Family Child Care provider shall apply for certification of the provider's home if the provider is caring for four (4) to six (6) children unrelated to the provider. A family child-care provider caring for three (3) or fewer children may apply for certification of the provider's home at the discretion of the provider.

Certified providers are regulated by the following:
KRS 199.896 - License requirements

922 KAR 2:020 - Child Care Assistance Program (CCAP) improper payments, claims and penalties
922 KAR 2:100 - Certification of Family Child Care Homes
922 KAR 2:120 - Child Care Facility Health and Safety Standards
922 KAR 2:160 - Child Care Assistance Program
922 KAR 2:260 - Child Care Service Appeals
922 KAR 2:270 - Kentucky All STARS Quality-based Graduated Early Childhood Rating System for Licensed Child Care Centers and Certified Family Child Care Homes
922 KAR 2:280 - Background Checks for Child Care Staff Members, Reporting Requirements and Appeals

☑ In-home care (care in the child's own home).
Describe and provide the citation (if applicable):

A registered child care provider is not subject to licensure or certification by the state or federal government but must meet all requirements of the Child Care Assistance Program (CCAP) as outlined in 922 KAR 2:180. Registered providers must meet the minimum health, safety and training requirements and not live within the same household as the child.

During hours of operation, a registered child care provider shall not care for more than:
(1) Three (3) children receiving CCAP per day;
(2) Six (6) children receiving CCAP per day, if those children are:
(a) A part of a sibling group; and
(b) Related to the provider; or
(3) A total of eight (8) children inclusive of the provider's own children.

Registered providers are regulated by the following:
922 KAR 2:020- Child Care Assistance Program (CCAP) improper payments, claims and penalties
922 KAR 2:160 - Child Care Assistance Program
922 KAR 2:180 - Requirement for Registered Child Care Providers in the Child Care Assistance Program
922 KAR 2:280 - Background Checks for Child Care Staff Members, Reporting

Requirements and Appeals

5.1.2 Describe if any providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)).

Note: Additional information about exemptions related to CCDF providers is required in 5.1.3.
Kentucky Administrative Regulation, 922 KAR 2:090, provides limited exemptions from child care licensing. The programs exempt from child care licensing and regulations are typically regulated by another agency, such as the Kentucky Department of Education. These exemptions do not endanger the health, safety, and welfare of children, because in the majority of cases, the programs require background checks and have infectious disease requirements for participation. In Kentucky, per statutorily established exemption in KRS 199.896, programs that operate for less than 20 hours per week, in which children attend less than 10 hours, shall be exempt from child care licensing requirements.

DCBS ensures exemptions do not endanger the health, safety, and welfare of children.

922 KAR 2:090, Section 3, outlines the exempt child care settings:
"The following child-care settings shall be exempt from licensure requirements of this administrative regulation, 922 KAR 2:110, and 922 KAR 2:120:
(1) Summer camps certified by the cabinet as youth camps which serve school-age children;
(2) Kindergarten through grade 12 in private schools while school is in session;
(3) All programs and preschools regulated by the Kentucky Department of Education governed by KRS Chapter 157;
(4) Summer programs operated by a religious organization, which a child attends no longer than two (2) weeks;
(5) Child care provided while parents are on the premises, other than the employment and educational site of parents;
(6) Child care programs operated by the armed services located on an armed forces base;
(7) Child care provided by educational programs that include parental involvement with the care of the child and the development of parenting skills;
(8) Facilities operated by a religious organization while religious services are being

conducted; and

(9) A program providing instructional and educational programs:

(a) That operates for a maximum of twenty (20) hours per week; and

(b) Which a child attends for no more than ten (10) hours per week."

Citation: 922 KAR 2:090 Child-care center licensure

Citation: KRS 199.896 License requirement

5.1.3 Check and describe any CCDF providers in your state/territory who are exempt from licensing (98.40(2)(i) through (iv))? Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care or any other factors applicable to the exemption

☐ Center-based child care.

If checked, describe the exemptions.

☐ Family child care.

If checked, describe the exemptions.

☑ In-home care.

If checked, describe the exemptions.

A registered child care provider is not subject to licensure or certification by the state or federal government but must meet all requirements of the Child Care Assistance Program (CCAP) as outlined in 922 KAR 2:180. Registered providers must meet the minimum health, safety and training requirements and not live within the same household as the child.

Registered providers are regulated by the following:

922 KAR 2:020- Child Care Assistance Program (CCAP) improper payments, claims and penalties

922 KAR 2:160 - Child Care Assistance Program

922 KAR 2:180 - Requirement for Registered Child Care Providers in the Child Care Assistance Program

922 KAR 2:280 - Background Checks for Child Care Staff Members, Reporting Requirements and Appeals

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.1 Standards on ratios, group sizes, and qualifications for CCDF providers.

Lead Agencies are required to establish child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories.

a) Licensed CCDF center-based care

1. Infant

-- How does the State/territory define infant (age range):

A child who is less than 12 months old

-- Ratio:

1 staff for 5 children

-- Group size:

10

-- Teacher/caregiver qualifications:

Please refer to 922 KAR 2:090 Child care licensing requirements Section 11

2. Toddler

-- How does the State/territory define toddler (age range):

A child between the ages of twelve (12) months and thirty-six (36) months

-- Ratio:

1 staff for 5 children

-- Group size:

10

-- Teacher/caregiver qualifications:

Please refer to 922 KAR 2:090 Child care licensing requirements Section 11

3. Preschool

-- How does the State/territory define preschool (age range):

Child between the ages of two and five years old

-- Ratio:

preschool age two-three years, one staff for 10 children; preschool age three-four years, one staff for 12 children; preschool age four-five years, one staff for 14 children.

-- Group size:

preschool two-three years, max group size 20; preschool age three-four years, man group size 24; preschool age four-five, max group size 28

-- Teacher/caregiver qualifications:

Please refer to 922 KAR 2:090 Child care licensing requirements Section 11

4. School-age

-- How does the State/territory define school-age (age range):

Child attending kindergarten, elementary and secondary education

-- Ratio:

One staff for 15 children for school-age 5-7 years.

One staff for 25 children (for before and after school) for school-age 7 and older

One staff for 20 children (in full day care) for school-age 7 and older

-- Group size:

School age 5 - 7 years maximum group 30

-- Teacher/caregiver qualifications:

Please refer to 922 KAR 2:090 Child care licensing requirements Section 11

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers

N/A

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

The age of the youngest child in the group shall determine the staff to child ratio and maximum group size.

7. Describe the director qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care.

Please refer to 922 KAR 2:090 Child care licensing requirements Section 11

b) Licensed CCDF family child care provider

1. Infant

-- How does the State/territory define infant (age range):

A child who is less than 12 months of age

-- Ratio:

1 staff for 4

-- Group size:

Maximum number of unrelated children in the care of a certified family child-care home provider shall not exceed six at any one time. A provider may care for four related children in addition to six unrelated children for a maximum child care capacity of 10 at any one time

-- Teacher/caregiver qualifications:

Please refer to 922 KAR 2:100 Certification of Family Child-Care Homes Section 2

2. Toddler

-- How does the State/territory define toddler (age range):

Child between the age of 12 months and 36 months

-- Ratio:

1 staff for 10 children

-- Group size:

10 maximum

-- Teacher/caregiver qualifications:

Please refer to 922 KAR 2:100 Certification of Family Child-Care Homes Section 2

3. Preschool

-- How does the State/territory define preschool (age range):

Child between the ages of 2 and five years old

-- Ratio:

1 staff for 10 children

-- Group size:

10 maximum

-- Teacher/caregiver qualifications:

Please refer to 922 KAR 2:100 Certification of Family Child-Care Homes Section 2

4. School-age

-- How does the State/territory define school-age (age range):

Child attending kindergarten, elementary, or secondary education

-- Ratio:

1 staff for 15 children

-- Group size:

30 maximum

-- Teacher/caregiver qualifications:

Please refer to 922 KAR 2:100 Certification of Family Child-Care Homes Section 2

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes

N/A

c) In-home CCDF providers:

1. Describe the ratios

During hours of operation, a registered child care provider shall not care for more than three children receiving CCAP per day; or six children receiving CCAP per day, IF those children are part of a sibling group; and related to the provider; or total of eight children inclusive of the provider's own children.

2. Describe the group size

No more than 8 children, inclusive of the provider's own children.

3. Describe the maximum number of children that are allowed in the home at any one time.

During hours of operation, a registered child care provider shall not care for more than

three children receiving CCAP per day; or six children receiving CCAP per day, IF those children are part of a sibling group; and related to the provider; or total of eight children inclusive of the provider's own children.

4. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size

During hours of operation, a registered child care provider shall not care for more than three children receiving CCAP per day; or six children receiving CCAP per day, IF those children are part of a sibling group; and related to the provider; or total of eight children inclusive of the provider's own children.

5. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day

N/A

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.2 Health and safety standards for CCDF providers.

States and territories must establish health and safety standards for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the topics listed below, as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care providers receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives because Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)).

a) To certify, describe how the following health and safety standards for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(l)). Note: This question is different from the health and safety training requirements, which are addressed in question 5.2.3.

1. Prevention and control of infectious diseases (including immunization)

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Orientation curriculum developed by the Cabinet for Families and Children and the Department for Community Based Services, Division of Child Care fulfill the requirements of all CCDF health and safety requirements (98.42(c)). Cabinet approved orientation is mandatory for all licensed, certified, and registered child care staff per KRS 199.892, 922 KAR 2:120, 922 KAR 2:090, 922 KAR 2:100 and 922 KAR 2:180.

Regulations:

Licensed and Certified Providers:

A staff person suspected of being infected with a communicable disease shall:

(a) Not perform duties that may allow for the transmission of the disease until the infectious condition can no longer be transmitted; and

(b) Provide a statement from a health professional, if requested.

Registered Providers:

A registered child care provider shall report to the cabinet or designee: (a) Within 24 hours from the time of discovery: 1. A communicable disease, which shall also be reported to the local health department pursuant to KRS 214.010;

Standards of Practice:

If a child shows signs of a contagious illness that could be communicable, he or she shall be removed from care and placed in an isolated area until the family is able to pick up the child from the facility. The child shall remain outside of the facility until he or she is symptom-free for 24 hours.

The child care center shall maintain a current immunization certificate for each child in care within 30 days of enrollment.

-- List all citations for these requirements, including those for licensed and license-exempt programs

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 19

Citation: 922 KAR 2:120 Child care center health and safety standards Section 3
Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 5
Citation: Standards of Practice for Licensed Child Care Providers Titles 230, 1070
Citation: Standards of Prectice for Certified Child Care Providers Titles 95, 590

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
N/A

-- Describe any variations based on the age of the children in care
N/A

-- Describe if relatives are exempt from this requirement
N/A

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices
-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
Licensed, Certified, and Registered Providers:
Orientation curriculum developed by the Cabinet for Families and Children and the Department for Community Based Services, Division of Child Care fulfill the requirements of all CCDF health and safety requirements (98.42(c)). Cabinet approved orientation is mandatory for all licensed, certified, and registered child care staff per KRS 199.892, 922 KAR 2:120, 922 KAR 2:090, 922 KAR 2:100 and 922 KAR 2:180.

Standard of Practice:
No loose bedding, such as a bumber or blanket. No toys in the child except for the child's pacifier.

An infant shall sleep or nap on the infant's back unless the infant's health professional signs a waiver that states the infant requires an alternate sleeping position. For an infant an individual non-tiered crib that meets Consumer Product Safety Commission

standards established in 16 C.F.R. 1219-1220.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Citation: 922 KAR 2:120 Child care center health and safety standards Section 6

Citation: 922 KAR 2:180 Requirements for registered child care providers Section 2

Citation: Standards of Practice for Licensed Child Care Providers Title 420, 435

Citation: Standards of Prectice for Certified Child Care Providers Title 180

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

Rest time shall not exceed two hours for a preschool-age child unless the child is attending the child-care center during nontraditional hours.

-- Describe if relatives are exempt from this requirement

N/A

3. Administration of medication, consistent with standards for parental consent

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Licensed and Certified Providers:

Kentucky regulations require that programs obtain written permission from the child's parent/guardian and included the following;

Name of medication;

Dose to be given;

Route (how to give the medication - orally, topically, etc.);

Time (when medication should be given and the time the last dose was given prior to the child arriving at the program); and

Parent signature

Programs should also have the following information prior to administering any

medication:
Purpose of medication;
Side effects to watch for;
Any special instructions;
Any known medication allergies of the child; and
Name and phone number of prescribing doctor.

Licensed, Certified, and Registered Providers:
Orientation curriculum developed by the Cabinet for Families and Children and the Department for Community Based Services, Division of Child Care fulfill the requirements of all CCDF health and safety requirements (98.42(c)). Cabinet approved orientation is mandatory for all licensed, certified, and registered child care staff per KRS 199.892, 922 KAR 2:120, 922 KAR 2:090, 922 KAR 2:100 and 922 KAR 2:180.

-- List all citations for these requirements, including those for licensed and license-exempt providers
Citation: 922 KAR 2:120 Child care center health and safety standards Section 7
Citation: 922 KAR 2:180 Requirements for registered child care providers Section 2

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
Licensed and Certified programs must keep a medication administration log (written record) of when, how much, and who administered the medicine.

-- Describe any variations based on the age of the children in care
Providers are required obtaining and maintaining written documentation when administering medication regardless of child age.

-- Describe if relatives are exempt from this requirement
N/A

4. Prevention of and response to emergencies due to food and allergic reactions

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

All staff should be notified of food allergies and allergic reactions that are reported by parents.

Allergies and intolerances should be documented by a physician. An allergy is an immune response, and an intolerance is a metabolic response (e.g., a lactase deficiency for lactose intolerant children).

If parent/guardian has given written permission, a child's allergy may be posted in sight for all staff.

Be alert to unexpected encounters with allergic substances.

Be sure to get written instructions and training from the child's doctor for how to respond to a child's allergic reactions, including any medication needed or emergency treatment (including training in the use of epinephrine, e.g., an EpiPen®, for a child with a history of allergic reactions).

Licensed, Certified, and Registered Providers:
Orientation curriculum developed by the Cabinet for Families and Children and the Department for Community Based Services, Division of Child Care fulfill the requirements of all CCDF health and safety requirements (98.42(c)). Cabinet approved orientation is mandatory for all licensed, certified, and registered child care staff per KRS 199.892, 922 KAR 2:120, 922 KAR 2:090, 922 KAR 2:100 and 922 KAR 2:180

-- List all citations for these requirements, including those for licensed and license-exempt providers

Citation: 922 KAR 2:120 Child care center health and safety standards Section 7
Citation: 922 KAR 2:180 Requirements for registered child care providers Section 2

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

N/A

5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

All licensed provider types per regulation must complete orientation training covering Health, Safety & Sanitation.

Safety First:
(1) Closely supervise children;
Be alert. Know where children are at all times.
Position yourself strategically so that you can see all of the children.
Circulate throughout the room.
Be close enough to intervene if necessary.
Establish clear, simple and positive safety rules. For example: *We walk inside. Running is for outside. Our toys are for playing.*
Remain within range of voice so that you can hear the children and they can hear you.

Maintain child/staff ratios at all times

(2) Recognize, remove, and/or limit potential safety hazards.
Falls;
Drowning;
Burns;
Choking, suffocation, and strangulation;

Poisoning; and
Vehicle-related injuries.

Registered providers serving children within the provider's home must adhere to safety standards as outlined in 922 KAR 2:180. The provider will also be subject to an annual home inspection.

Licensed, Certified, and Registered Providers:
Orientation curriculum developed by the Cabinet for Families and Children and the Department for Community Based Services, Division of Child Care fulfill the requirements of all CCDF health and safety requirements (98.42(c)). Cabinet approved orientation is mandatory for all licensed, certified, and registered child care staff per KRS 199.892, 922 KAR 2:120, 922 KAR 2:090, 922 KAR 2:100 and 922 KAR 2:180.

-- List all citations for these requirements, including those for licensed and license-exempt providers
Citation: 922 KAR 2:120 Child care center health and safety standards Section 4
Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 3

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
No variations.

-- Describe any variations based on the age of the children in care
N/A

-- Describe if relatives are exempt from this requirement
N/A

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Pediatric Abusive Head Trauma (PAHT), or previously referred to as Shaken Baby Syndrome, describes the constellation of signs and symptoms resulting from violent shaking or shaking and impacting the head of an infant or small child birth to five years of age.

Legislation mandates education on the identification and prevention of Pediatric Abusive Head Trauma for various groups in the state who work with or care for young children. This training will help caregivers recognize early signs of maltreatment, which can prevent escalation to Pediatric Abusive Head Trauma. Caregivers will learn effective strategies for dealing with a crying infant-the most common trigger for Pediatric Abusive Head Trauma. All employees and owners of licensed and registered child-care centers are required to take a minimum of 1.5 hours of training on PAHT once every five years as a part of their continuing education requirements and counts towards the required annual training total.

Licensed, Certified, and Registered Providers:
Orientation curriculum developed by the Cabinet for Families and Children and the Department for Community Based Services, Division of Child Care fulfill the requirements of all CCDF health and safety requirements (98.42(c)). Cabinet approved orientation is mandatory for all licensed, certified, and registered child care staff per KRS 199.892, 922 KAR 2:120, 922 KAR 2:090, 922 KAR 2:100 and 922 KAR 2:180.

-- List all citations for these requirements, including those for licensed and license-exempt providers
Citation: 922 KAR 2:090. Child-care center licensure Section 11
Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 10
Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

N/A

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

A child-care center licensed under KRS 199.896 and a family child-care home certified under KRS 199.8982 shall have a written plan for evacuation in the event of fire, natural disaster, or other threatening situation that may pose a health or safety hazard to the children in the center. The plan shall include but not be limited to:

1) A designated relocation site and evacuation route;

2) Procedure for notifying parents of the relocation and ensuring family reunification;

3) Procedures to address the needs of individual children including children with special needs;

4) Instructions relating to the training of staff or the reassignment of staff duties, as appropriate;

5) Coordination with local emergency management officials; and

6) A program to ensure that appropriate staff is familiar with components of the plan.

Resources are available to providers include instructions and templates for developing policy and procedures. Technical assistance staff coach to addressing the individual needs of each child served during emergencies, including infants and toddlers, children with disabilities, and children with chronic medical conditions.

Licensed, Certified, and Registered Providers:
Orientation curriculum developed by the Cabinet for Families and Children and the Department for Community Based Services, Division of Child Care fulfill the requirements of all CCDF health and safety requirements (98.42(c)). Cabinet approved orientation is mandatory for all licensed, certified, and registered child care staff per KRS 199.892, 922 KAR 2:120, 922 KAR 2:090, 922 KAR 2:100 and 922 KAR 2:180.

-- List all citations for these requirements, including those for licensed and license-exempt providers
Citation: KRS 199.895 Evacuation Plan;
Citation: 922 KAR 2:120 Child care center health and safety standards Section 12
Citation: 922 KAR 2:180 Requirements for registered child care providers Section 2
Citation: Standards of Practice for Licensed Child Care Providers Title 1085
Citation: Standards of Prectice for Certified Child Care Providers Title 655

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
N/A

-- Describe any variations based on the age of the children in care
N/A

-- Describe if relatives are exempt from this requirement
N/A

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
Licensed, Certified, and Registered Providers:
Orientation curriculum developed by the Cabinet for Families and Children and the Department for Community Based Services, Division of Child Care fulfill the

requirements of all CCDF health and safety requirements (98.42(c)). Cabinet approved orientation is mandatory for all licensed, certified, and registered child care staff per KRS 199.892, 922 KAR 2:120, 922 KAR 2:090, 922 KAR 2:100 and 922 KAR 2:180.

Standards of Practice:
If a diapering pad has a crack or tear, the pad should be replaced. It is impossible to clean and disinfect a surface that contains cracks and tears which expose the inner padding. Many times providers store items at the corners of the diaper changing surface; i.e., pens, scissors, markers, toys, thermometers, books. Handling these items during diaper changes contaminants the item. In addition, many of the items are dangerous for a child who is lying on the diaper change table. Larger and older children may be changed on a suitable mat on the floor, or they may stand over a surface that is impervious to moisture, i.e., in a bathroom over a tiled floor. It is unacceptable to change a child directly placed on a bed, sofa or carpeted floor.

Some children may be allergic or sensitive to the baby wipes. If needed a wet wash cloth may be used to clean a child during diapering. The provider must be careful to use the cloth only once and store the used cloth in a container lined with a plastic bag that is stored separately from other wet or soiled items to avoid cross contamination.

It is recommended that if cloth diapers are used, a container with a tight fitting lid lined with a plastic bag should be used to store the soiled diapers. The soiled cloth diapers must be stored separately from soiled clothes and other waste. At the end of the day, the plastic bag of soiled diapers can be tied and sent home for laundering. The diaper contained should be cleaned and disinfected daily. Soiled diapers should be stored in a covered container. A plan should be implemented to empty the container and take the soiled diapers to the trash daily.

Program should assure that the bathroom is clean and in working order at all times. For example: drips and spills should be cleaned up immediately. The bathroom should be free of odor. The toilet should flush easily and completely. The bathroom should be well lit and should have a screened window or working ventilation system.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Citation: 922 KAR 2:090. Child-care center licensure Section 11

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 12

Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

Citation: Standards of Practice for Licensed Child Care Providers Title 70, 530, 535, 540

Citation: Standards of Prectice for Certified Child Care Providers Title 320, 355, 365, 370,

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

N/A

9. Precautions in transporting children (if applicable)

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

A center providing transportation is required to maintain a written record detailing type of transportation, scheduling, staffing, route, daily inspection, roster of children transported, valid driver's license, maintain full coverage auto insurance, and background check of driver.

603 KAR 5:072 pertains to the inspection required for vehicles designed and used for carrying nine or more passengers, including the driver. This inspection is to be conducted by the Transportation Cabinet, Department of Vehicle Regulations or its designee.

Licensed, Certified, and Registered Providers:
Orientation curriculum developed by the Cabinet for Families and Children and the Department for Community Based Services, Division of Child Care fulfill the requirements of all CCDF health and safety requirements (98.42(c)). Cabinet approved orientation is mandatory for all licensed, certified, and registered child care staff per KRS 199.892, 922 KAR 2:120, 922 KAR 2:090, 922 KAR 2:100 and 922 KAR 2:180.

-- List all citations for these requirements, including those for licensed and license-exempt providers
Citation: 603 KAR 5:072. Mandatory annual bus inspection
Citation: 922 KAR 2:090.Child-care center licensure Section 9
Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 17
Citation: 922 KAR 2:120. Child-care center health and safety standards Section 12
Citation: 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program Section 3

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
If transportation is provided by a registered child care provider, the provider shall:
(a) Have written permission from a parent or guardian to transport the child; (b) Have a vehicle equipped with seat belts; and
(c) Comply with KRS 189.125 regarding child restraint and seating.

-- Describe any variations based on the age of the children in care
N/A

-- Describe if relatives are exempt from this requirement
N/A

10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification
-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
All CCDF providers are required to have a staff member present with current pediatric

first aid and CPR training. Registered and certified family child care providers must be certified in infant/child CPR and first aid. In Type I and II licensed programs, at least one person on duty is required to be certified in infant/child CPR and first aid.

Licensed, Certified, and Registered Providers:
Orientation curriculum developed by the Cabinet for Families and Children and the Department for Community Based Services, Division of Child Care fulfill the requirements of all CCDF health and safety requirements (98.42(c)). Cabinet approved orientation is mandatory for all licensed, certified, and registered child care staff per KRS 199.892, 922 KAR 2:120, 922 KAR 2:090, 922 KAR 2:100 and 922 KAR 2:180.

Standards of Practice:
If the assistant is left alone at the family child care home, the assistant should be a fully qualified staff, including background checks and certification in CPR and First Aid.

The child care provider must be approved for Infant and Child CPR and First Aid and be on duty and present with the children at all times. Infant and Child CPR certification and First Aid is required for all infant, toddlers and preschool children. When a group leaves the premises for a walk to the park or a field trip, a CPR and First Aid Certified staff must be present with these children. In addition, there must be a CPR and First Aid certified staff present at the family child care home as well for the children who did not leave the premises. Approved Training Sources for First Aid and CPR: American Red Cross American Heart Association American CPR Training, previously known as American Environmental Health and Safety National Safety Council American Safety and Health Institute MEDIC First Aid *No online courses are approved

-- List all citations for these requirements, including those for licensed and license-exempt providers
Citation: 922 KAR 2:090.Child-care center licensure Section 11
Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 2

Citation: 922 KAR 2:180 Requirements for registered child care providers Section 2
Citation: Standards of Practice for Licensed Child Care Providers Title 35, 40, 135
Citation: Standards of Prectice for Certified Child Care Providers Title 325

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
N/A

-- Describe any variations based on the age of the children in care
Staff must be trained in pediatric CPR in order to properly administer CPR to children.

-- Describe if relatives are exempt from this requirement
Relative providers are not exempt from this requirement .

11. Recognition and reporting of child abuse and neglect
-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
KRS 620.030 designate Kentucky child care providers as mandated reporters. Staff are required to identify at least five physical or behavioral indicators of child abuse and neglect, including at least two ways to distinguish accidental injury from abuse.

Licensed, Certified, and Registered Providers:
Orientation curriculum developed by the Cabinet for Families and Children and the Department for Community Based Services, Division of Child Care fulfill the requirements of all CCDF health and safety requirements (98.42(c)). Cabinet approved orientation is mandatory for all licensed, certified, and registered child care staff per KRS 199.892, 922 KAR 2:120, 922 KAR 2:090, 922 KAR 2:100 and 922 KAR 2:180.

-- List all citations for these requirements, including those for licensed and license-exempt providers
Citation: KRS 620.030 Duty to report dependency, neglect, abuse, or human trafficking
Citation: 922 KAR 2:090. Child-care center licensure Section 8

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 15
Citation: 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program Section 2

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
N/A

-- Describe any variations based on the age of the children in care
N/A

-- Describe if relatives are exempt from this requirement
N/A

b) Does the Lead Agency include any of the following optional standards?

- ☐ No, if no, skip to 5.2.3.
- ☑ Yes, if yes provide the information related to the optional standards addressed.

1. Nutrition

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Licensed and certified child-care programs in Kentucky must follow meal requirements developed in consultation with the Child and Adult Care Food Program (CACFP) administered by the Kentucky Department of Education. Child Care programs receive consultation and financial support through CACFP program, which provides aid to child and adult care institutions and family or group day care homes for the provision of nutritious foods that contribute to the wellness, healthy growth, and development of young children, and the health and wellness of older adults and chronically impaired disabled persons. Programs that participate in CACFP typically exceed licensing standards. For child care programs that do not participate in CACFP, Kentucky has licensing standards that include food and nutrition requirements .

-- List all citations for these requirements, including those for licensed and license-exempt providers

Citation: 922 KAR 2:120. Child-care center health and safety standard Section 9

Citation: 922 KAR 2:100 Certification of family child-care homes Section 14

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

Registered providers do not participate in the CACFP.

-- Describe any variations based on the age of the children in care.

A serving of milk shall consist of: (a) Breast milk or iron-fortified formula for a child: 1. Age birth to twelve (12) months; or 2. Beyond twelve (12) months of age as documented by the parent or the child's physician; (b) Pasteurized whole milk for children ages twelve (12) months to twenty-four (24) months; or (c) Pasteurized low fat one (1) percent or fat-free skim milk for children ages twenty-four (24) months to school-age.

--Describe if relatives are exempt from this requirement

N/A

2. Access to physical activity

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

A program of activities that provides experience to promote the individual child's physical, emotional, social, and intellectual growth and well-being; and developmentally appropriate for each child served.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Citation: 922 KAR 2:120. Child-care center health and safety standard Section 2

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 12

-Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no physical activity requirements for registered providers.

-- Describe any variations based on the age of the children in care.

N/A

--Describe if relatives are exempt from this requirement

N/A

3. Caring for children with special needs

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Providers who care for a child with a special need shall be consistent with the nature of the need as documented by the child's health professional. The child care center must obtain written information regarding a child with special needs and keep that documentation on file. A therapist, physician or other health professional could provide a child's health information for specific care. The child care center staff should be aware of a child's documented special needs and should ensure those needs are met while the child is at the child care center.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Citation: 922 KAR 2:120. Child-care center health and safety standard Section 2

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 12

Citation: 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program Section 5

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care.

N/A

--Describe if relatives are exempt from this requirement

N/A

4. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)).

Describe:

N/A

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

N/A

-- List all citations for these requirements, including those for licensed and license-exempt providers

N/A

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care.

N/A

--Describe if relatives are exempt from this requirement

N/A

5.2.3 Health and safety training for CCDF providers on required topics.

Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served, that address the health and safety topics described in 5.2.2, and child development. Lead Agencies must also have ongoing training requirements on the health and safety topics for caregivers, teachers, and directors of children receiving CCDF funds (658E(c)(2)(I)(i);

98.44(b)(1)(iii)). The state/territory must describe its requirements for pre-service or orientation training and ongoing training. These trainings should be part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory. Lead Agencies have flexibility in determining the number of training hours to require, but they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

Pre-Service or Orientation Training Requirements

a) Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:

1. Licensed child care centers:

6

2. Licensed FCC homes:

6

3. In-home care:

3

4. Variations for exempt provider settings:

N/A

b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer)

Orientation training must be completed within three months of employment.

c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served

Orientation covers all age groups and is consistant for all providers.

d) Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered

Orientation is offered in-person and on-line.

e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).

1. Prevention and control of infectious diseases (including immunizations)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090. Child-care center licensure Section 11

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 2

Citation: 922 KAR 2:120. Child-care center health and safety standards Section 2

Citation: 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program Section 7

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:120. Child-care center health and safety standards Section 6

Citation: 922 KAR 2:180 Requirements for registered child care providers Section 2

Citation: 922 KAR 2:100 Certification of family child-care homes Section 14

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 3. Administration of medication, consistent with standards for parental consent

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:120. Child-care center health and safety standards

Citation: 922 KAR 2:180 Requirements for registered child care providers Section 2

Citation: 922 KAR 2:100 Certification of family child-care homes Section 15

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- [ ] Yes

☑ No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 4. Prevention and response to emergencies due to food and allergic reactions

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090.Child-care center licensure

Citaion: 922 KAR 2:100. Certification of family child-care homes

Citation: 922 KAR 2:180 Requirements for registered child care providers Section 2

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes

☑ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes

☑ No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090.Child-care center licensure

Citaion: 922 KAR 2:100. Certification of family child-care homes

Citation: 922 KAR 2:180 Requirements for registered child care providers Section 2

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090. Child-care center licensure Section 11

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 10

Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

Citation: KRS 199.8982 Family child care home certification program Section 2

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to ca for children unsupervised?

- [ ] Yes
- [x] No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowe to care for children unsupervised?

☐ Yes

☑ No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

In the 2011 Regular Session, KRS 199.895 was created to required licensed child-care centers to create and maintain evacuation plans, inclusive of a reunification component and considerations of children with special needs, and share those plans annually with local emergency management personnel and parents. In the 2012 Regular Session, this statute was amended to also apply to certified family child-care homes, providers serving a smaller number of children in the provider's home. Enforcement of the statute began in 2012 following better than a year of collaborative work with the Kentucky Department of Public Health and Division of Emergency Management to include the development of a free, online evacuation plan template and training for child care providers, and enhanced awareness on the part of local emergency management. On September 13, 2012, DCBS formally proposed six administrative regulations to incorporate the evacuation plan requirement within the standards for all child care providers in Kentucky, including registered providers in CCAP (i.e., family, friend, or neighbor providers). The administrative regulations were adopted into law March 8, 2013.

Citation: KRS 199.895 Evacuation plan required for child care centers and family child care homes

In child care, every employee of a licensed, certified, or registered child care provider with care responsibilities is required to have a six-hour orientation training within the first 90 days of employment. An entire section of the training is devoted to emergency procedures. This section was modified in 2010 to address evacuation of children with special needs and emphasize the importance of knowing community emergency response plans.

Child care providers are required to update their evacuation plan annual. Providers are required to share a copy of the plan with local emergency management officials and to guardians of children served as well as provide training to staff each time the plan is updated.

The Child Care Resource and Referral Agencies (represented statewide) are members of Child Care Aware (CAA) and provide ongoing training and technical assistance on emergency preparedness through their websites and other continuing education and professional development opportunities.

The Child Care Health Consultation for Healthy Start in Child Care Program, through the Department for Public Health, provides training and technical assistance to child care providers utilizing the Child Care Emergency / Disaster Preparedness Guide as a basis for "best practice".

Web Link: Child Care Emergency / Disaster Preparedness Guide

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090.Child-care center licensure

Citaion: 922 KAR 2:100. Certification of family child-care homes

Citation: 922 KAR 2:180 Requirements for registered child care providers Section 2

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 9. Appropriate precautions in transporting children (if applicable)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090.Child-care center licensure Section 9

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 17

Citation: 922 KAR 2:120. Child-care center health and safety standards Section 12

Citation: 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program Section 3

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes

☑ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes

☑ No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 10. Pediatric first aid and CPR certification

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090.Child-care center licensure Section 11

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 2

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes

☑ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes

☑ No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 11. Recognition and reporting of child abuse and neglect

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090. Child-care center licensure Section 8

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 15

Citation: 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program Section 2

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Describe if relatives are exempt from this requirement

Relatives are not exampt.

5.2.3e 12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090. Child-care center licensure Section 11

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 10

Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Does the state/territory require that this training topic be completed before

caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 13.

Describe other training requirements, such as nutrition, physical activities, caring for children with special needs, etc..

N/A

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- [ ] Yes
- [x] No

Describe if relatives are exempt from this requirement

N/A

Ongoing Training Requirements

5.2.4 Provide the minimum number of annual training hours on health and safety topics for caregivers, teachers, and directors required for the following.

a) Licensed child care centers:

15

b) Licensed FCC homes:

9

c) In-home care:

3

d) Variations for exempt provider settings:

N/A

5.2.5 Describe the ongoing health and safety training for CCDF providers by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

1. Prevention and control of infectious diseases (including immunizations)

   -- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

   Citation: 922 KAR 2:090. Child-care center licensure Section 11

   Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 10

   Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

- [ ] Annually
- [x] Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours for licensed centers or 9 annual training hours for certified family child care homes. These requirements apply to all caregivers, teachers, and directors.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

- [ ] Annually
- [x] Other

Describe:

For annual renewal, registered child care providers (license-exempt) must maintain three (3) hours of cabinet approved training in early care and education, have 1 ½ hours of training in pediatric abusive head trauma current within five (5) years, and complete three (3) hours of cabinet approved training in one cabinet approved topic as outlined in 922 KAR 2:180 Section 7.

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:120. Child-care center health and safety standards Section 6

Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

Citation: 922 KAR 2:100 Certification of family child-care homes Section 12

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☐ Annually

☑ Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours for licensed centers or 9 annual training hours for certified family child care homes. These requirements apply to all caregivers, teachers, and directors.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

☐ Annually

☑ Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 3 annual training hours.

3. Administration of medication, consistent with standards for parental consent

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:120. Child-care center health and safety standards

Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

Citation: 922 KAR 2:100 Certification of family child-care homes Section 15

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☐ Annually

☑ Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours for licensed centers or 9 annual training hours for certified family child care homes. These requirements apply to all caregivers, teachers, and directors.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

☐ Annually

☑ Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 3 annual training hours.

4. Prevention and response to emergencies due to food and allergic reactions

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090.Child-care center licensure

Citation: 922 KAR 2:100. Certification of family child-care homes

Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☐ Annually

☑ Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours for licensed centers or 9 annual training hours for certified family child care homes. These requirements

apply to all caregivers, teachers, and directors.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

- [ ] Annually
- [x] Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 3 annual training hours.

5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090.Child-care center licensure

Citation: 922 KAR 2:100. Certification of family child-care homes

Citation: 922 KAR 2:180 Requirements for registered child care providers Section 2

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

- [ ] Annually
- [x] Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours for licensed centers or 9 annual training hours for certified family child care homes. These requirements apply to all caregivers, teachers, and directors.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

☐ Annually

☑ Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 3 annual training hours.

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090. Child-care center licensure Section 11

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 10

Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☐ Annually

☑ Other

Describe:

Kentucky requires all staff to complete one and one-half (1 ½) hours of pediatric abusive head trauma (previously called shaken baby syndrome) training completed once every five years.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

☐ Annually

☑ Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 3 annual training hours.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

In the 2011 Regular Session, KRS 199.895 was created to required licensed child-care centers to create and maintain evacuation plans, inclusive of a reunification component and considerations of children with special needs, and share those plans annually with local emergency management personnel and parents. In the 2012 Regular Session, this statute was amended to also apply to certified family child-care homes, providers serving a smaller number of children in the provider's home. Enforcement of the statute began in 2012 following better than a year of collaborative work with the Kentucky Department of Public Health and Division of Emergency Management to include the development of a free, online evacuation plan template and training for child care providers, and enhanced awareness on the part of local emergency management. On September 13, 2012, DCBS formally proposed six administrative regulations to incorporate the evacuation plan requirement within the standards for all child care providers in Kentucky, including registered providers in CCAP (i.e., family, friend, or neighbor providers). The administrative regulations were adopted into law March 8, 2013.

Citation: KRS 199.895 Evacuation plan required for child care centers and family child care homes

In child care, every employee of a licensed, certified, or registered child care provider with care responsibilities is required to have a six-hour orientation training within the first 90 days of employment. An entire section of the training is devoted to emergency procedures. This section was modified in 2010 to address evacuation of children with special needs and emphasize the importance of knowing community emergency response plans.

Child care providers are required to update their evacuation plan annual. Providers are required to share a copy of the plan with local emergency management officials and to guardians of children served as well as provide training to staff each time the

plan is updated.

The Child Care Resource and Referral Agencies (represented statewide) are members of Child Care Aware (CAA) and provide ongoing training and technical assistance on emergency preparedness through their websites and other continuing education and professional development opportunities.

The Child Care Health Consultation for Healthy Start in Child Care Program, through the Department for Public Health, provides training and technical assistance to child care providers utilizing the Child Care Emergency / Disaster Preparedness Guide as a basis for "best practice".

Web Link: Child Care Emergency / Disaster Preparedness Guide

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

- [x] Annually
- [ ] Other

Describe:

This topic is required for all caregivers, teachers, and directors.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

- [x] Annually
- [ ] Other

Describe:

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090. Child-care center licensure Section 11

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 12

Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

- [ ] Annually
- [x] Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours for licensed centers or 9 annual training hours for certified family child care homes. These requirements apply to all caregivers, teachers, and directors.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

- [ ] Annually
- [x] Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 3 annual training hours.

9. Appropriate precautions in transporting children (if applicable)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090.Child-care center licensure Section 9

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 17

Citation: 922 KAR 2:120. Child-care center health and safety standards Section 12

Citation: 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program Section 3

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

- [ ] Annually
- [x] Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours for licensed centers or 9 annual training hours for certified family child care homes. These requirements apply to all caregivers, teachers, and directors.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

- [ ] Annually
- [x] Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 3 annual training hours.

10. Pediatric first aid and CPR certification

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090.Child-care center licensure Section 11

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 2

Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

- [ ] Annually

☑ Other

Describe:

Renewal of pediatric first aid and CPR Certification is completed per national requirements and does not count toward annual training hours for regulatory compliance. CPR training is required of all caregivers, teachers, and directors.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

☐ Annually

☑ Other

Describe:

Renewal of pediatric first aid and CPR Certification is completed per national requirements and does not count toward annual training hours for regulatory compliance.

11. Recognition and reporting of child abuse and neglect

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090. Child-care center licensure Section 8

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 15

Citation: 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program Section 2

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☐ Annually

☑ Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours for licensed centers or 9 annual training hours for certified family child care homes. These requirements apply to all caregivers, teachers, and directors.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

- [ ] Annually
- [x] Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 3 annual training hours.

12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Citation: 922 KAR 2:090. Child-care center licensure Section 11

Citation: 922 KAR 2:100. Certification of Family Child-Care Homes Section 10

Citation: 922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program Section 2

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

- [x] Annually
- [ ] Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours for licensed centers or 9 annual training hours for certified family child care homes. These requirements apply to all caregivers, teachers, and directors.

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

☑ Annually

☐ Other

Describe:

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 3 annual training hours.

13. Describe other requirements such as nutrition, physical activities, caring for children with special needs, etc..

N/A

Provide the citation for other training requirements, including citations for both licensed and license-exempt providers

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☐ Annually

☐ Other

Describe:

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

☐ Annually

☐ Other

Describe:

5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

5.3.1 Enforcement of licensing and health and safety requirements

Lead agencies must certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with all applicable State and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.3.2.

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements

The Office of the Inspector General (OIG) enforces minimum operating standards for child-care centers and homes according to state statutes and regulations. OIG conducts onsite inspections of child-care centers and homes to ensure compliance with state and local health and safety requirements. OIG receives complaints and investigates allegations of non-compliance and take proper action to correct non-compliance.

5.3.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections-with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards-of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)). Certify by responding to the questions below to describe your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire

standards.

a) Licensed CCDF center-based child care

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed child care center providers for compliance with health, safety, and fire standards

In accordance with 922 KAR 2:090, Section 6:

(8) ~~To qualify for a preliminary license~~, or maintain a regular license, a child-care center shall:

(a) Provide written documentation from the local authority showing compliance with local zoning requirements;

(b) Be approved by the Office of the State Fire Marshal or designee;

(c) Have an approved water and sewage system in accordance with local, county, and state laws;

(d) Provide written proof of liability insurance coverage of at least $100,000 per occurrence;

(e) Comply with provisions of this administrative regulation, 922 KAR 2:120, and 922 KAR 2:280;

(f) Cooperate with the cabinet, the cabinet's designee, or another agency with regulatory authority during:

1. An investigation of an alleged complaint, including an allegation of child abuse or neglect pursuant to KRS 620.030(4); and

2. Unannounced inspections; and

(g) Have a director who meets the requirements listed in Section 10 of this administrative regulation.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers

Providers must meet 922 KAR 2:120 governing child-care center health and safety standards, along with state fire marshal and the local zoning laws.

3. Identify the frequency of unannounced inspections:

☐ Once a year

☑ More than once a year

Describe:

Prior to licensure approval, DRCC staff conduct at least one unannounced on-site inspection to determine whether the childcare applicant meets the Kentucky Administrative Regulations 922 KAR 2:090, 922 KAR 2:120, and 922 KAR 2:280; and one follow-up inspection during the preliminary period prior to issuance of a regular license.

DRCC shall receive complaints from the public and other state agencies regarding allegations of noncompliance within the regulatory requirements and investigate within 30 days using a methodology for prioritization of investigation. DRCC shall conduct unannounced on-site visit to investigate allegations of non-compliance and ensure appropriate actions are taken to correct any regulatory deficiencies discovered.

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards.

In accordance with 922 KAR 2:090, Section 6:

(8) To qualify for a preliminary license, or maintain a regular license, a child-care center shall:

(a) Provide written documentation from the local authority showing compliance with local zoning requirements;

(b) ~~Be approved by the Office of the State Fire Marshal or designee;~~

(c) Have an approved water and sewage system in accordance with local, county, and state laws;

(d) Provide written proof of liability insurance coverage of at least $100,000 per occurrence;

(e) ~~Comply with provisions of this administrative regulation, 922 KAR 2:120 (health and safety regulation), and 922 KAR 2:280;~~

(f) Cooperate with the cabinet, the cabinet's designee, or another agency with regulatory authority during:

1. An investigation of an alleged complaint, including an allegation of child abuse or neglect pursuant to KRS 620.030(4); and

2. Unannounced inspections; and
(g) Have a director who meets the requirements listed in Section 10 of this administrative regulation.

Standards of Practice:
The State Fire Marshal Office will inspect the child care center periodically. These inspection reports must be maintained on file at the child care center for review during each licensure inspection.

A post preliminary inspection will be conducted 3 months after issuance of a preliminary license. Once a regular license is issued, an annual inspection will be conducted to assure ongoing compliance.

DRCC shall notify in writing the child-care center if there is a finding of noncompliance with the regulatory requirements. The center has an opportunity to submit plans for correcting cited deficiencies. Notwithstanding any plan of correction or other response submitted by a center, DRCC may initiate adverse action as needed.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers
Providers must meet 922 KAR 2:120 along with state fire marshal and the local zoning laws.

Citation: Standards of Practice for Licensed Child Care Providers Title 65, 80
Citation: Standards of Prectice for Certified Child Care Providers Title 695

b) Licensed CCDF family child care home
1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed family child care providers for compliance with health, safety, and fire standards
Providers must meet 922 KAR 2:100 Sections 2 and 3 along with written documentation from the local authority showing compliance with local zoning requirements.

In accordance with 922 KAR 2:100 Section 3(17):

(a) If a registered provider provides child care in the provider's home, the cabinet or its designee shall complete an initial or an annual home inspection of the registered child care provider in accordance with 42 U.S.C. 9858c(c)(2)(K)(i)(IV) and this administrative regulation.
(b) If the cabinet or its designee finds that the registered provider is noncompliant with Sections 2(4), 5, 6, or 7(2) of this administrative regulation or this section, the registered provider shall submit a written corrective action plan to the cabinet or its designee within ten (10) calendar days from the cabinet's statement of noncompliance.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF family child care providers

An unannounced inspection of the home occurs prior to renewal pursuant to 922 KAR 2:100 certification of family child-care homes regulation.

3. Identify the frequency of unannounced inspections:

- [ ] Once a year
- [x] More than once a year

Describe:

Prior to licensure approval, DRCC staff conduct at least one unannounced on-site inspection to determine whether the childcare applicant meets the Kentucky Administrative Regulations 922 KAR 2:090, 922 KAR 2:120, and 922 KAR 2:280; and one follow-up inspection during the preliminary period prior to issuance of a regular license.

DRCC shall receive complaints from the public and other state agencies regarding allegations of noncompliance within the regulatory requirements and investigate within 30 days using a methodology for prioritization of investigation. DRCC shall conduct unannounced on-site visit to investigate allegations of non-compliance and ensure appropriate actions are taken to correct any regulatory deficiencies discovered.

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the

applicable licensing standards, including health, safety, and fire standards.

In accordance with KAR 2:100:

(3) The cabinet shall: Legislative Research Commission PDF Version Page: 4 (a) Review and process the OIG-DRCC-03 submitted in accordance with subsection (2) of this section; ~~(b) Conduct an unannounced inspection of the home pursuant to KRS 199.8982(1)(b);~~ and (c) Approve the family child-care home within fifteen (15) calendar days of receipt of the OIG-DRCC-03 submitted in accordance with subsection (2) of this section if the requirements in Sections 2, 3, and 10 through 19 of this administrative regulation are met.

DRCC shall ensure that all family child-care homes are licensed every two years.

Prior to certification approval, DRCC staff conduct at least one unannounced onsite inspection to determine whether the childcare applicant meets the Kentucky Administrative Regulations 922 KAR 2:100, 922 KAR 2:280, and one follow-up inspection during the preliminary period prior to issuance of certification.

DRCC shall notify the family child-care home in writing if the home is determined to be noncompliant with regulatory requirements. The home has an opportunity to submit plans for correcting cited deficiencies. Notwithstanding any plan of correction or other response submitted by a home, DRCC may initiate adverse action as needed.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers

Providers must meet 922 KAR 2:100 along with state fire marshall and the local zoning laws.

Standard of Practice:

The cabinet will conduct an unannounced inspection to assure that the minimum requirements are maintained.

Citation: 922 KAR 2:100 Section 11

Citation: Standards of Practice for Certified Providers Title 695

c) Licensed in-home CCDF child care

☑ N/A. In-home CCDF child care (care in the child's own home) is not licensed in the State/Territory. Skip to 5.3.2 (d).

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF in-home child providers

3. Identify the frequency of unannounced inspections:

☐ Once a year

☐ More than once a year

Describe:

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers

d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers

Division of Regulated Child Care

5.3.3 Inspections for license-exempt CCDF providers

Lead Agencies must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety (including, but not limited to, those requirements described in 98.41), and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Lead Agencies have the option to exempt relative providers (as described in section (658P(6)(B))

from this requirement. To certify, respond to the questions below to describe the policies and practices for the annual monitoring of:

a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

Kentucky has no licensed-exempt center-based CCDF providers.

Provide the citation(s) for this policy or procedure

N/A

b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

There are no license-exempt family child care providers in Kentucky.

Provide the citation(s) for this policy or procedure

N/A

c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used

n accordance with 922 KAR 2:180 Section 3(17):

(a)If a registered provider provides child care in the provider's home, the cabinet or its designee shall complete an initial or an annual home inspection of the registered child care provider in accordance with 42 U.S.C. 9858c(c)(2)(K)(i)(IV) and 922 KAR 2:180.

(b) If the cabinet or its designee finds that the registered provider is noncompliant with Sections 2(4), 5, 6, or 7(2) of this administrative regulation or this section, the registered provider shall submit a written corrective action plan to the cabinet or its designee within ten (10) calendar days from the cabinet's statement of noncompliance. (c) A corrective action plan shall include: 1. Specific action undertaken to correct a violation; 2. The date action was or shall be completed; 3. Action utilized to assure ongoing compliance; 4. Supplemental documentation requested as a part of the plan; and 5. Signature of the provider and the date of signature. (d) The cabinet or its designee shall review the plan and notify a registered provider within

Section 3 of the administrative regulation outline health and safety and fire requirements subject to unnannounced inspection.

Provide the citation(s) for this policy or procedure

Citation: 922 KAR 2:180 Requirements for registered child care providers in the Child Care Assistance Program Section 3

d) Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home (98.42(b)(2)(iv)(B)). Does your state use alternate monitoring procedures for monitoring in-home care?

- ☐ No
- ☑ Yes. If yes,

decsibe:

In-home providers are held to the standards outline in 922 KAR 2:180. Providers giving care in the child's home are not subject to inspection. Inspection requirements for care provided in the provider's home are outlined in 922 KAR 2:180 Section 3(17).

e) List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers

OIG-Division of Regulated Child Care

5.3.4 Licensing inspectors.

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the State's licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1-2)).

a) To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care

facilities and providers and that those inspectors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

Division of Regulated Child Care current and new licensing surveyors are required to complete the following online training modules per contract deliverable:

1) Introduction to Licensing and Regulation;

2) Orientation (Health &Safety, Recognizing &Reporting Child Abuse and Neglect and Developmentally appropriate child care practice);

3) Online Orientation through ECOOL for all DRCC Licensing Surveyors; and

4) Licensing and Certification Standards of Practice (SOP).

b) Provide the citation(s) for this policy or procedure

Policy citation is not available. The contract with Office of Inspector General, Division of Regulated Child Care (DRCC) requires DRCC Licensing Surveyors current and new hires complete the Child Care Standards of Practice training within the first 90 days of employment and/or prior to surveying independently and completing surveys or making decisions on surveys. DRCC shall monitor surveyor staff and provide ongoing training to assure consistency of regulation enforcement statewide.

5.3.5 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).

a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

Kentucky's ratio of licensing surveyors to child care facilities is 1:50.

b) Provide the policy citation and state/territory ratio of licensing inspectors

Excerpt from contract with Office of Inspector General, Division of Regulated Child care

requirements for Staffing and Professional Development:

DRCC shall monitor monthly to assure its ratio of dedicated child-care licensing surveyor positions is one surveyor for each 50 child-care centers and family child-care homes, including two surveyors to conduct registered provider home visits to the extent that funding is available.

DRCC shall ensure that all newly hired surveyors complete the Child Care Standards of Practice training within the first 90 days of employment and/or prior to surveying independently and completing surveys or making decisions on surveys.

DRCC shall monitor surveyor staff and provide ongoing training to assure consistency of regulation enforcement statewide.

DRCC shall ensure that all staff are meeting contractual timeframes as listed within each deliverable, including professional, clerical, and administrative duties necessary for the licensure, certification and registration.

5.3.6 States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from inspection requirements. Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from the inspection requirements listed in 5.3.3?

☑ Yes, relatives are exempt from all inspection requirements.

If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care.

A family determined eligible for the Child Care Assistance Program (CCAP) may choose a private individual, such as a relative or neighbor, to care for their children. In order to be paid CCAP funds for providing child care services, these individuals must meet minimum health, safety, and training requirements and be registered with the state. If a family chooses a relative to care for their child, the relative is exempt from inspection as long as the provider is only providing care for related children. A relative provider is required to meet all other

regulatory requirements and submit to background checks in accordance with 922 KAR 2:280.

Citation: 922 KAR 2:180 Requirements for registered child care providers in the Child Care Assistance Program

☐ Yes, relatives are exempt from some inspection requirements.
If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.

☐ No, relatives are not exempt from inspection requirements.

5.4 Criminal Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct criminal background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For FCC homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)).

A criminal background check must include 8 specific components (98.43(2)(b)), which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks

Components	In-State	National	Inter-State
1. Criminal registry or repository using fingerprints in the current state of residency	x		
2. Sex offender registry or repository check in the current state of residency	x		
3. Child abuse and neglect registry and database check in the	x		

current state of residency			
4. FBI fingerprint check		x	
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)		x	
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional			x
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years			x
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years			x

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check require+J514ments, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met by responding to questions 5.4.1 through 5.4.4 and then apply for the time-limited waiver by completing the questions in Appendix A: Background Check Waiver Request Form. By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 98.43 and 98.16(o):

--The national FBI fingerprint check; and,	
--The three in-state background check provisions for the current state of residency:	
	--state criminal registry or repository using fingerprints;
	--state sex offender registry or repository check;
	--state-based child abuse and neglect registry and database.

All four components are required in order for the milestone to be considered met.

Components	New (Prospective) Staff	Existing Staff
1. Criminal registry or repository using fingerprints in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
2. Sex offender registry or repository check in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
3. Child abuse and neglect registry and database check in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
4. FBI fingerprint check	Milestone/Prerequisite	Possible Time Limited

	for Waiver	Waiver for current (existing) staff
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	

Use the questions below to describe the status of the requirements, policies and procedures for background check requirements. These descriptions must provide sufficient information to demonstrate how the milestone prerequisites are being met and the status of the other components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form, for components not included in the milestones. Approval of these waiver requests will be subject to verification that the milestone components have been met as part of the CCDF Plan review and approval process.

In-state Background Check Requirements

5.4.1 In-State Criminal Registry or Repository Checks with Fingerprints Requirements (98.43(b)(3)(i)).

Note: A search of a general public facing judicial website does not satisfy this requirement. This check is required in addition to the national FBI criminal history check (5.4.4 below) to mitigate any gaps that may exist between the two sources.

a) Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

922 KAR 2:280 requires child care staff members (current employees as well as new hires) to submit to the National Background Check Program (NBCP) by September 30, 2018. The NBCP utilizes fingerprint-based background checks in the state repository as well as the federal repository

922 KAR 2:280 establishes background check requirements for all child care staff members, reporting requirements, and appeals. Child care providers will be required to submit anyone meeting the federal definition of "child care staff member" to background checks in accordance with this administrative regulation. Federal law and related federal waiver mandate the background checks be performed on new hires beginning April 1, 2018, with existing child care staff members submitting to the new requirements no later than September 30, 2018.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Registered providers are licensed-exempt in Kentucky but eligible for CCDF funding. 922 KAR 2:280 requires that registered providers participate in the NBCP.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

b) Has the search of the in-state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

☐ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☑ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care. Key challenges to implementation will be the designated fingerprint scan locations sites being able to accommodate an increase in volume. Another challenge will be law enforcement's ability to accommodate an increase in volume. The Office of Inspector General provided support and training to fingerprint scan location sites to assist the increase in volume. The Division of Service Regions also supported the NBCP roll-out by prioritizing this initiative and making a schedule which would accommodate more people.

As of August 17, 2018, approximately 230 providers have not initiated any background checks via NBCP. 922 KAR 2:280 requires that all existing providers be fingerprinted by September 30, 2018. Any providers who have not complied will be cited as of October 1, 2018.

5.4.2 In-State Sex Offender Registry Requirements (98.43(b)(3)(B)(ii)).

Note: This check must be completed in addition to the national NCIC sex offender registry check (5.4.5 below) to mitigate any gaps that may exist between the two sources. Use of fingerprints is optional to conduct this check.

a) Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state sex offender registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Providers must search the Kentucky State Police Sex Offender Registry public site prior to submitting an application using the link provided in the NBCP system. The system will not allow the application to continue until the search has been completed. Once this is completed, the application can be submitted for fingerprinting. This initial step saves the cost of fingerprinting if a disqualifying offense is identified from the registry.

The National Background Check Program (NBCP) will not allow providers to move through the system without completing a search of the public websites. This is required of all licensed, regulated, and registered providers.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

Clarification of exempt providers per KRS 199.896 subsection (19):
"Child-care centers that provide instructional and educational programs for preschool-aged children that operate for a maximum of twenty (20) hours per week and which a child attends for no more than fifteen (15) hours per week shall:
(a) Notify the cabinet in writing that the center is operating;
(b) **Meet all child-care center licensure requirements and administrative regulations related to employee background checks;**
(c) Meet all child-care center licensure requirements and administrative regulations

related to tuberculosis screenings; and

(d) **Be exempt from all other child-care center licensure requirements and administrative regulations."**

And subsection (20):

"Child-care centers that provide instructional and educational programs for preschool-aged children that operate for a maximum of twenty (20) hours per week and which a child attends for no more than ten (10) hours per week **shall be exempt from all child-care licensure requirements and administrative regulations."**

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Registered providers are licensed-exempt in Kentucky but eligible for CCDF funding. 922 KAR 2:280 requires that registered providers participate in the NBCP.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

b) Has the search of the in-state sex offender registry been conducted for all current (existing) child care staff?

☐ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☑ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

A schedule for all providers was developed to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule was shared with all providers, professional development and training coaches, and the Division of Regulated Child Care. It is also included in the regulation 922 KAR 2:280. Kentucky does not exempt any licensed or registered providers receiving CCDF from compliance with the NBCP fingerprinting requirements.

Key challenges to implementation will be the designated fingerprint scan locations sites being able to accommodate an increase in volume. Another challenge will be law enforcement's ability to accommodate an increase in volume. The Office of Inspector General provided support and training to fingerprint scan location sites to assist the increase in volume. The Division of Service Regions also supported the NBCP roll-out by prioritizing this initiative and making a schedule which would accommodate more people.

922 KAR 2:280 requires that all existing providers be fingerprinted by September 30, 2018. Any providers who have not complied will be cited as of October 1, 2018.

5.4.3 In-State Child Abuse and Neglect Registry Requirements (98.43(b)(3)(B)(iii)).

Note: This is a name-based search.

a) Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state child abuse and neglect registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

All licensed providers, per regulatory compliance, shall have a state child abuse and neglect check completed as part of the fingerprint comprehensive background check

processes..922 KAR 2:280 requires child care staff members (current employees as well as new hires) to submit to the National Background Check Program (NBCP) by September 30, 2018. The NBCP contains an auto-match feature of the state's child abuse/neglect registry.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations
922 KAR 2:280 applies to a child care staff member age 18 or older, including 1.) An owner, operator, or employee of a child care provider, 2.) A child-care center licensee or director, 3.) An adult household member of a Type II child-care center, family child-care home, or provider registered in accordance with 922 KAR 2:180, 4.) An employee who is present during the time a child is receiving care, 5.) Any person with supervisory or disciplinary control over a child in care; o6.) Any person having unsupervised contact with a child in care.

Kentucky does not exempt any licensed or registered providers receiving CCDF from compliance with NBCP fingerprinting requirements.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

Clarification of exempt providers per KRS 199.896 subsection (19) "Child-care centers that provide instructional and educational programs for preschool-aged children that operate for a maximum of twenty (20) hours per week and which a child attends for no more than fifteen (15) hours per week shall:
(a) Notify the cabinet in writing that the center is operating;
(b) **Meet all child-care center licensure requirements and administrative regulations related to employee background checks;**
(c) Meet all child-care center licensure requirements and administrative regulations related to tuberculosis screenings; and
(d) **Be exempt from all other child-care center licensure requirements and**

administrative regulations."

And subsection (20) "Child-care centers that provide instructional and educational programs for preschool-aged children that operate for a maximum of twenty (20) hours per week and which a child attends for no more than ten (10) hours per week **shall be exempt from all child-care licensure requirements and administrative regulations."**

b) Has the search of the in-state child abuse and neglect registry been conducted for all current (existing) child care staff?

☐ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☑ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state child abuse and neglect registry for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care.

Key challenges to implementation will be the designated fingerprint scan locations sites being able to accommodate an increase in volume. Another challenge will be law enforcement's ability to accommodate an increase in volume. The Office of Inspector General provided support and training to fingerprint scan location sites to assist the increase in volume. The Division of Service Regions also supported the NBCP roll-out by

prioritizing this initiative and making a schedule which would accommodate more people.

All existing staff had a CA/N check complete upon hire date. However, the old administrative regulation did not require licensed providers to complete these on an annual basis. The only CA/N check was the one at hire date. So, if a person was hired 6 years ago, no new CA/N check was completed. The NBCP remedies this issue as each existing staff member will have a new CA/N check completed prior to submitting for fingerprints. The Rap-Back feature also periodically checks the Child Abuse/Neglect Registry for new findings.

922 KAR 2:280 requires that all existing providers be fingerprinted by September 30, 2018. Any providers who have not complied will be cited as of October 1, 2018.

National Background Check Requirements

5.4.4 National FBI Criminal Fingerprint Search Requirements (98.43(b)(1)).

Note: The in-state (5.4.1 above) and the inter-state (5.4.6 below) criminal history check must be completed in addition to the FBI fingerprint check because there could be state crimes that do not appear in the national repository. Also note, that an FBI fingerprint check satisfies the requirement to perform an interstate check of another State's criminal history records repository if the responding state (where the child care staff member has resided within the past five years) participates in the National Fingerprint File program (CCDF-ACF-PIQ-2017-01).

a) Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies and procedures for the search of the National FBI fingerprint check.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

922 KAR 2:280 requires child care staff members (current employees as well as new hires) to submit to the National Background Check Program (NBCP) by September 30,

2018. Once the applicant's or staff member's information is entered into the NBCP, and the state's sex offender and child abuse/neglect registries have been cleared, paperwork is generated for the applicant to take to one of the 80 "live scan" locations across the state. Staff verify the identity of the individual using driver's license or other approved photo identification and ensure it matches the preprinted paperwork. Fingerprints are submitted through the Kentucky State Police to the FBI using Next Generation Identification.

922 KAR 2:280 applies to a child care staff member age 18 or older, including 1.) An owner, operator, or employee of a child care provider, 2.) A child-care center licensee or director, 3.) An adult household member of a Type II child-care center, family child-care home, or provider registered in accordance with 922 KAR 2:180, 4.) An employee who is present during the time a child is receiving care, 5.) Any person with supervisory or disciplinary control over a child in care; o6.) Any person having unsupervised contact with a child in care.

Kentucky does not exempt any licensed or registered providers receiving CCDF from compliance with NBCP fingerprinting requirements.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations
Registered providers are licensed-exempt in Kentucky but eligible for CCDF funding. 922 KAR 2:280 requires that registered providers participate in the NBCP.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

KAR 922 2:280 reads:

Section 4. Procedures and Payments. (1) To initiate the process for obtaining background checks on a prospective child care staff member, the child care provider

shall:

(a) Request that the prospective child care staff member provide a copy of his or her driver's license or other government-issued photo identification and verify that the photograph clearly matches the prospective child care staff member;

(b) Request that the prospective child care staff member complete and sign the:

1. DCC-500, Applicant Child Care Staff Member Waiver Agreement and Statement; and

2. DCC-501, Disclosures to Be Provided to and Signed by the Applicant Child Care Staff Member; and

(c) Log on to the NBCP portal and enter the prospective child care staff member's demographic information for a check of the:

1. Child abuse and neglect central registry pursuant to 922 KAR 1:470;

2. National Crime Information Center's National Sex Offender Registry in accordance with 34 U.S.C. 20921; and

3. Sex Offender Registry established in accordance with KRS 17.500 through 17.580.

(2)(a) In accordance with KRS 199.8965(8), 336.220, and 45 C.F.R. 98.43(f), a child care provider shall submit payment via credit or debit card for a state and national fingerprint-supported criminal history background check performed by the Department of Kentucky State Police (KSP) and the Federal Bureau of Investigation (FBI), including the rap back system. If a child care staff member's rap back has not expired, a new fingerprint check shall not be need-ed.

b) For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?

☐ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☑ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care.

Key challenges to implementation will be the designated fingerprint scan locations sites being able to accommodate an increase in volume. Another challenge will be law enforcement's ability to accommodate an increase in volume. The Office of Inspector General provided support and training to fingerprint scan location sites to assist the increase in volume. The Division of Service Regions also supported the NBCP roll-out by prioritizing this initiative and making a schedule which would accommodate more people.

922 KAR 2:280 requires that all existing providers be fingerprinted by September 30, 2018. Any providers who have not complied will be cited as of October 1, 2018.

National Background Check Requirements

5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).

Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the in-state (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

a) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff

☑ Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care. The Kentucky State Police has confirmed that the NCIC/NSOR search is part of the background checks they complete.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Registered providers are licensed-exempt in Kentucky but eligible for CCDF funding. 922 KAR 2:280 requires that registered providers participate in the NBCP.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

KAR 922 2:280 reads:

Section 4. Procedures and Payments. (1) To initiate the process for obtaining background checks on a prospective child care staff member, the child care provider shall:

(a) Request that the prospective child care staff member provide a copy of his or her driver's license or other government-issued photo identification and verify that the photograph clearly matches the prospective child care staff member;

(b) Request that the prospective child care staff member complete and sign the:

1. DCC-500, Applicant Child Care Staff Member Waiver Agreement and Statement; and

2. DCC-501, Disclosures to Be Provided to and Signed by the Applicant Child Care Staff Member; and

(c) Log on to the NBCP portal and enter the prospective child care staff member's

demo-graphic information for a check of the:

1. Child abuse and neglect central registry pursuant to 922 KAR 1:470;

2. National Crime Information Center's National Sex Offender Registry in accordance with 34 U.S.C. 20921; and

3. Sex Offender Registry established in accordance with KRS 17.500 through 17.580.

(2)(a) In accordance with KRS 199.8965(8), 336.220, and 45 C.F.R. 98.43(f), a child care provider shall submit payment via credit or debit card for a state and national fingerprint- supported criminal history background check performed by the Department of Kentucky State Police (KSP) and the Federal Bureau of Investigation (FBI), including the rap back system. If a child care staff member's rap back has not expired, a new fingerprint check shall not be need-ed.

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?

☐ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☑ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other

programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care.

Registered providers held to the same standards as licensed providers in regards to the National Background Check requirements per 922 KAR 2:280.

922 KAR 2:280 requires that all existing providers be fingerprinted by September 30, 2018. Any providers who have not complied will be cited as of October 1, 2018

Inter-state Background Check Requirements

Checking a potential employee's history in any state other than that in which the provider's services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43(b)(3). For example, an inter-state check would include situations when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resides and each state where the staff member resided during the previous 5 years. Background checks in the state where the staff member is employed may be advisable, but are not strictly required.

5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check (5.4.4 above) to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

a) Has the interstate criminal registry or repository check been put in place for all new (prospective) child care staff?

☑ Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care.

The Division of Child Care's website provides a link to a map indicating which states participate in the National Fingerprint File (NFF). Providers have been informed if the state participates in the NFF then they do not have to request an interstate criminal history. However, if the state does not participate in the NFF then providers must request an interstate criminal check. A document has been linked to the Division of Child Care's website with contact information for each state (criminal backgound agency, child abuse and neglect registry).

The biggest challenge is getting a response. The onus is placed on the providers to request the information and report the findings to DCC. The Office of Inspector General, Division of Regulated Child Care is currently reviewing files while completing their site visits to ensure compliance. Providers are also expected to upload any documentation they receive into the NBCP system. Another challenge exists for the staff members who receive an auto-determination for the in-state process. If the person has no criminal history and no auto-matches on the child abuse and neglect registry, DCC staff member never review the file.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 5

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible

providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Registered providers are licensed-exempt in Kentucky but eligible for CCDF funding. 922 KAR 2:280 requires that registered providers participate in the NBCP.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

KAR 922 2:280 reads:

Section 4. Procedures and Payments. (1) To initiate the process for obtaining background checks on a prospective child care staff member, the child care provider shall:
(a) Request that the prospective child care staff member provide a copy of his or her driver's license or other government-issued photo identification and verify that the photograph clearly matches the prospective child care staff member;
(b) Request that the prospective child care staff member complete and sign the:
1. DCC-500, Applicant Child Care Staff Member Waiver Agreement and Statement; and
2. DCC-501, Disclosures to Be Provided to and Signed by the Applicant Child Care Staff Member; and
(c) Log on to the NBCP portal and enter the prospective child care staff member's demo-graphic information for a check of the:
1. Child abuse and neglect central registry pursuant to 922 KAR 1:470;
2. National Crime Information Center's National Sex Offender Registry in accordance with 34 U.S.C. 20921; and
3. Sex Offender Registry established in accordance with KRS 17.500 through 17.580.
(2)(a) In accordance with KRS 199.8965(8), 336.220, and 45 C.F.R. 98.43(f), a child care provider shall submit payment via credit or debit card for a state and national fingerprint- supported criminal history background check performed by the Department of Kentucky State Police (KSP) and the Federal Bureau of Investigation (FBI), including the rap back system. If a child care staff member's rap back has not expired, a new fingerprint check shall not be need-ed.

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the interstate criminal registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

b) Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?

☐ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☑ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate criminal registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care.

Key challenges to implementation will be the designated fingerprint scan locations sites being able to accommodate an increase in volume. Another challenge will be law

enforcement's ability to accommodate an increase in volume. The Office of Inspector General provided support and training to fingerprint scan location sites to assist the increase in volume. The Division of Service Regions also supported the NBCP roll-out by prioritizing this initiative and making a schedule which would accommodate more people.

922 KAR 2:280 requires that all existing providers be fingerprinted by September 30, 2018. Any providers who have not complied will be cited as of October 1, 2018.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 5

5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

a) Has the interstate sex offender registry or repository check been put in place for all new (prospective) child care staff?

☑ Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care.

The Division of Child Care's website provides a link to a map indicating which states participate in the National Fingerprint File (NFF). Providers have been informed if the

state participates in the NFF then they do not have to request an interstate criminal history. However, if the state does not participate in the NFF then providers must request an interstate criminal check. A document has been linked to the Division of Child Care's website with contact information for each state (criminal backgound agency, child abuse and neglect registry).

The biggest challenge is getting a response. The onus is placed on the providers to request the information and report the findings to DCC. The Office of Inspector General, Division of Regulated Child Care is currently reviewing files while completing their site visits to ensure compliance. Providers are also expected to upload any documentation they receive into the NBCP system. Another challenge exists for the staff members who receive an auto-determination for the in-state process. If the person has no criminal history and no auto-matches on the child abuse and neglect registry, DCC staff member never review the file.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 5

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Registered providers are licensed-exempt in Kentucky but eligible for CCDF funding. 922 KAR 2:280 requires that registered providers participate in the NBCP.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

KAR 922 2:280 reads:

Section 4. Procedures and Payments. (1) To initiate the process for obtaining background checks on a prospective child care staff member, the child care provider shall:
(a) Request that the prospective child care staff member provide a copy of his or her driver's license or other government-issued photo identification and verify that the

photograph clearly matches the prospective child care staff member;

(b) Request that the prospective child care staff member complete and sign the:

1. DCC-500, Applicant Child Care Staff Member Waiver Agreement and Statement; and

2. DCC-501, Disclosures to Be Provided to and Signed by the Applicant Child Care Staff Member; and

(c) Log on to the NBCP portal and enter the prospective child care staff member's demo-graphic information for a check of the:

1. Child abuse and neglect central registry pursuant to 922 KAR 1:470;

2. National Crime Information Center's National Sex Offender Registry in accordance with 34 U.S.C. 20921; and

3. Sex Offender Registry established in accordance with KRS 17.500 through 17.580.

(2)(a) In accordance with KRS 199.8965(8), 336.220, and 45 C.F.R. 98.43(f), a child care provider shall submit payment via credit or debit card for a state and national fingerprint- supported criminal history background check performed by the Department of Kentucky State Police (KSP) and the Federal Bureau of Investigation (FBI), including the rap back system. If a child care staff member's rap back has not expired, a new fingerprint check shall not be need-ed.

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care. The Kentucky State Police has confirmed that the NCIC/NSOR search is part of the background checks they complete.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 5

922 KAR 2:280 requires that all existing providers be fingerprinted by September 30, 2018. Any providers who have not complied will be cited as of October 1, 2018.

b) Has the interstate sex offender registry or repository check been put in place for all current (existing) child care staff?

☐ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☑ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care.

Registered providers are held to the same standards as licensed providers in regards to the National Background Check requirements per 922 KAR 2:280.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 5

922 KAR 2:280 requires that all existing providers be fingerprinted by September 30, 2018. Any providers who have not complied will be cited as of October 1, 2018.

5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).

Note: This is a name-based search.

a) Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

☑ Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care.

The Division of Child Care's website provides a link to a map indicating which states participate in the National Fingerprint File (NFF). Providers have been informed if the state participates in the NFF then they do not have to request an interstate criminal history. However, if the state does not participate in the NFF then providers must request an interstate criminal check. A document has been linked to the Division of Child Care's website with contact information for each state (criminal backgound agency, child abuse and neglect registry).

The biggest challenge is getting a response. The onus is placed on the providers to request the information and report the findings to DCC. The Office of Inspector General, Division of Regulated Child Care is currently reviewing files while completing their site visits to ensure compliance. Providers are also expected to upload any documentation they receive into the NBCP system. Another challenge exists for the staff members who receive an auto-determination for the in-state process. If the

person has no criminal history and no auto-matches on the child abuse and neglect registry, DCC staff member never review the file.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 5

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Registered providers are licensed-exempt in Kentucky but eligible for CCDF funding. 922 KAR 2:280 requires that registered providers participate in the NBCP.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 3

KAR 922 2:280 reads:

Section 4. Procedures and Payments. (1) To initiate the process for obtaining background checks on a prospective child care staff member, the child care provider shall:
(a) Request that the prospective child care staff member provide a copy of his or her driver's license or other government-issued photo identification and verify that the photograph clearly matches the prospective child care staff member;
(b) Request that the prospective child care staff member complete and sign the:
1. DCC-500, Applicant Child Care Staff Member Waiver Agreement and Statement; and
2. DCC-501, Disclosures to Be Provided to and Signed by the Applicant Child Care Staff Member; and
(c) Log on to the NBCP portal and enter the prospective child care staff member's demo-graphic information for a check of the:
1. Child abuse and neglect central registry pursuant to 922 KAR 1:470;
2. National Crime Information Center's National Sex Offender Registry in accordance with 34 U.S.C. 20921; and
3. Sex Offender Registry established in accordance with KRS 17.500 through 17.580.

(2)(a) In accordance with KRS 199.8965(8), 336.220, and 45 C.F.R. 98.43(f), a child care provider shall submit payment via credit or debit card for a state and national fingerprint- supported criminal history background check performed by the Department of Kentucky State Police (KSP) and the Federal Bureau of Investigation (FBI), including the rap back system. If a child care staff member's rap back has not expired, a new fingerprint check shall not be need-ed.

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care.

One key challenge with this requirement is the responsiveness of other states. The onus is placed on providers to ensure this step is completed and DCC notified.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 5

922 KAR 2:280 requires that all existing providers be fingerprinted by September 30, 2018. Any providers who have not complied will be cited as of October 1, 2018.

b) Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

☐ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☑ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care.

Key challenges to implementation will be the designated fingerprint scan locations sites being able to accommodate an increase in volume. Another challenge will be law enforcement's ability to accommodate an increase in volume. The Office of Inspector General provided support and training to fingerprint scan location sites to assist the increase in volume. The Division of Service Regions also supported the NBCP roll-out by prioritizing this initiative and making a schedule which would accommodate more people.

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 5

922 KAR 2:280 requires that all existing providers be fingerprinted by September 30, 2018. Any providers who have not complied will be cited as of October 1, 2018.

Provisional Employment

The CCDF final rule states a child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2). A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF final rule, OCC will allow states and territories to request time-limited waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

1. the state requires the provider to submit the background check requests before the staff person begins working; and
2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below. (Waiver request allowed. See Appendix A). Check all that apply.

☐ The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides.

Describe and include a citation:

☑ The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but before receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A).

Describe and include a citation:

A prospective staff member shall not be left unsupervised with a child in care pending the completion of the background checks in accordance with this administrative regulation; and be dismissed or relocated from the residence if the person is found to have a disqualifying background check result.

To assure timely processing of background checks and organize background checks of existing child care staff members, the cabinet shall prioritize the processing of background checks for an individual who is a: (a) New hire on or after April 1, 2018; or (b) Child care staff member before April 1, 2018, using the following schedule:

Citation: 922 KAR 2:280 Background checks for child care staff members, reporting requirements, and appeals Section 5
Citation: KRS 199.8965 Child care worked must submit to background checks

KAR 922 2:280 reads:

(2) (b) The child care staff member shall:
1. Have no more than ninety (90) calendar days from the date of payment pursuant to sub-sections (2) and (3) of this section to submit the child care staff member's fingerprints at an authorized collection site for NBCP; and
2. Present the DCC-504 and driver's license or other government-issued photo identification to the designated agent at an authorized collection site prior to fingerprint submission.

☐ Other.

Describe:

5.4.10 The state/territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The state/territory shall provide the results of the background check in a statement that

indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the state/territory will provide information about each disqualifying crime to the staff member.

Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)).

The Division of Child Care Core Services Section will respond to any written requests for searches of Kentucky's child abuse/neglect registry and the State Sex Offender Registry.

Requests for a search of the State's criminal repository will be directed to Administrative Office of the Courts.

Citation: 922 KAR 1:470 Central Registry Section 3

5.4.11 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry. Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or - subject to an individual review (at the state/territory's option)- a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes - child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)).

Note: The Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable

information (98.43(e)(2)(iii)).

Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(c)(i)?

- [ ] No
- [x] Yes.

Describe other disqualifying crimes and provide citation:

922 KAR 2:280 Section 6 outlines all disqualifying offenses:

1. Meets a criterion specified in 45 C.F.R. 98.43(c);

2. Has been convicted of, or has entered an Alford plea, a plea of guilty, or a plea of nolo contendere to, a:

a. Drug-related felony, and five (5) years has not elapsed since the person was fully discharged from imprisonment, probation, or parole;

b. Sex or violent crime pursuant to KRS 17.165; or

c. A felony offense under:

(i) KRS Chapter 506, inchoate offenses;

(ii) KRS Chapter 511, burglary and related offenses;

(iii) KRS Chapter 515, robbery;

(iv) KRS Chapter 520, escape and other offense related to custody;

(v) KRS Chapter 525, riot, disorderly conduct, and related offenses;

(vi) KRS Chapter 527, offense relating to firearms and weapons;

(vii) KRS Chapter 529, prostitution offenses; or

(viii) KRS Chapter 530, family offenses;

3. Is listed on the:

a. Central registry established in accordance with 922 KAR 1:470; or

b. Another state's state-based child abuse and neglect registry or database;

4. Has been convicted of, or has entered an Alford plea, plea of guilty, or a plea of nolo contendere to, an offense under a criminal statute of the United States or of another state similar to an offense specified in this paragraph;

5. Has an open warrant;

6. Has a criminal background check result indicating that the individual should be approached with caution by authorities;

Citation: 922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals Section 6

5.4.12 The state/territory has a process for a child care staff member to appeal the the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3).

Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2-4)).

922 KAR 2:280 Section 7 Notice of a Disqualifying Background Check Result and Appeals.

Pursuant to 45 C.F.R. 98.43(e)(3), a prospective or current child care staff member who receives notice of having a disqualifying background check result in accordance with Section 6 of this administrative regulation may:
(a) Challenge the accuracy of the cabinet's determination by submitting a written request for informal review, including any information the individual wishes to be considered, to the Department for Community Based Services, Division of Child Care, 275 East Main Street, 3C-F, Frankfort, Kentucky 40621, within ten (10) calendar days of the date of notice in accordance with subsection (1) of this section; or
(b) Request a rehabilitative review pursuant to Section 9 of this administrative regulation.
(4) Upon completion of an informal review upon request pursuant to subsection (3)(a) of this section, the cabinet shall provide written notice of the cabinet's decision to uphold or rescind the notice of disqualifying background check result to the prospective or current child care staff member.
(5) A prospective or current child care staff member may appeal the results of an informal review or a rehabilitative review pursuant to Section 9 of this administrative regulation and 45 C.F.R. 98.43(e)(3), in accordance with 922 KAR 2:260.
(6) If a prospective or current child care staff member wishes to challenge the accuracy of a criminal background check, the cabinet shall refer the individual to the appropriate state or federal law enforcement agency.

(7) If a prospective or current child care staff member challenges the finding that he or she is the true subject of the results from a registry or repository check, the cabinet shall refer the individual to the agency responsible for maintaining the registry or repository.

5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)).

Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. Lead Agencies can report that no fees are charged if applicable (98.43(f)).
922 KAR 2:280 Background checks for child care staff members

Section 4. Procedures and Payments

In accordance with KRS 199.8965(8), 336.220, and 45 C.F.R. 98.43(f), a child care provider shall submit payment via credit or debit card for a state and national fingerprint-supported criminal history background check performed by the Department of Kentucky State Police (KSP) and the Federal Bureau of Investigation (FBI), including the rap back system. If a child care staff member's rap back has not expired, a new fingerprint check shall not be needed.

(b) A child care provider enrolled in the Kentucky NBCP shall pay a fee not to exceed twenty-five (25) dollars in addition to any fees charged in accordance with paragraph (a) of this subsection for the actual cost of processing a fingerprint-supported state and national criminal background check and for providing rap back services.

(3) To the extent funds are available, the:
(a) Race to the Top-Early Learning Challenge Grant in accordance with Pub. L. 112-10 shall cover the cost of background checks performed in accordance with subsection (1) of this section until close of the grant or exhaustion of grant funds, whichever occurs first; or

(b) Cabinet shall absorb, in whole or in part, fees using funding in accordance with 42 U.S.C. 9857-9858q.

(4)(a) Upon submission of payment in accordance with subsections (2) and (3) of this section, the child care provider shall print a copy of the DCC-504, Applicant Child Care Staff Member Live Scan Fingerprinting Form, from the NBCP portal and provide the form to the child care staff member.

KRS 199.8965 Child care staff must submit to background checks

(6) The request for background checks shall be in a manner approved by the Justice and Public Safety Cabinet, and the cabinet may charge a fee to be paid by a child care staff member for the actual cost of processing the request.

(7) Any fee charged by the Department of Kentucky State Police or the Federal Bureau of Investigation shall be an amount no greater than the actual cost of processing the request and conducting the criminal background check and rap back system ongoing status notification.

5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider.

Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

- [x] No, relatives are not exempt from background check requirements.
- [ ] Yes, relatives are exempt from all background check requirements.
- [ ] Yes, relatives are exempt from some background check requirements. If the state/territory exempts relatives from some background check requirements,

describe which background check requirements do not apply to relative providers.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

6.1 Professional Development Framework

6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.

a) Describe how the state/territory's framework for training and professional development addresses the following required elements:

-- State/territory professional standards and competencies. Describe:

The Kentucky Early Childhood (EC) Core Content is defined as the specific knowledge, competencies, and characteristics needed by early childhood practitioners to work effectively with young children and families. EC Core Content is the foundation for determining training content, college coursework content, and competency standards for professional performance. The EC Core Content includes seven essential competency subject areas of early childhood education that are organized into five levels of increasing mastery. Individuals planning early childhood education and training programs can use the EC Core Content to correlate program content with the expected skill levels and desired competency outcomes of the participants.

Web Link: Kentucky Professional Development Framework

-- Career pathways. Describe:

The Kentucky Professional Development (PD) Framework includes a mechanism for linking various EC training and education programs, allows for multiple pathways for entering EC education, and promotes and supports continuous professional development. The EC core competencies are organized from basic to high-level skills across five levels that build on each other with increasing knowledge and skills attained at each level.

-- Advisory structure. Describe:

The Governor's Office of Early Childhood Professional Development Sub-Committee is charged with formulating and submitting recommendations to the Early Childhood Advisory Council (ECAC) for professional development to support and promote quality standards, while responding to federal and state mandates and increasing capacity through workforce development. This Committee includes representation from the DCC, the state's professional ECE registry, the Child Care Resource and Referral Network, and other system-level partners that represent early childhood projects and initiatives.

-- Articulation. Describe:

The PD Framework includes a process which blends the system for credentialing and

training of early childhood professionals. It includes five levels of competency, each of which articulate into the next level. At lower levels of competency, the completion of a particular credential, program, or certificate can be transferred into college credit between secondary schools, community and technical colleges, training programs, and four-year institution Interdisciplinary Early Childhood Education programs of study.

-- Workforce information. Describe:

The Child Care Resource and Referral Network conducts a workforce study that collects and analyzes child care provider educational preparation, experience, professional development, wages, benefits, and retention efforts. Findings are used to inform policy and promote quality improvement.

-- Financing. Describe:

Based on annual availability of funds, early childhood development scholarships, incentives, and related expense reimbursement is available to support programs seeking accreditation (e.g., NAEYC, NAFCC, and COA) and individual providers pursuing credentials and degrees.

b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

☑ Continuing education unit trainings and credit-bearing professional development to the extent practicable

Describe:

Kentucky's ECE credentialed trainers design and deliver state-approved high quality professional development that results in the transfer of knowledge to promote quality and support better outcomes for children and families. Professional development activities delivered by non-credentialed trainers are submitted to DCC for review and approval. The Early Care and Education Training Records Information System (ECE-TRIS) provides a centralized database to track and store individual training records for early care and education professionals. ECE-TRIS is free to providers and supports DCC in meeting regulatory requirements and managing professional development data. (http-//tris.eku.edu/ece).

☑ Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework

Describe:

Higher education representatives participate in the Governor's Office of Early Childhood Professional Development Sub-Committee to formulate and submit recommendations to the Early Childhood Advisory Council (ECAC) for professional development. The Child Care Resource and Referral Network collaborates with higher education to support providers participating in early care and education programs of study.

☐ Other

Describe:

6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.

The Kentucky Early Childhood Professional Development (PD) Framework has been endorsed by the ECAC, which is the state authority charged with coordination and collaboration of a high-quality system of early care and education.

6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).

Kentucky's Quality Rating Improvement System (Kentucky All-STARS) promotes standards of quality that include employment benefits (e.g., paid annual leave, health insurance, retirement, etc.) as a best administrative and leadership practice. Providers are also encouraged to pursue professional development opportunities that promotes personal growth and supports the delivery of high quality child care. Based on annual available funding, finanicial incentives and scholarships are awarded to individuals pursuing credentials and degrees through college and non-college programs of study.

The Division of Child Care and the Child Care Resource and Referral Network collaborates with the Kentucky Department of Education to coordinate and deliver the Secondary Education ECE Career and Technical Program which allows high school students to graduate career ready through the completion of a planned program of instruction.

6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development framework (98.44(b)).

The Division of Child Care developed and approved orientation curriculum, which is revised as needed to support adherence to current regulatory requirements. The curriculum addresses core competencies in the area of Health, Safety, and Sanitation; Child Abuse and Neglect: and Developmentally Appropriate Child Care Practices. This training is delivered by approved ECE credentialed trainers. Child Care Health Consultants (e.g., Registered Nurses, Health Educators, and Early Childhood Mental Health Specialists) are available for program and child-level consultation regarding specific issues including, but not limited to, health, nutrition, social, emotional, and behavioral health needs.

6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).

N/A

6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers:

a) with limited English proficiency

The state provider registry ECE-TRIS includes providers' first languages. In order to assess the demand for supports to LEP providers, an inventory of providers who report a first language other than English could be taken from the state provider registry on an annual basis.

The CHFS Office of Human Resource Management Language Access Program provides accurate, quality interpretation services for providers predominantly in Spanish and other Indo-European languages identified through a statewide assessment. In addition, information is available to families through the Benefind system, in the top eight most common languages spoken in Kentucky, other than English.

b) who have disabilities

Ongoing supports to provide accessible training to providers already include an evidence-based training developed by the University of Kentucky. It has been presented to both providers and trainers by the CCR&R at state-level conferences (ECI and the Trainers Institute). This training is currently being adapted to an online format that will be broadly available to trainers and providers across the state. In addition, the Workforce Study can include a question regarding any additional supports needed by providers across the state in

order to accommodate any special needs including disability and language.

The Division of Child Care through contractual services provided by Child Care Resource and Referral Network, and in consultation with the Cabinet for Health & Family Services (CHFS) Office of Human Resource Management Language Access Program and the Human Development Institute, provide regional coaching, technical assistance, and resources to support providers with limited English proficiency and persons with disabilities.

The Division of Child Care through contractual services provided by Child Care Resource and Referral Network, and in consultation with the Cabinet for Health & Family Services (CHFS) Office of Human Resource Management Language Access Program and the Human Development Institute, provide regional coaching, technical assistance, and resources to support providers with limited English proficiency and persons with disabilities.

6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii--iv)).

The Division of Child Care, through contractual services provided by Child Care Resource and Referral Network of Services, provide regional coaching, technical assistance, and resources to support providers who care for children receiving child care subsidies, including children of different age groups. State approved training agencies and independent credentialed trainers develop and deliver training based on early care core content that equips providers to respond to the unique needs of these children and their families.

6.2.5 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).

a) Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).

Priority status is applied to identify homeless children and families to ensure compliance with this provision of the law. Homeless policies and procedures for prioritizing access to child care for homeless children and families through coordination of services ensuring families have information on all available programs and services, such as HANDS, Head Start, and child mental health and other appropriate services.

b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.2.2).

The Division of Child Care, through contractual services provided by the Child Care Resource and Referral Network, provides regional coaching, technical assistance, and training to support the needs of providers serving children experiencing homelessness and their families. These resources and relevant trainings are based on consultation with the state McVinney-Vento Coordinator for Homeless Education.

6.2.6 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply

- [x] Issue policy change notices
- [x] Issue new policy manual
- [x] Staff training
- [x] Orientations

☑ Onsite training

☑ Online training

☑ Regular check-ins to monitor the implementation of CCDF policies

Describe the type of check-ins, including the frequency.

Child Care Aware Network of Services Coaches conduct follow-ups with providers for TA and Training to support program integrity and accountability.

☐ Other

Describe:

6.2.7 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's business practices, which can include training and/or TA efforts.

a) Describe the strategies that the state/territory is developing and implementing for training and TA.

The Division of Child Care, through contractual services provided by the Child Care Resource and Referral Network of Services, provides regional coaching, technical assistance, and resources to support prospective and current child care providers. A DCC developed and approved training is delivered by coaches as a requirement of licensure. This training includes information pertinent to the successful operation of a child care program to deliver quality child care.

Regional Chid Care Administrators have established relationships with the network of Small Business Development Centers throughout KY and regularly refer programs to them for specific business management assistance to complement coaching efforts.

The Kentucky Director's Credential is available to individuals who complete twelve college credit hours in the prescribed major areas of core knowledge and receive a recommendation from the institution where the coursework was completed. 922 KAR 2:230 explains the process in greater detail.

b) Check the topics addressed in the state/territory's strategies. Check all that apply.

- [x] Fiscal management
- [x] Budgeting
- [x] Recordkeeping
- [x] Hiring, developing, and retaining qualified staff
- [x] Risk management
- [x] Community relationships
- [x] Marketing and public relations
- [x] Parent-provider communications, including who delivers the training, education, and/or technical assistance
- [ ] Other

Describe:

6.3 Early Learning and Developmental Guidelines

6.3.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. Note: States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.

a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry

The Early Childhood Advisory Council (ECAC), Division of Child Care (DCC), Child Care

Resource and Referral Network of Services, and Kentucky Department of Education (KDE), in collaboration with other ECE system-level partners, continuously monitor early learning standards to ensure alignment with evidence-based practices that promote quality and support better outcomes for children and their families.

b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry.

The Kentucky Early Childhood standards are designed as a framework to assist parents, early care, intervention, and education professionals, administrators, and others in understanding what children are able to know and do from birth through four years of age.

c) Verify by checking the domains included in the state/territory's early learning and developmental guidelines. Responses for "other" is optional

- [x] Cognition, including language arts and mathematics
- [x] Social development
- [x] Emotional development
- [x] Physical development
- [x] Approaches toward learning
- [x] Other

Describe:

Communication.

d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.

The Cabinet for Health and Family Services (CHFS), the Kentucky Department of Education (KDE), Child Care Resource and Referral Network of Services, and the Early Childhood Advisory Council (ECAC) along with other partnerships with public and private organizations ensure dissemination across various disciplines and agencies.

e) Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates

The first edition of the Kentucky Early Childhood Standards was completed in June 2003.

The original document as well as subsequent updates represents the collaborative work and development process of work groups which include representatives from the Cabinet for Health and Family Services, the Kentucky Department of Education, Head Start and additional state stakeholders representing the needs of children from birth - age four.

In 2007, these work groups were reconvened to start looking at revisions and a revised version of the Kentucky Early Learning Standards was completed and released in 2009. This first revision included changes to both content and format based on relevant recent research as well as input from early care and education professionals.

The most current revision of the KY Early Childhood Standards (2013) includes updates made to the document to ensure alignment with the Early Childhood Advisory Council (ECAC) vision, including the school readiness definition. In addition, these updates include alignment with the Head Start Child Development and Early Learning Framework.

f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards

The Division of Child Care collaborates with Kentucky Out of School Alliance (KYOSA) to establish afterschool quality standards as well as professional development training targeted to providers in afterschool settings. This collaboration with KYOSA seeks to establish afterschool quality standards as well as professional development training targeted to providers in afterschool settings.

g) Provide the Web link to the state/territory's early learning and developmental guidelines.

Web Link: Kentucky Early Childhood Standards

6.3.2 CCDF funds cannot be used to develop or implement an assessment for children that:

-- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,

-- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,

-- Will be used as the primary or sole method for assessing program effectiveness,

-- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used.

Kentucky's Early Childhood Standards and research-based indicators were used to develop and expand the unified five-star quality rating and improvement system serving all early care and education programs – including childcare centers, Head Start and public preschool – that receive public funding

Kentucky's credentialed trainers provide Kentucky Early Learning Guidelines (ELG) training to child care providers across the state. Child care providers training records are tracked in ECE-TRIS (Early Care and Education Training Records Information System) which provides training data for analysis to evaluate training progress in relation to change in the providers Kentucky All STARS TQRIS level.

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care. States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).

2. ACF will collect annual data on how much CCDF funding is spent on quality activities using

the expenditure report (ACF-696). This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).

3. For each year of the Plan period, states and territories will submit a separate annual Quality Progress Report that will include a description of activities to be funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

-- Supporting the training and professional development of the child care workforce

-- Improving on the development or implementation of early learning and developmental guidelines

-- Developing, implementing, or enhancing a tiered quality rating and improvement system for child care providers and services

-- Improving the supply and quality of child care programs and services for infants and toddlers

-- Establishing or expanding a statewide system of child care resource and referral services

-- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)

-- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children

-- Supporting providers in the voluntary pursuit of accreditation

-- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development

-- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)) These activities can benefit infants and toddlers through school age populations.

This section covers the quality activities needs assessment and quality improvement activities and indicators of progress for each of the activities undertaken in the state or territory.

7.1 Quality Activities Needs Assessment for Child Care Services

7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)).

In April of 2018, Kentucky transitioned to Kentucky All STARS as the regulated quality rating and improvement system for the state. This unified system serves all early care and education programs that receive public funding including child care centers, Head Start and public preschool. All STARS recognizes programs that have made a commitment to continuous quality improvement through monetary and non-monetary incentives.

The Division of Child Care generates a quarterly trend report to determine quality improvement, provider engagement, and participation rates across the state. Kentucky also utilizes the Early Childhood Profile published annually by the Kentucky Center for Statistics (KYSTATS) to examine statewide trends in early education. Finally, the Governor’s Office of Early Childhood (GOEC) contracted with an independent evaluation and research group to conduct a validation study of Kentucky All STARS as part of the Race To the Top Early Learning Challenge (RTT-ELC) grant. The goal of the validation study is to assess the extent to which Kentucky’s five rating levels capture meaningful differences in quality and performance.

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.

The findings from the RTT-ELC validation study will be useful for improving program areas,

informing decisions and validating program effectiveness of Kentucky All STARS standards and domains of the hybrid tiered five level rating system.

A preliminary report released in June of 2018 showed that providers are pleased with the updates to the QRIS through Kentucky All STARS. Areas identified for focus of future intiatives lie in parent education and interim engagement of providers. The study will not be finalized until fall of 2018.

7.2 Use of Quality Funds

7.2.1 Check the quality improvement activities in which the state/territory is investing

- [x] Supporting the training and professional development of the child care workforce If checked, respond to section 7.3 and indicate which funds will be used for this activity. Check all that apply.
  - [x] CCDF funds
  - [x] Other funds

  Describe:

  Kentucky's Master Tobacco Settlement Agreement funds

- [x] Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity. Check all that apply.
  - [x] CCDF funds
  - [x] Other funds

  Describe:

  Kentucky's Master Tobacco Settlement Agreement funds

- [x] Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.

- [x] CCDF funds
- [x] Other funds

Describe:

Kentucky's Master Tobacco Settlement Agreement funds

- [x] Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply
  - [x] CCDF funds
  - [x] Other funds

  Describe:

  Kellogg Early Childhood Project

- [x] Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.
  - [x] CCDF funds
  - [ ] Other funds

  Describe:

- [x] Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.
  - [x] CCDF funds
  - [ ] Other funds

  Describe:

- [x] Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.
  - [x] CCDF funds
  - [ ] Other funds

  Describe:

- [x] Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.
  - [x] CCDF funds
  - [ ] Other funds

  Describe:

- [x] Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.
  - [x] CCDF funds
  - [ ] Other funds

  Describe:

- [ ] Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply
  - [ ] CCDF funds
  - [ ] Other funds

  Describe:

7.3 Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds

Lead Agencies can invest in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 in addition to the following (98.53(a)(1)).

7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce

a) Check and describe which content is included in training and professional development activities and describe who or how an entity is funded to address this topic. Check all that apply.

- [x] Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies

Describe:

The Cabinet for Health and Family Services Department of Community Based Services and the Child Care Aware CCR&R Network of Services Coaches are available to assist providers in assessing needs and match them with resources, which are provided in face to face, online, and via hybrid training options. Connect the Dots is a joint collaboration between multiple early education and behavioral health professionals across Kentucky. This collaboration addresses the need for a high impact skills- based training for early childhood professionals teaching the basics of social emotional best practices. There are three modules: one for Preschool teachers, one for Infant-Toddler, and for parents.

Web Link: Connect the Dots

- [x] Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.5.)

Describe:

Kentucky Child Care Aware Coaches provide technical assistance to prevent and address discipline issues in child care programs and recommend best practices to develop policies that support children's social-emotional and behavioral health to prevent suspension and expulsion from early childhood programs.

Connect the Dots is a joint collaboration between multiple early education and mental health specialists across Kentucky. The collaboration was built to address a common need: The need for a short yet powerful skills-based training teaching the basics of social and emotional best practices. Connect the Dots highlights 4 easy to remember steps to address challenging behaviors. The 4 steps encompass both the "well-being" and the "well-doing" of children to ensure strong social and emotional skills needed for

success in school and life. Connect the Dots resources and trainings are for anyone who works with children ages two to five years old.

Web Link: Connect the Dots

☑ Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development

Describe:

Kentucky Strengthening Families (KYSF) represents a multi-disciplinary partnership between state and local, and public and private organizations dedicated to embedding six research-based Protective Factors into services and supports for children and their families. Supporting families is a key strategy for promoting school readiness and preventing child abuse and neglect. All families experience times of stress, and research demonstrates that children grow and learn best in families who have the supports and skills to deal with those times. By supporting families and building their skills to cope with stressors, we can increase school readiness and reduce the likelihood abuse that may occur in families.

☑ Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards.

Describe:

Kentucky's early care and education professional development system is the foundation of developing and maintaining a qualified workforce across the commonwealth. Composed of high school graduates who earn their credentials within Family and Consumer Sciences Early Care and Education Coursework, college graduates with certification as well as those who entered the field from non-related fields. On-going professional development allows workers to move through this career lattice and obtain their long-term goals in the field of early care and education.

☑ Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development

Describe:

The Cabinet for Health and Family Services coordinates with the Department for Public Health to develop and disseminate training and technical assistance to practitioners on the local level to promulgate effective evidence based practices and comprehensive services to children in child care settings. Parental engagement is a key component in this work. This is an agency internal to CHFS.

☑ Using data to guide program evaluation to ensure continuous improvement

Describe:

Across eight regional Child Care Aware Training Coaches monitor trainings offered in their area to ensure professional development opportunities are available that cover all core content subject areas and levels that allow child care providers to readily attain relevant, quality training to meet child care regulatory requirements. These activities tracked through ECE-TRIS (Early Care and Education Training Records Information System), the CHFS designated database for all Early Care and Education practitioners in the state. Training Coaches submit quarterly gap analyses to set training priorities for each region to the Regional Child Care Administrators for evaluation and project planning.

The Division of Child Care generates a quarterly trend report to determine quality improvement, provider engagement, and participation rates across the state. Kentucky also utilizes the Early Childhood Profile published annually by the Kentucky Center for Statistics (KYSTATS) to examine statewide trends in early education. Finally, the Governor's Office of Early Childhood (GOEC) contracted with an independent evaluation and research group to conduct a validation study of Kentucky All STARS as part of the Race To the Top Early Learning Challenge (RTT-ELC) grant. The goal of the validation study is to assess the extent to which Kentucky's five rating levels capture meaningful differences in quality and performance.

☑ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment

Describe:

Regulations governing CCAP require participation in the Kentucky All STARS Tiered Quality Rating and Improvement System. As community-based child care providers migrated to the new Tiered Quality Rating and Improvement System, Kentucky's Child Care Aware CCR&R Network of Services utilized Coaches and specialists to provide access to training and skill development, analysis of geographic areas identified as child care deserts in effort to increase access to quality child care services.

☑ Caring for and supporting the development of children with disabilities and developmental delays

Describe:

Child Care providers receive screening and assessment training, which provides families access to identify potential development issues for referral to early intervention system for available services to children with developmental disabilities or delays.

☑ Supporting the positive development of school-age children

Describe:

The Division of Child Care in collaboration with Kentucky Strengthening Families (KYSF) support and promote the embedding six research-based Protective Factors into services and supports for children and their families. Supporting families is a key strategy for promoting positive development of school-age children to during times of stress, and providing skills to deal with those times.

☐ Other

Describe:

b) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply

☑ Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling

- [x] Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities
- [x] Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education
- [ ] Other

Describe:

7.3.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

DCC conducts monthly and quarterly analysis of child care programs movement in Kentucky All STARS TQRIS to measure progress of movement in rating level based on review of the domains and standards accessed by providers. Significant progress was made in supporting providers to move to high quality during the pilot phase of the new QRIS. The goal of the RTT-ELC grant was to achieve 45% high quality participation in All STARS (providers operating at 3-5 stars). As of August, 2018 47% of licensed and certified providers have achieved high quality.

7.4 Quality Rating and Improvement System (QRIS)

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

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

7.4.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?

- [ ] No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.
- [ ] No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.
- [x] Yes, the state/territory has a QRIS operating statewide or territory-wide

Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available.

Kentucky All STARS was developed and implemented with Race to the Top Early Learning Challenge funds and replaced STARS for Kids Now, Kentucky's QRIS since 2001, on April 15, 2018. This QRIS is administerd by the Division of Child Care with technical assistance provided through contract with the University of Kentucky.

Web Link: Kentucky All STARS

- [ ] Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.

Provide a link, if available.

- [ ] Yes, the state/territory has another system of quality improvement

If the response is yes to any of the above, describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

DCC conducts weekly and quarterly analysis of child care program movement in the Kentucky All STARS TQRIS to measure movement in rating level. Significant progress was made in supporting providers to move to high quality during the pilot phase of the new QRIS. The goal of the RTT-ELC grant was to achieve 45% high quality participation in All STARS (providers operating at 3-5 stars). As of August, 2018 47% of licensed and certified providers have achieved high quality.

A validation study is underway and is being conducted by Compass Evaluation and Research. The following questions are being addressed by the study:

- Does All STARS capture concepts and indicators of quality that resonate with stakeholders?
- To what extent are child care/early education sites of different types, locations, etc. engaging in All STARS?
- Do All STARS' criteria, measurement, and rating procedures adequately and accurately differentiate child care or early education quality?
- Is there sufficient infrastructure to promote and support child care professionals and early education in their advance through All STARS?
- Does All STARS support quality childcare for highly vulnerable populations?

Interim findings were published in September of 2018. Here is an except from the report: In general, the study's independent observations of quality track with progression in star rating. This means that 1- and 2-star sites typically received lower ratings than 3-, 4-, and 5-star sites. However, it is worth noting that there were several "dips" in observed quality for 4-star and, occasionally, 2-star sites. This may reflect an under-estimation of quality at the 1- and 3-star levels. This is to say, sites currently holding 1- and 3-star ratings may be providing higher quality care than their star level suggests. These are sites that potentially could have higher star ratings but may be deciding not to advance; reasons for not advancing may include procedural or financial challenges.

This study also was an opportunity to examine Kentucky's infrastructure for quality, which will be important for maintaining the gains already experienced in quality environments as well as assisting additional sites in advancing their rating in the future. Infrastructure includes the staffing, financial, and material supports available for sites to draw upon as they hire, train, and retain qualified staff, improve the daily classroom experiences of children, and form meaningful relationships with families and communities.

Infrastructure also will be important for supporting highly vulnerable children who are served at early learning sites. Preschool programs benefit from their strong relationship with the system for early intervention; there may be opportunities to broaden and deepen supports for inclusion among child care sites as well. Finally, there may be opportunities to examine new strategies for responding to the needs of other vulnerable children and in particular, children with high Adverse Childhood Experiences scores. Many professionals reported serving vulnerable children within their classrooms. These professionals also

reported a need to learn more about vulnerable children and best practices for responding to the needs of this population

The final report is anticipated November, 2018. Findings from the report will be used to consider changes to the system. Due to the fact that this is a unified TQRIS with public preschool and Head Start, any changes to the system must be agreed upon by all parties.

7.4.2 QRIS participation

a) Are providers required to participate in the QRIS?

- ☐ Participation is voluntary
- ☑ Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).

Participation at any level is satisfactory for providers of children receiving subsidy. However, providers who participate at higher quality, Level 3-5, receive additional quality incentive payments calculated by percentage of enrolled subsidy children compared to center capacity. A level 1 in Kentucky All STARS requires adherence to child care licensing standards. Providers who do not meet licensing requirements may not participate in Kentucky All STARS and do no qualify for CCAP subsidies or All STARS incentives.

All STARS Quality Incentives:

1) Initial Achievement Award for a first time provider for achieving a Kentucky All STARS Rating.

2) Annual Achievement Award for a provider who maintains a Kentucky All STARS Rating (Level 3 - 5). Eligibility for award is determined during Licensure Anniversary Month.

3) Additional quality incentives for high quality providers serving children in the subsidy program.

Web Link: All STARS Regulated Incentives

- [ ] Participation is required for all providers.

b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS? Check all that apply

- [x] Licensed child care centers
- [x] Licensed family child care homes
- [ ] License-exempt providers
- [x] Early Head Start programs
- [x] Head Start programs
- [x] State prekindergarten or preschool programs
- [x] Local district-supported prekindergarten programs
- [x] Programs serving infants and toddlers
- [x] Programs serving school-age children
- [x] Faith-based settings
- [ ] Tribally operated programs
- [ ] Other

Describe:

7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

- [ ] No
- [x] Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.

- [x] Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system) .
- [x] Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
- [ ] Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
- [ ] Programs that meet all or part of state/territory school-age quality standards.
- [ ] Other.

Describe:

7.4.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?

- [ ] No
- [x] Yes. If yes, check any links between the state/territory's quality standards and licensing requirements
  - [x] Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
  - [ ] Embeds licensing into the QRIS
  - [ ] State/territory license is a "rated" license
  - [ ] Other.

Describe:

7.4.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS

- [ ] No
- [x] Yes. If yes, check all that apply
  - [x] One time grants, awards, or bonuses.
  - [x] Ongoing or periodic quality stipends
  - [x] Higher subsidy payments
  - [x] Training or technical assistance related to QRIS.
  - [x] Coaching/mentoring.
  - [ ] Scholarships, bonuses, or increased compensation for degrees/certificates
  - [ ] Materials and supplies
  - [ ] Priority access for other grants or programs
  - [ ] Tax credits (providers or parents)
  - [ ] Payment of fees (e.g., licensing, accreditation)
  - [ ] Other

Describe:

7.4.6 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

DCC conducts weekly and quarterly analysis of child care programs movement in Kentucky All STARS TQRIS to measure progress of movement in rating level based on review of the domains and standards accessed by providers. Weekly analysis displays the number of providers participating at each level of quality broken out by provider type. Quarterly analysis includes regional data.

Significant progress was made in supporting providers to move to high quality during the pilot phase of the new QRIS. The goal of the RTT-ELC grant was to achieve 45% high quality participation in All STARS (providers operating at 3-5 stars). As of August, 2018 47% of licensed and certified providers have achieved high quality. Of the eight (8) service regions, six (6) have surpassed the 45% high quality goal. Targeted recruitment plans and special incentives have been put in place to assist the remaining two regions to reach 45% high quality.

7.5 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs. Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

7.5.1 What activities are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe

☐ Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low-income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families

Describe:

☑ Establishing or expanding the operation of community- or neighborhood-based family child care networks.

Describe:

The Lead Agency, in collaboration with the Prichard Committee for Academic Excellence, has received a W.K. Kellogg Foundation grant to expand high-quality home-based child care for infant and toddlers in Kentucky. The grant is in the data collection phase with the goal to begin pilot programs this spring. Pilots will target child care deserts in the state by utilizing staff family care network and HUB models.

☑ Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers

Describe:

Training topics, specific to developmentally appropriate practices of infant and toddler conducted in collaboration with regional training agencies and statewide credentialed trainers. Child Care Aware collaborates with the Governor's Office of Early Childhood to host infant toddler related sessions at their annual Early Childhood Institute and at a potential 2019 Infant Toddler Institute.

☑ Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant-toddler specialists

Describe:

Child Care Aware Quality Coaches trained in infant-toddler recommended practice and reliable on the Infant Toddler Environment Rating Scale provide ongoing technical assistance to providers on quality infant-toddler care.

☐ Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).

Describe:

☑ Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments

Describe:

QRIS Rating staff reliable on various scales including the Infant/Toddler Environment Rating Scale (ITERS-R) use this scale during an environment-rating visit. The results of the environment rating scale(s) and level requirements determine the program approved level. In addition, data indicates that infant-toddler ratios are lower at higher levels of quality.

☐ Developing infant and toddler components within the state/territory's child care licensing regulations

Describe:

☐ Developing infant and toddler components within the early learning and developmental guidelines

Describe:

☑ Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development

Describe:

The Kentucky Child Care Provider Search, available through Benefind, allows families to access information on child care services at any hour of the day. This information is available in nine languages.

Information and the availability of child care services are also provided through brochures, a quarterly newsletter, provider and public listservs used to disseminate important information related to child care services, and through direct communications, such as public forums and direct contact by Kentucky Child Care Aware Coaches through mentoring and coaching.

Information about child care assistance is posted in every local DCBS office in all 120 counties. Each applicant for any type of public assistance is screened for other types of assistance for which they may qualify, including child care assistance/subsidy.

Web Link: Kentucky Child Care Provider Search

Web Link: Division of Child Care - Child Care Assistance

☐ Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being

Describe:

☑ Coordinating with child care health consultants.

Describe:

The Child Care Health Consultation for Healthy Start in Child Care Program, through the Department for Public Health, provides training and technical assistance to child care

providers.

☑ Coordinating with mental health consultants.

Describe:

Families and child care providers have access to multiple agencies and/or programs within CHFS for screening and assessment. These programs include First Steps Early Intervention System, the Early Childhood Mental Health Program, and the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program. Each of these programs accepts referrals from child care providers and/or individuals who may have a developmental and/or cognitive delay.

☐ Other

Describe:

7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures

The Kentucky Early Care and Education Training Records Information System (ECE-TRIS) provides detailed reports of the number of providers trained in early learning standards, infant and toddler and related topics, number of trainings offered, and number of active trainers across the state.

The Kentucky Integrated Child Care System identifies and tracks all staff working in a licensed, certified child care facility.

7.6 Child Care Resource and Referral

A Lead Agency may expend funds to establish or expand a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

7.6.1 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

Data analysis assists in identification of trends and progress in program areas to assist management with regulatory and programing decisions. Data analyzed for trends and measures of progress may include number of families and children served by type of provider, review of demographic location, type of care such as non-tradtional hours and care for special needs. Census data may also be used in conjunction with provider data to determine areas of greatest need for recruitment of additional child care providers. Measurable outcomes can be established based on identified needs, and progress toward outcome attainment then measured accordingly.

Kentucky captures data from various sources such as:

1) Kentucky Integrated Child Care System
2) Benefind – Assistance & Support Programs for Kentuckians
3) Kentucky Early Care and Education Training Records Information System (ECE-TRIS)
4) eMARS - Enhanced Management Administrative Reporting System

7.7 Facilitating Compliance With State Standards

7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards? Describe:

Health and Safety Coaches provide technical assistance to child care providers around regulatory compliance and work with Level 1 and 2 programs in Kentucky's QRIS system. Coaches assist providers in preparing for annual licensing and certification inspections and provide technical assistance on Plan of Corrections to statement of deficiency found during inspection. Health and Safety Coaches will locate training when requested by the providers to address health and safety issues. Coaches follow standards for inspection and monitoring for consistent technical assistance delivery across the state.

7.7.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?

- [x] No
- [ ] Yes. If yes, which types of providers can access this financial assistance?
  - [ ] Licensed CCDF providers
  - [ ] Licensed non-CCDF providers
  - [ ] License-exempt CCDF providers
  - [ ] Other

Describe:

7.7.3 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

Measurable indicators of progress relevant to the use of funds for technical assistance and coaching would include analysis of licensing data regarding deficiencies, and progress of providers in increasing quality level in the state's QRIS.

7.8 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services in both child care centers and family child care homes currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children

Quality Rating staff who are reliable on ITERS-R, ECERS-R, ECERS-3, SACERS-U, and FCCERS-R use these scales to measure the level of quality in these environments. Providers receive a score, which factors into their final QRIS rating level.

With the integration of All STARS data into the Kentucky Integrated Child Care System (KICCS), the Lead Agency is able to study environmental rating scores in relation to other measures of quality tracked within the system.

The Lead Agency works closely with the Kentucky Center for Statistics to study child care quality performance in relation to education and workforce data within the state. Beginning in Fall 2018, All STARS data will be available in the Early Childhood Profile.

Web Link: Early Childhood Profile

7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures

DCC conducts weekly and quarterly analysis of child care programs movement in Kentucky All STARS TQRIS to measure progress of movement in rating level based on review of the domains and standards accessed by providers. Weekly analysis displays the number of providers participating at each level of quality broken out by provider type. Quarterly analysis includes regional data.

Significant progress was made in supporting providers to move to high quality during the pilot phase of the new QRIS. The goal of the RTT-ELC grant was to achieve 45% high quality participation in All STARS (providers operating at 3-5 stars). As of August, 2018 47% of licensed and certified providers have achieved high quality. Of the eight (8) service regions, six (6) have surpassed the 45% high quality goal. Targeted recruitment plans and special incentives have been put in place to assist the remaining two regions to reach 45% high quality.

7.9 Accreditation Support

7.9.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

☑ Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes

Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation

The Division of Child Care administers grants to support programs seeking accreditation from the Council on Accreditation, National After-School Association, National Association for the Education of Young Children, and the National Association for Family Child Care. Child Care Aware Professional Development Coaches are available to provide technical assistance to child care programs preparing for accreditation.

☐ Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers.

Describe:

☐ Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care

Describe:

☐ Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide

☐ Focused on child care centers

Describe:

☐ Focused on family child care homes

Describe:

☐ No, but the state/territory is in the accreditation development phase

☐ Focused on child care centers

Describe:

☐ Focused on family child care homes

Describe:

☐ No, the state/territory has no plans for accreditation development

7.9.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

With the integration of All STARS data into the Kentucky Integrated Child Care System (KICCS), the Lead Agency is able to study adopted standards of practice in relation to other measures of quality tracked within the system.

Significant progress was made in supporting providers to move to high quality during the pilot phase of the new QRIS. The goal of the RTT-ELC grant was to achieve 45% high quality participation in All STARS (providers operating at 3-5 stars). As of August, 2018 47% of licensed and certified providers have achieved high quality. Of the eight (8) service regions, six (6) have surpassed the 45% high quality goal. Targeted recruitment plans and special incentives have been put in place to assist the remaining two regions to reach 45% high quality.

7.10 Program Standards

7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children

Kentucky All STARS domains and standards are based on the following quality indicators:
Family & Community Engagement
Classroom & Instructional Quality
Staff Qualifications & Professional Development
Administrative & Leadership Practices.

Any provider participating at a Level 3 or higher has completed an evaluation of the program using a nationally standardized tool, the Environmental Rating Scale (ERS). (by Harms, Cryer and Clifford). All STARS providers have access to technical assistance coaches who

provide guidance in the areas of health & safety, quality improvement, professional development, and training.

Standards of quality are based on Kentucky's Early Childhood Standards and research-based indicators of quality. On a five-star scale, STARS level one is obtained by meeting regulatory requirements. Providers qualify for intial and annual monetary incentives beginning at level 2. Providers operating at high quality (levels 3-5) qualify for additional monetary incentives if they serve children receiving CCAP subsidies. These incentives are higher for programs serving infants and children.

7.10.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

With the integration of All STARS data into the Kentucky Integrated Child Care System (KICCS), the Lead Agency is able to study adopted standards of practice in relation to other measures of quality tracked within the system.

Significant progress was made in supporting providers to move to high quality during the pilot phase of the new QRIS. The goal of the RTT-ELC grant was to achieve 45% high quality participation in All STARS (providers operating at 3-5 stars). As of August, 2018 47% of licensed and certified providers have achieved high quality. Of the eight (8) service regions, six (6) have surpassed the 45% high quality goal. Targeted recruitment plans and special incentives have been put in place to assist the remaining two regions to reach 45% high quality.

7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities

7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).

The first edition of the Kentucky Early Childhood Standards was completed in June 2003. The original document as well as subsequent updates represents the collaborative work and development process of work groups which include representatives from the Cabinet for Health and Family Services, the Kentucky Department of Education, Head Start and additional state stakeholders representing the needs of children from birth – age four.

In 2007, these work groups were reconvened to start looking at revisions and a revised version of the Kentucky Early Learning Standards was completed and released in 2009. This first revision included changes to both content and format based on relevant recent research as well as input from early care and education professionals.

The most current revision of the KY Early Childhood Standards (2013) includes updates made to the document to ensure alignment with the Early Childhood Advisory Council (ECAC) vision, including the school readiness definition. In addition, these updates include alignment with the Head Start Child Development and Early Learning Framework.

7.11.2 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities, and also describe the measureable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider

preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. Describe:

N/A

8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity and accountability apply to:

-- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF

-- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF

-- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities

-- Internal processes for conducting child care provider subsidy

8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

8.1.1 Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity. Check all that apply:

☐ Train on policy manual

Describe:

N/A

☐ Train on policy change notices

Describe:

N/A

☑ Ongoing monitoring and assessment of policy implementation

Describe:

Department-level oversight for policy, state plans, and regulation work falls to the Department of Community Based Services Commissioner's Office. The Department of Administration and Financial Management (DAFM) is responsible for contract monitoring functions including monthly monitoring of financial activity; budget modifications and realignments; and contract funding verification. Contract and Budget staff are required to complete procurement, budget and grant training.

☐ Other

Describe:

N/A

8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:

☑ Verifying and processing billing records to ensure timely payments to providers

Describe:

The Provider Billing form is system generated and submitted electronically or mail by approved providers for prior month child care services.

The payment section staff process provider-billing payments for the prior month after the 1st day of each month, within ten calendar days of receipt. The timeframe for issuance of payment reference to KRS Chapter 45.453 Budget and Financial Administrations, Time Period for Payment.

Providers shall receive payment within 30 working days of processing the PBF, except when there are payment discrepancies in the payment amount billed and the amount owed to the provider. In these instances, the Cabinet is not held to the thirty (30) day timeperiod for payment.

☑ Fiscal oversight of grants and contracts

Describe:

The Division of Administration and Financial Management (DAFM), Policy and Program Administration Branch is responsible for fiscal oversight and monitoring of grants and contracts. DAFM administers the Personal Service Contracts (PSC's), Memorandum of Agreements (MOA's), and Memorandum of Understandings (MOU'S); development and issuance of competitive solicitations or RFP's; contract monitoring functions; coordination of federal formula and block grant applications and their electronic archiving; and review of OMB A-133 audit reports from sub recipients of federal funds.

☑ Tracking systems to ensure reasonable and allowable costs

Describe:

The Division of Administration and Financial Management (DAFM) budget staff is responsible for the compilation and submission of the biennial budget for grant programs; monthly monitoring of financial activity; budget modifications and realignments; and contract funding verification.

☐ Other

Describe:

N/A

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:

☐ Conduct a risk assessment of policies and procedures

Describe:

N/A

☐ Establish checks and balances to ensure program integrity

Describe:

N/A

☑ Use supervisory reviews to ensure accuracy in eligibility determination

Describe:

The Child Care Eligibility determination transitioned to benefind online system October 1, 2017. Benefind allows Kentucky's families to easily access public assistance benefits and information 24/7 through an online application and account.

To ensure accuracy in eligibility determination, cases processed by eligibility worker without case decision requires supervisor review. Program policy requires random case reviews to ensure eligibility determination guidelines are applied consistently.

☐ Other

Describe:

N/A

8.1.4 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

a) Check and describe all activities that the Lead Agency conducts to identify and prevent fraud or intentional program violations. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations. Include a description of the results of such activity.

☑ Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

Describe

The Benefind online portal allows Kentucky's families access to public assistance benefits such as Supplemental Nutrition Assistance Program (SNAP), Kentucky Transitional Assistance Program (KTAP), Medicaid and Child Care Assistance Program. The system shares and conducts a data match across eligibility programs to validate demographic details (e.g. income, addresses and social security numbers of children, parents and child care providers. Documented findings of fraud are submitted to Claims Section for processing and if over $5,000 is sent to the Office of Inspector General for further investigation and potential prosecution.

☑ Run system reports that flag errors (include types).

Describe:

The Benefind System generated reports access data to validate and report any inconsistencies. The Provider and Applicant Validation analyzes the employee master file and vendor master file for duplication or records, unusual relationships, potential

conflicts of interests between vendors and employees and other anomalies. The Child Care Payment Analysis conduct an analysis of invoices, claims and payment records to identify trends and anomalies resulting in unauthorized disbursements, duplicate payments, potential overpayments, theft and misappropriation of funds. Documented findings of fraud are submitted to Claims Section for processing and if over $5,000 is sent to the Office of Inspector General for further investigation and potential prosecution.

☑ Review enrollment documents and attendance or billing records

Describe:

Designated lead agency staff during a review may request from the provider the enrollment and attendance sign in sheets for comparison to the Kentucky Integrated Child Care System (KICCS) billing and payment records for errors and potential fraud or overpayment. Documented findings of fraud are submitted to Claims Section for processing and if over $5,000 is sent to the Office of Inspector General for further investigation and potential prosecution.

☐ Conduct supervisory staff reviews or quality assurance reviews.

Describe:

N/A

☐ Audit provider records.

Describe:

Designated lead agency staff may audit provider records upon report or detection of potential fraud.

☐ Train staff on policy and/or audits.

Describe:

N/A

☐ Other

Describe:

N/A

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.

☑ Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

The Benefind online portal allows Kentucky's families access to public assistance benefits such as Supplemental Nutrition Assistance Program (SNAP), Kentucky Transitional Assistance Program (KTAP), Medicaid and Child Care Assistance Program. The system shares and conducts a data match across eligibility programs to validate demographic details (e.g. income, addresses and social security numbers of children, parents and child care providers. Documented findings of Inadvertent Error (IE) are submitted to Claims Section for review and processing. An Inadvertent Error occurs when the claim is caused by a misunderstanding or an unintended error by the recipient.

☑ Run system reports that flag errors (include types).

Describe:

The Benefind System generated reports access data to validate and report any inconsistencies. The Provider and Applicant Validation analyzes the employee master file and vendor master file for duplication or records, unusual relationships, potential conflicts of interests between vendors and employees and other anomalies. The Child Care Payment Analysis conduct an analysis of invoices, claims and payment records to identify trends and anomalies resulting in unauthorized disbursements, duplicate payments, potential overpayments, theft and misappropriation of funds. Case reviews and interviews are conducted for Inadvertent Error (IE) determination. An Inadvertent Error occurs when the claim is caused by a misunderstanding or an unintended error by the recipient.

☑ Review enrollment documents and attendance or billing records

Describe:

Designated lead agency staff during a review may request from the provider the enrollment and attendance sign in sheets for comparison to the Kentucky Integrated Child Care System (KICCS) billing and payment records used to in IE determination. Documented findings of fraud are submitted to Claims Section for processing.

☐ Conduct supervisory staff reviews or quality assurance reviews.

Describe:

N/A

☐ Audit provider records.

Describe:

☐ Train staff on policy and/or audits.

Describe:

N/A

☑ Other

Describe:

Non fraud claims are overpayments caused by an inadvertent or non-deliberate action on the part of a recipient or provider. Claims that do not meet the acceptance criteria of Office of Inspector General (OIG), (i.e. less than $5,000.00), or are returned without court action are treated as Inadvertent Error (IE) (non-fraud claims).

Situations that may cause an Inadvertent Error claim include:

•The recipient of child care subsidy funds unintentionally fails to provide the service agent staff with correct or complete information.

•The recipient unintentionally fails to report a change that impacts child care benefits to the service agent staff.

•A provider unintentionally fails to notify the service agent of temporary operational changes or of circumstances which affect payments for children receiving subsidies.

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

☑ Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

The Benefind system shares and conducts a data match across eligibility programs to validate demographic details (e.g. income, addresses and social security numbers of children, parents and child care providers.

☐ Run system reports that flag errors (include types).

Describe:

N/A

☐ Review enrollment documents and attendance or billing records

Describe:

N/A

☑ Conduct supervisory staff reviews or quality assurance reviews.

Describe:

The Quality Assurance Branch conducts case reviews for accuracy and application of program policy and procedures.

☐ Audit provider records.

Describe:

N/A

☐ Train staff on policy and/or audits.

Describe:

N/A

☐ Other

Describe:

N/A

8.1.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

a) Check and describe all activities that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

☑ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

A claim is categorized as fraud after the case has been adjudicated in court and the client/provider has been convicted of fraud by a court of law. The Office of Inspector General (OIG) is the entity within the Cabinet for Health and Family Services that investigates alleged fraud cases and pursues prosecution through the court system. If the claim amount is estimated to be or exceeds $5,000.00 and fraud is suspected, a referral to the OIG for further investigation and possible prosecution is initiated by completion of the DCC-99A OIG Fraud Referral.

☐ Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

N/A

☐ Recover through repayment plans.

Describe:

N/A

☐ Reduce payments in subsequent months.

Describe:

N/A

☑ Recover through state/territory tax intercepts.

Describe:

Once a claim is delinquent in payment for 90 calendar days the claim is automatically sent to the Kentucky Revenue Service for state tax offset.

☐ Recover through other means.

Describe:

N/A

☐ Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

N/A

☐ Other

Describe:

N/A

b) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

☐ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

N/A

☐ Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

N/A

☐ Recover through repayment plans.

Describe:

Repayment agreements are sent to the client/provider if a claim has been determined to be an agency error or inadvertent error (non-fraud). All repayment agreements must be in writing on the DCC-98. The Claims section staff develop a reasonable repayment plan based on the recipient or provider 's ability to pay.

☐ Reduce payments in subsequent months.

Describe:

N/A

☑ Recover through state/territory tax intercepts.

Describe:

Once a claim is delinquent in payment for 90 calendar days the claim is automatically sent to the Kentucky Revenue Service for state tax offset.

☐ Recover through other means.

Describe:

N/A

☐ Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

N/A

☐ Other

Describe:

N/A

c) Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

☐ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

N/A

☐ Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

N/A

☑ Recover through repayment plans.

Establish a unit to investigate and collect improper payments.

Repayment agreements are sent to the client/provider if a claim has been determined to be an agency error or inadvertent error (non-fraud). All repayment agreements must be in writing on the DCC-98. The Claims section staff develop a reasonable repayment plan based on the recipient or provider 's ability to pay.

☐ Reduce payments in subsequent months.

Describe:

N/A

☑ Recover through state/territory tax intercepts.

Describe:

Once a claim is delinquent in payment for ninety (90) calendar days the claim is automatically sent to the Kentucky Revenue Service for state tax offset.

☐ Recover through other means.

Describe:

N/A

☐ Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

N/A

☐ Other

Describe:

N/A

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

☑ Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.

Describe:

When a recipient/provider is determined to have committed an Intentional Program Violation, a disqualification is imposed and sent a Notice of Disqualification.

A disqualification penalty shall adhere to the following guidelines:

•12 months disqualification for the first occurrence.

•24 months for the second occurrence; and

•Permanently disqualified for the third occurrence; or

•The length of penalty assigned by court order.

If a recipient/provider disagrees with the claim, they may request a hearing. All completed claims forms are sent to central office claims section so claim collections may be suspended if appeal is within 30 day timeframe of the establishment of the claim. If the appeal is timely, but meets good cause criteria by Quality Assurance for hearing,

collections will be suspended upon notification. Any hearing where a client has legal representation, the hearing officer must request legal assistance to assist in these cases.

Citation: 922 KAR 2:020. Child Care Assistance Program (CCAP) improper payments, claims, and penalties Section 8

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

Describe:

An administrative hearing is a formal process by which any applicant, recipient, or provider may appeal an action or inaction taken by the agency with which they do not agree. Information regarding hearing rights is included on various agency forms mailed or given to the applicant/recipient or provider. Hearings are held before an impartial hearing officer.

Citation: 922 KAR 2:020. Child Care Assistance Program (CCAP) improper payments, claims, and penalties Section 8

☑ Prosecute criminally.

Describe:

Once a case has been forwarded to the Office of Inspector General (OIG) for investigation and possible prosecution, program staff do not discuss the claim with recipient, client or provider. If there are questions, they are referred to the OIG office.

Citation: 922 KAR 2:020. Child Care Assistance Program (CCAP) improper payments, claims, and penalties Section 4

☐ Other.

Describe:

N/A

Appendix A: Background Check Waiver Request Form

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers will be considered "transitional and legislative waivers" to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)) These waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 -- 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019. If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

Overview of Background Check Implementation deadlines

Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017

Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018

One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019

Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting a time-limited waiver extension.

☑ **Appendix A.1:** In-state criminal registry or repository checks with fingerprints requirements for existing staff. (See related question at 5.4.1 (b))

Describe the provision from which the state/territory seeks relief.

Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018. The NBCP became available to all providers on March 5, 2018. As of September 25, 31,113 child care background checks have been initiated within the Kentucky Applicant Registry and Employment Screening (KARES) system. This number exceeds the initial estimate by almost 6,000 employees and continues to increase. To date, approximately 200 providers have not initiated background checks for their staff. The Division of Child Care has issued multiple reminders via email, phone calls, and mail regarding the September 30 deadline. The small number of existing staff who have not complied will be cited as of October 1, 2018.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

All required policies and procedures surrounding the national background checks are being implemented by Kentucky. Those who are not compliant will be cited as of October 1, 2018. A waiver will provide additional time to relocate any children who may be impacted by closures of centers as a result of failing to comply with the September 30 deadline.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

An in-state criminal history check was completed on all existing staff at their initiial hire date. Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018 which requires a fingerprint based in-state criminal history check. The small number of existing staff who have not complied will be cited as of October 1, 2018.

☑ **Appendix A.2:** In-state sex offender registry requirements for existing staff. (See related question at 5.4.2 (b))

Describe the provision from which the state/territory seeks relief.

Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018. The NBCP became available to all providers on March 5, 2018. As of September 25, 31,113 child care background checks have been initiated within the Kentucky Applicant Registry and Employment Screening (KARES) system. This number exceeds the initial estimate by almost 6,000 employees and continues to increase. To date, approximately 200 providers have not initiated background checks for their staff. The Division of Child Care has issued multiple reminders via email, phone calls, and mail regarding the September 30 deadline. The small number of existing staff who have not complied will be cited as of October 1, 2018.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

All required policies and procedures surrounding the national background checks are being implemented by Kentucky. Those who are not compliant will be cited as of October 1, 2018. A waiver will provide additional time to relocate any children who may be impacted by closures of centers as a result of failing to comply with the September 30 deadline.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

A in-state sex offender registry check was completed using the public-facing KentuckySex Offender Registry on all existing staff at their initiial hire date. Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018 which requires an NCIC/NSOR check. The small number of existing staff who have not complied will be cited as of October 1, 2018.

☑ **Appendix A.3:** In-state child abuse and neglect registry requirements for existing staff. (See related question at 5.4.3 (b))

Describe the provision from which the state/territory seeks relief.

Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018. The NBCP became available to all providers on March 5, 2018. As of September

25, 31,113 child care background checks have been initiated within the Kentucky Applicant Registry and Employment Screening (KARES) system. This number exceeds the initial estimate by almost 6,000 employees and continues to increase. To date, approximately 200 providers have not initiated background checks for their staff. The Division of Child Care has issued multiple reminders via email, phone calls, and mail regarding the September 30 deadline. The small number of existing staff who have not complied will be cited as of October 1, 2018.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

All required policies and procedures surrounding the national background checks are being implemented by Kentucky. Those who are not compliant will be cited as of October 1, 2018. A waiver will provide additional time to relocate any children who may be impacted by closures of centers as a result of failing to comply with the September 30 deadline.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

An in-statechild abuse and neglect registry check was completed on all existing staff at their initiial hire date. Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018 which requires a new in-state child abuse and neglect registry check and includes the rap-back feature. The small number of existing staff who have not complied will be cited as of October 1, 2018.

☑ **Appendix A.4:** National FBI fingerprint search requirements for existing staff. (See related question at 5.4.4 (b))

Describe the provision from which the state/territory seeks relief.

Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018. The NBCP became available to all providers on March 5, 2018. As of September 25, 31,113 child care background checks have been initiated within the Kentucky Applicant Registry and Employment Screening (KARES) system. This number exceeds the initial estimate by almost 6,000 employees and continues to increase. To date, approximately 200 providers have not initiated background checks for their staff. The

Division of Child Care has issued multiple reminders via email, phone calls, and mail regarding the September 30 deadline. The small number of existing staff who have not complied will be cited as of October 1, 2018.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

All required policies and procedures surrounding the national background checks are being implemented by Kentucky. Those who are not compliant will be cited as of October 1, 2018. A waiver will provide additional time to relocate any children who may be impacted by closures of centers as a result of failing to comply with the September 30 deadline.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

A criminal records check was completedon all existing staff at their initiial hire date. Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018 which requires a National FBI fingerprint-based criminal history check. The small number of existing staff who have not complied will be cited as of October 1, 2018.

☑ **Appendix A.6:** National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for existing staff. (See related question at 5.4.5 (b))

Describe the provision from which the state/territory seeks relief.

Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018. The NBCP became available to all providers on March 5, 2018. As of September 25, 31,113 child care background checks have been initiated within the Kentucky Applicant Registry and Employment Screening (KARES) system. This number exceeds the initial estimate by almost 6,000 employees and continues to increase. The Division of Child Care has issued multiple reminders via email, phone calls, and mail regarding the September 30 deadline. The small number of existing staff who have not complied will be cited as of October 1, 2018.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

All required policies and procedures surrounding the national background checks are being implemented by Kentucky. Those who are not compliant will be cited as of October 1, 2018. A waiver will provide additional time to relocate any children who may be impacted by closures of centers as a result of failing to comply with the September 30 deadline.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

A search of the public-facing sex offender registry website was completed on all existing staff at their initiial hire date. Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018 which requires a National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search. Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018 which requires a National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search. The small number of existing staff who have not complied will be cited as of October 1, 2018.

☑ **Appendix A.8:** Interstate criminal registry or repository check for existing staff. (See related question at 5.4.6 (b))

Describe the provision from which the state/territory seeks relief.

Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018. The NBCP became available to all providers on March 5, 2018. As of September 25, 31,113 child care background checks have been initiated within the Kentucky Applicant Registry and Employment Screening (KARES) system. This number exceeds the initial estimate by almost 6,000 employees and continues to increase. To date, approximately 200 providers have not initiated background checks for their staff. The Division of Child Care has issued multiple reminders via email, phone calls, and mail regarding the September 30 deadline. The small number of existing staff who have not complied will be cited as of October 1, 2018.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

All required policies and procedures surrounding the national background checks are being implemented by Kentucky. Those who are not compliant will be cited as of October

1, 2018. A waiver will provide additional time to relocate any children who may be impacted by closures of centers as a result of failing to comply with the September 30 deadline.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

An inter-state criminal history check was completed on all existing staff who resided in another state withinthe last 5 years at their intiial hire date. Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018 which requires an inter-state criminal history check. The small number of existing staff who have not complied will be cited as of October 1, 2018.

☑ **Appendix A.10:** Interstate sex offender registry or repository check for existing staff. (See related question at 5.4.7 (b))

Describe the provision from which the state/territory seeks relief.

Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018. The NBCP became available to all providers on March 5, 2018. As of September 25, 31,113 child care background checks have been initiated within the Kentucky Applicant Registry and Employment Screening (KARES) system. This number exceeds the initial estimate by almost 6,000 employees and continues to increase. To date, approximately 200 providers have not initiated background checks for their staff. The Division of Child Care has issued multiple reminders via email, phone calls, and mail regarding the September 30 deadline. The small number of existing staff who have not complied will be cited as of October 1, 2018.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

All required policies and procedures surrounding the national background checks are being implemented by Kentucky. Those who are not compliant will be cited as of October 1, 2018. A waiver will provide additional time to relocate any children who may be impacted by closures of centers as a result of failing to comply with the September 30 deadline.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

A search of the public-facing national sex offender registry website was completed on all existing staff at their initial hire date. Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018 which requires a National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search. The small number of existing staff who have not complied will be cited as of October 1, 2018.

☑ **Appendix A.12:** Interstate child abuse and neglect registry check for existing staff. (See related question at 5.4.8 (b))

Describe the provision from which the state/territory seeks relief.

Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018. The NBCP became available to all providers on March 5, 2018. As of September 25, 31,113 child care background checks have been initiated within the Kentucky Applicant Registry and Employment Screening (KARES) system. This number exceeds the initial estimate by almost 6,000 employees and continues to increase. To date, approximately 200 providers have not initiated background checks for their staff. The Division of Child Care has issued multiple reminders via email, phone calls, and mail regarding the September 30 deadline. The small number of existing staff who have not complied will be cited as of October 1, 2018.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

All required policies and procedures surrounding the national background checks are being implemented by Kentucky. Those who are not compliant will be cited as of October 1, 2018. A waiver will provide additional time to relocate any children who may be impacted by closures of centers as a result of failing to comply with the September 30 deadline.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

An interstate child abuse and neglect registrysearch was completed on all existing staff who resided in another state within the last five (5) years at their intiial hire date.

Kentucky has implemented 922 KAR 2:280 with a compliance deadline of September 30, 2018. The small number of existing staff who have not complied will be cited as of October 1, 2018.