



Child Care and Development Fund (CCDF) Plan

For

State/Territory:

Kansas

FFY 2014-2015

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

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

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

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

Form ACF-118 Approved OMB Number expires

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PART 1

ADMINISTRATION

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

1.1 Contact Information

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

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

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

Name of Lead Agency: **Kansas Department for Children and Families**
Address of Lead Agency: **915 SW Harrison Street, Docking State Office Building, Topeka, KS 66612**

Name and Title of the Lead Agency's Chief Executive Officer: **Phyllis Gilmore, Secretary**

Phone Number: **785-296-3349**

Fax Number: **785-296-6960**

E-Mail Address: **Phyllis.Gilmore@ks.gov**

Web Address for Lead Agency (if any): **<http://www.dcf.ks.gov>**

1.1.2. Who is the CCDF administrator?

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

a) Contact Information for CCDF Administrator:

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Name of CCDF Administrator: **Karen Beckerman**
Title of CCDF Administrator: **Strengthening Family Services Director, Economic and Employment Services**
Address of CCDF Administrator: **915 SW Harrison Street, Docking State Office Building, Topeka, KS 66612**
Phone Number: **785-296-4717**
Fax Number: **785-296-0146**
E-Mail Address: **Karen.Beckerman@dcf.ks.gov**
Phone Number for CCDF program information (for the public) (if any): **785-296-3349**
Web Address for CCDF program (for the public) (if any): **http://www.dcf.ks.gov**
Web address for CCDF program policy manual: (if any): **http://www.dcf.ks.gov/services/ees/Documents/Child_Care/CCDF%20Plan.pdf**
Web address for CCDF program administrative rules: (if any): **n/a**

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

Name of CCDF Co-Administrator: **n/a**
Title of CCDF Co-Administrator: **n/a**
Address of CCDF Co-Administrator: **n/a**
Phone Number: **n/a**
Fax Number: **n/a**
E-Mail Address: **n/a**
Description of the role of the Co-Administrator: **n/a**

1.2 Estimated Funding

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

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

FY 2014 Federal CCDF allocation (Discretionary, Mandatory and Matching): **\$43,049,965**
Federal TANF Transfer to CCDF: **\$11,289,854**
Direct Federal TANF Spending on Child Care: **\$0**
State CCDF Maintenance-of-Effort Funds: **\$7,724,514**
State Matching Funds: **\$9,346,876**

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

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

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

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

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

If checked, identify source of funds: **General Revenue Funds**

If known, identify the estimated amount of public funds the Lead Agency will receive: \$ **17,001,390**

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

If checked, are those funds:

donated directly to the State?

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

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

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

State expenditures for pre-k programs to meet the CCDF Matching Funds requirement. If checked,

Provide the estimated percentage of Matching Fund requirement that will be met with pre-k expenditures (not to exceed 30%): _____

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

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

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

State expenditures for pre-k programs to meet the CCDF Maintenance of Effort (MOE) requirements. If checked,

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

Estimated percentage of MOE Fund requirement that will be met with pre-k expenditures (not to exceed 20%): _____

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

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If known, identify the estimated amount of pre-k funds the Lead Agency will receive for MOE Fund requirement: \$_____

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

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

In as much detail possible, list the activities that will be funded, the estimated amount of CCDF quality funds that will be used for each activity, and how these activities relate to the Lead Agency’s overall goal of improving the quality of child care for low-income children.

Activity	Estimated Amount of CCDF Quality Funds (check which targeted funds will be used, if any)	Purpose	Projected Impact and Anticipated Results (if possible)
Recruitment and technical assistance for infant toddler caregivers through the statewide child care resources and referral agency.	<u>\$1,946,472</u> Check if targeted funds for this activity: <input checked="" type="checkbox"/> Infant/Toddler Targeted Funds <input type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds <input type="checkbox"/> Quality Expansion	To provide availability and access to quality infant/toddler care for families.	Infant/toddler slots in child care will be available, and technical assistance will improve quality and better child outcomes.
Kansas Early Head Start.	<u>\$20,400,000</u> Check if targeted funds for this activity: <input checked="" type="checkbox"/> Infant/Toddler Targeted Funds <input type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds <input checked="" type="checkbox"/> Quality Expansion	To provide comprehensive Early Head Start services to eligible children and families.	Increased quality of care and better child outcomes. Children will thrive and be more school-ready.
Resource and referral consumer information and education.	<u>\$1,850,597</u> Check if targeted funds for this activity: <input type="checkbox"/> Infant/Toddler Targeted Funds <input checked="" type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds <input type="checkbox"/> Quality Expansion	To serve as the resource and referral contact for families seeking child care and to provide consumer information and education about how to choose child care and training for child care practitioners.	Better informed parents and families will choose child care. Practitioners will provide a higher level of quality care based on their increased knowledge.

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Activity	Estimated Amount of CCDF Quality Funds (check which targeted funds will be used, if any)	Purpose	Projected Impact and Anticipated Results (if possible)
Early Childhood Associate Apprenticeship Program	<p><u>\$185,000 annually</u></p> <p>Check if targeted funds for this activity:</p> <p><input type="checkbox"/> Infant/Toddler Targeted Funds</p> <p><input type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds</p> <p><input checked="" type="checkbox"/> Quality Expansion</p>	To professionally credential child care providers with a nationally-recognized credential.(CDA) Better credentialed providers provide higher quality of child care.	Apprentices receive on-the-job training and mentoring at child care centers, employment in local child care centers, and mentoring and scholarships with to community colleges (if financially needed). Apprentices must earn a Child Development Associate (CDA). Children will thrive and be school ready.

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Activity	Estimated Amount of CCDF Quality Funds (check which targeted funds will be used, if any)	Purpose	Projected Impact and Anticipated Results (if possible)
<p>Child care workforce development.</p>	<p><u>\$690,000</u></p> <p>Check if targeted funds for this activity:</p> <p><input type="checkbox"/> Infant/Toddler Targeted Funds</p> <p><input type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds</p> <p><input checked="" type="checkbox"/> Quality Expansion</p>	<p>Work to establish a workforce center for face-to-face and web-based training. Our current grantee providing these activities is Kansas Child Care Training Opportunities.</p>	<p>Facilitate a training delivery system with a trainer directory and statewide training calendar. Provide an incentive program for trainers, and child development associate credential scholarships for early childhood professionals. Practitioners will provide a higher level of quality care based on their increased knowledge. Children will thrive and be school-ready.</p>

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Activity	Estimated Amount of CCDF Quality Funds (check which targeted funds will be used, if any)	Purpose	Projected Impact and Anticipated Results (if possible)
<p>School Age-After-school Activities and Support</p>	<p><u>\$60,000 Annually.</u></p> <p>Check if targeted funds for this activity:</p> <p><input type="checkbox"/> Infant/Toddler Targeted Funds</p> <p><input checked="" type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds</p> <p><input type="checkbox"/> Quality Expansion</p>	<p>To fund activities to improve the quality of care in after school programs.</p>	<p>Children in after school programs will receive higher quality of care.</p> <p>Kansas Enrichment Network (KEN) provides the means to strengthen the infrastructure of after-school programs that target low-income populations and students at-risk of dropping out of school. Activities include technical assistance and training to existing out-of-school programs, educating people of the value of programs, and promoting after-school programs. Training needs are assessed to address the social emotional needs of at-risk students and military families in the after-school programs.</p>

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Activity	Estimated Amount of CCDF Quality Funds (check which targeted funds will be used, if any)	Purpose	Projected Impact and Anticipated Results (if possible)
Kansas Coordinating Council on Early Childhood Development	<u>\$7,000 Annually</u> Check if targeted funds for this activity: <input type="checkbox"/> Infant/Toddler Targeted Funds <input type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds <input checked="" type="checkbox"/> Quality Expansion	Infrastructure for a comprehensive service delivery system of integrated services for children with or at risk of developmental delays from birth to age 5.	Children will receive interventions to address developmental delays.
Licensing and Regulation	<u>2,237,228 Annually.</u> Check if targeted funds for this activity: <input type="checkbox"/> Infant/Toddler Targeted Funds <input type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds <input checked="" type="checkbox"/> Quality Expansion	To partially fund the regulatory requirements in Kansas for child care.	Children will be cared for in facilities who meet minimum health and safety requirements.

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

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

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

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

1.3. CCDF Program Integrity and Accountability

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Program integrity is defined to include efforts that ensure effective internal controls over the administration of CCDF funds. The Lead Agency is responsible for monitoring programs and services, ensuring compliance with the rules of the program, promulgating rules and regulations to govern the overall administration of the plan and oversee the expenditure of funds by sub-grantees and contractors. (§ 98.11(b)) Accountability measures should address administrative error, which includes unintentional agency error, **as well as address** program violations, both unintentional and intentional, that may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

1.3.1. Describe the strategies the Lead Agency will utilize to ensure effective internal controls are in place. The description of internal controls may include, but is not limited to a description of processes to ensure sound fiscal management, to identify areas of risk or to establish regular evaluation of control activities.

a) Fiscal -The annual budget is based on available CCDF revenue and expenditures (including administrative, grant, and variable caseload projections). The projected revenue is based on the most current federal funding information available, and expenditures are budgeted by program cost allocation (PCA) code and object code.

Each child care expenditure is budgeted and spent in a specified PCA code which allows expenditures to be segregated by activity type. This structure conforms to the state's approved cost allocation plan which assigns each expenditure account a unique funding combination of federal and state funds. The costs allocation plan is the primary vehicle for preventing unallowable expenditures being charged to federal funding sources. Through this system, the propensity for funds to be misspent or miscoded is minimized.

During the execution of the budget, errors are minimized through reliance on the accounting system. Monthly reports of expenditures detailing budget-to-actual comparisons and adjusting entries are made. The accounting system separates data used to support matching, level of effort, or earmarking amounts and fund limits, and ensures that expenses, refunds, and cash receipts or revenues are properly classified and recorded only once as to their effect on matching, level of effort, or earmarking. Program expenditure reports are prepared monthly using PCA (Program Cost Allocation) codes. As such, any inappropriate PCA code included in program expenditures can be identified.

Detailed caseload reports are produced from information obtained from two automated systems: KsCares and SMART. KsCares is a statewide system used to determine eligibility and assistance. The Statewide Management Accounting and Reporting System (SMART) is the state-wide accounting system. Program management compiles management reports from these systems to track and monitor program expenditures. In addition, the KsCares system has built-in edits and controls for child care policies.

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The accountant for the fiscal report is required to prepare the reports for the quarterly meeting in which the reports are reviewed by several fiscal staff. Prior to the submission of the ACF-696 CCDF Financial Report, a meeting between program management, internal reporting cash management staff, and DCF Budget Office staff occurs to review the amounts reported for CCDF. At that time, reports on administrative expenditures, direct benefit payments, and earmarks and fund limits are reviewed. The accountant enters it online in the OLDC system and the accountant's supervisor submits the report. Copies of the submitted reports are available and provided to fiscal and/or program staff as applicable.

b) Data -The data for the ACF-800 Aggregated Report: Pooled CCDF and non-CCDF funds and ACF-801 Case Level Data Report are compiled automatically by computer programs written and tested for accuracy. The ACF-801 is submitted to HHS electronically, according to a predetermined schedule, by IT staff. The data for the ACF-800 is produced automatically by IT on the same day every year, and a person in EES enters that report data onto a secure HHS website.

c) Error Rate -Economic and Employment Services Staff establish child care policies in conformance with CCDF regulations. These policies guide the day to day decision of child care field staff that provides direct assistance. The system represented by child care policies (within the on-line combined policy manual KEESM) and the statewide automated system (KsCares), which embodies these policies, is the chief method of controlling for participant eligibility. The manual provides specific eligibility guidelines which are manifested within the system. KsCares is the tool by which service benefits are made to child care clients based on hours of care, family income, and provider type. Besides automating much of child care policy, it also automatically computes the family share deduction, as required by regulation. In addition, area supervisors and central office training are used to supplement eligibility policy. Area staff receives training from the Economic and Employment Services Division.

The Child Care Program has also been added to the Lead Agency's supervisory case review system, and regional supervisors and performance improvement staff also include child care cases in their monthly case reviews. When incorrect payments are identified through case reviews by Quality Control staff, management evaluation staff, regional supervisory or performance improvement staff, or through customer concerns, they are returned to the case workers for correction and initiation of collection action on overpayments or issuance of underpayments.

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

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

Definition: A sub-recipient (including a sub-contractor and or sub-grantee) is a non-Federal entity that expends Federal awards (contract or grant) received from another entity to carry out a Federal program, but does not include a vendor nor does it include an individual who is a beneficiary of such a program. OMB Circular A-133 Section 210 provides additional information on the characteristics of a **sub-recipient and vendor** (http://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2010).

The description of monitoring may include, but is not limited to, a discussion of written agreements, fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified, and establishing performance indicators or measures related to improper payments.

For all subrecipients delivering services and activities, the Lead Agency (Kansas Department for Children and Families) follows the State of Kansas competitive bidding and contract/grant procurement process as administered by the Kansas Department of Administration.

Lead Agency and CCDF program guidelines are communicated through written outcomes and performance indicators as set forth in the agreement. The Lead Agency assigns staff for oversight of these awards.

The Lead Agency oversees services on at least a quarterly basis through written reports. In addition, there are monthly, quarterly and ad-hoc meetings between the Lead Agency and subrecipients. Frequent telephone calls and e-mails enhance the Lead Agency's monitoring practices.

The Lead Agency's audits and an independent audit firm authorized by the Lead Agency, Legislative Post Audit, or other authorized auditors and monitors may conduct audits and monitoring for contract compliance, program requirements, service provision, and fiscal effectiveness and responsibility.

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

Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to **areas**

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identified through the Error Rate Review process (98.100). Check which activities, if any, the Lead Agency has chosen to conduct.

Type of Activity	Identify Program Violations	Identify Administrative Error
Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid))	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Share/match data from other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS) (Work Number utilized.)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Run system reports that flag errors (include types)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Review of attendance or billing records	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Audit provider records	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct quality control or quality assurance reviews	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents	<input type="checkbox"/>	<input type="checkbox"/>
Conduct supervisory staff reviews	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct data mining to identify trends	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Train staff on policy and/or audits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other. Describe _____	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>

For any option the Lead Agency checked in the chart above other than none, please describe Kansas conducts federal improper payment reviews for the child care subsidy program. These reviews are completed on a three year cycle. Cases are selected for review from a statewide sample of open cases. A review, conducted by one of twelve quality control reviewers, includes examination of the case file and electronic record to verify income, work schedule, school schedule, etc. Results of the reviews are shared with the case managers, supervisors, and management staff. Case managers are required to report back to QC on the amount of any overpayments or underpayments. The results of the federal QC reviews are tracked in a QC database. Upon completion of review, reports of error rates and causal factors are issued to central office and local management staff.

The Child Care Program has also been added to the Lead Agency’s supervisory case review system, and regional supervisors and performance improvement staff also include child care cases in their monthly case reviews. When incorrect payments are identified through case reviews by Quality Control staff, management evaluation staff, regional supervisory or performance improvement staff, or through customer concerns, they are returned to the case workers for correction and initiation of collection action on overpayments or issuance of underpayments. Reports are

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available in the case review system to assist the local office and central office in determining error prevention strategies or training needs.

Regular Lead Agency new worker training is available both face-to-face and on-line. Training is delivered both from the central office level and the regional level. Parent and provider resources are available to describe Lead Agency program rules. Tools such as notices, videos, brochures, handbooks, newsletters and on-line information are used to inform parents and providers of their responsibilities. Parent/provider contracts of both new enrollments and ongoing providers are reviewed to ensure compliance with program rules.

System Edits- Kansas uses a mainframe system, KsCares, to determine eligibility for the Child Care Assistance Program. The system has many edits which assist in preventing/reducing the occurrence of overpayments or underpayments. Information sharing between KsCares and KAECSES, the State's automated eligibility system for the TANF and Food Assistance programs, occurs on a regular basis. There is also data exchange with the child care licensing system maintained by the Department of Health and Environment (CLARIS). Case record searches are performed at application to prevent duplicate cases from being created. Edits are built in which prevent excessive hours from being authorized, prevent duplicate plans, and prevent providers from having an excessive number of active plans. Additionally, provider rates and assignment of rates to determine benefits is automated to prevent incorrect rates being entered on plans.

Reports- Several reports are produced monthly or periodically to assist workers in preventing and identifying possible incorrect payments. Reports include: child care providers who appear to have numbers of children in care in excess of licensing standards, child care providers with unusually large plan hours/benefits, parents who are not using their authorized child care benefits, parents who are using a provider other than the one listed on the child care plan, and child care cases with existing overpayments that are not being recouped.

Data Matches- Data matches that assist case managers with overpayment detection include: Child Support Enforcement alerts notify workers when collection of child support begins or changes, on-line state and federal wage match data to screen for unreported earned and unemployment income, on-line expedited access to The Work Number to verify employment income, on-line data match with Vital Statistics to verify birth information and with Social Security to verify benefit information.

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

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

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

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

For any option the Lead Agency checked in the chart above other than none, please describe *Investigation/Collection*-Kansas does not have a specific unit to investigate/collect improper payments. These functions, however, are performed by eligibility staff, regional legal staff, and fraud staff, along with assistance from Central Office staff. Reports are generated from the electronic payment system (EBT).

Automatic Offsets- Restored benefits, which are due to a parent for an underpayment which occurred at least 2 months prior to the current month, are automatically applied to outstanding claim balances. A notice of action is sent to the household to inform them of the restored amount and the remaining overpayment claim balance. Additionally, when a child care EBT account is inactive for 90 days, the benefits are expunged. Expunged child care benefits are applied to active child care claims to reduce the balance of an overpayment. Adjustments to cases with

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multiple claims are applied in a manner to close-out one of the claims whenever possible. Parents are notified of adjustments and receive a separate notice for each adjusted claim.

Debt Collection- If an overpayment claim is not satisfied through automatic offset as described above, Kansas has the following system established for overpayment collection:

For providers: A demand letter for repayment is sent. If a provider does not respond to the demand letter or follow through with the established repayment agreement, the provider is placed in state debt set-off, which captures state income tax returns.

For parents: The parent is sent a demand letter for repayment. If a parent has an open case, future month benefits are adjusted until the overpayment is repaid. If the parent does not have an open case and does not respond to the demand letter or follow through with a repayment agreement, the parent is placed in state debt set-off.

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

None

Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified

Adults in the household who were determined to have committed fraud in either the TANF or Child Care program will render themselves and all adult household members ineligible for both programs for their lifetime. Children will also be ineligible if living in a household with a disqualified adult until they become adults or are able to act in their own behalf.

Families have the right to appeal eligibility determinations, and requests for appeal hearings must be received within 33 days (30 days, plus 3 days mail time) of the date the notice of action was mailed. An appeal must be in writing.

The request for hearing is sent to the Administrative Hearings section of the Department of Administration. DCF also submits a summary of the action taken, including the reasons for the action, policy manual references supporting the action and copies of all documents used in making the decision. The hearing is scheduled by the Administrative Hearings section, and during the hearing, both DCF and the family present their arguments and evidence. A decision is rendered by the hearing officer no later than 90 days after the date of receipt of the request for hearing. The decision is sent to both DCF and the family.

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Either party may request a rehearing to submit new evidence or a review of the decision by the State of Appeals Committee within 18 days (15 days plus 3 days mail time).

The decision of the State Appeals Committee review is final and binding upon the client and DCF on the date of the decision.

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

Prosecute criminally

Other. Describe. If an overpayment claim is not satisfied through automatic offset, Kansas has the following system established for overpayment collection:

For providers: A demand letter for repayment is sent. If a provider does not respond to the demand letter or follow through with the established repayment agreement, the provider is placed in state debt set-off, which captures state income tax returns.

For parents: The parent is sent a demand letter for repayment. If the parent has an open case, future month benefits are adjusted until the overpayment is repaid. If the parent does not have an open case and does not respond to the demand letter or follow through with a repayment agreement, the parent is placed in state debt set-off.

The Lead Agency may also terminate an existing agreement with a provider who has committed program violations, or may deny future requests for agreements.

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

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

Activities identified in ACF-402	Cause/Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)
1. Utilize the supervisory case review system (CARE) to track	1. Inadequate documentation of child care hours.	1. Monitor CARE system for documentation errors found.	1. Ongoing.

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Activities identified in ACF-402	Cause/Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)
<p>inadequate documentation errors. Expected reduction in errors of 5% per quarter.</p> <p>2. KsCares change request to end child care plans if provider of record has not been paid for two months and notify the client.</p> <p>3. Two hours of uninterrupted processing time to eliminate errors due to constant interruptions until new system development and business process re-engineering has been completed.</p> <p>4. Incorrect family share due to elimination of ARRA funding.</p>	<p>2. Failure to pay provider of record.</p> <p>3. Failure to act on reported changes.</p> <p>4. Using wrong family share.</p>	<p>2. System change request submitted and change made to system March 2011.</p> <p>3. Processing time implemented May 2011. Business Process Redesign (BPR) also will be implemented to change from a caseload system to a process management system to manage the workload.</p> <p>4. Reports to ensure action taken to change family share were reviewed.</p>	<p>2. Completed</p> <p>3. Ongoing- BPR was implemented in 15 of the largest offices in 2012 with the remaining offices converting in 2013. Processing time is being phased out as offices convert to process management.</p> <p>4. Completed .</p>

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Activities identified in ACF-402	Cause/Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)

1.4. Consultation in the Development of the CCDF Plan

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

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

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

Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
<input checked="" type="checkbox"/> <p>Representatives of general purpose local government (required)</p> <p>This may include, but is not limited to: representatives from counties and municipalities, local human service agencies, local education representatives (e.g., school districts), or local public health agencies.</p>	<p>Staff from the Lead Agency consulted with the Shawnee County Kansas Health Agency in the development of the Plan. KHDE consults with members of the Child Care Licensing Systems Improvement Team and local county representatives in the development and review of child care licensing health and safety regulations.</p>
<p>For the remaining agencies, check and describe (optional) any which the Lead Agency has chosen to consult with in the development of its CCDF Plan.</p>	
<input checked="" type="checkbox"/> <p>State/Territory agency responsible for public education</p> <p>This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education.</p>	<p>The Kansas Department of Education was consulted in the development of the Plan.</p>
<input checked="" type="checkbox"/> <p>State/Territory agency responsible for programs for children with special needs</p> <p>This may include, but is not limited to: State/Territory early intervention programs</p>	<p>The Kansas Department of Health and Environment, Part C – Infant and Toddler, and the Kansas State Department of Education, Part B of Section 619 were consulted in the</p>

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	Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs	development of the Plan.
<input checked="" type="checkbox"/>	State/Territory agency responsible for licensing (if separate from the Lead Agency)	The Kansas Department of Health and Environment (who is responsible for licensing) was consulted in the development of the Plan.
<input checked="" type="checkbox"/>	State/Territory agency with the Head Start Collaboration grant	The Kansas Head Start Collaboration grant office and staff are located within the Lead Agency, and were consulted in the development of the Plan.
<input checked="" type="checkbox"/>	Statewide Advisory Council authorized by the Head Start Act	The Children’s Cabinet has been designated by the governor to serve as the Early Childhood Advisory Council (ECAC). Participants of the statewide ECAC childhood forum were consulted in the development of the Plan.
<input checked="" type="checkbox"/>	Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services	The Kansas Enrichment Network (KEN), serving school-age/youth programs, was consulted in the development of the Plan.
<input checked="" type="checkbox"/>	State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)	The Child and Adult Food Program (CACFP) within the Kansas Department of Education was consulted in the development of the Plan.
<input checked="" type="checkbox"/>	State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant	The section within the Kansas Department of Health and Environment who are responsible for child/maternal health and home visitation programs were consulted in the development of the Plan.
<input checked="" type="checkbox"/>	State/Territory agency responsible for public health (including the agency responsible for immunizations and programs that promote children’s emotional and mental health)	The section within the Kansas Department of Health and Environment who are responsible for immunizations and children’s emotional/mental health were consulted in the development of the Plan.
<input checked="" type="checkbox"/>	State/Territory agency responsible for child welfare	The Lead Agency also houses Kansas’ child welfare division, and this division was consulted in the development of the Plan.
<input checked="" type="checkbox"/>	State/Territory liaison for military child care programs or other military child care representatives	The NACCRRRA military liaison with Kansas was consulted in the development of the Plan.
<input checked="" type="checkbox"/>	State/Territory agency responsible for employment services/workforce development	The Kansas Department of Commerce who has responsibility for employment services and workforce development was consulted in the development of the Plan.
<input checked="" type="checkbox"/>	State/Territory agency responsible for Temporary Assistance for Needy Families (TANF)	The Lead Agency is located within the same state Department as the TANF agency, and TANF staff were consulted in

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	Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
		the development of the Plan.
<input checked="" type="checkbox"/>	Indian Tribes/Tribal Organizations <input type="checkbox"/> N/A: No such entities exist within the boundaries of the State	A copy of the draft Plan was sent to Kaw Nation, Prairie Band of Potawatomi, Kickapoo, and Sac and Fox.
<input checked="" type="checkbox"/>	Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21	The Kansas Enrichment Network (KEN), serving school-age/youth programs, was consulted in the development of the Plan.
<input checked="" type="checkbox"/>	Provider groups, associations or labor organizations	A copy of the draft Plan was sent to provider groups and associations in Kansas. (Child Care Providers Coalition and the Kansas Association for the Education of Young Children.)
<input checked="" type="checkbox"/>	Parent groups or organizations	A copy of the draft Plan was sent to the parent leadership coordinator with Kansas Children's Service League (KCSL).
<input checked="" type="checkbox"/>	Local community organizations (child care resource and referral, Red Cross)	The Family Resource Center in Pittsburg, Kansas, (a community service hub for human services and is also a local child care resource and referral agency) was consulted in the development of the Plan.
<input type="checkbox"/>	Other	

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

At a minimum, the description should include:

- a) Date(s) of notice of public hearing: **Reminder** - Must be at least 20 days prior to the date of the public hearing.
- b) How was the public notified about the public hearing? Electronic notice was published in the Kansas Register, provided to local child care resource and referral agencies, provided to local licesing surveyors, child care professional organizations, other state agencies and Lead Agency local offices. Electronic notice was sent to other partners and stakeholders. Notifications of the public hearings were given at multiple stakeholder and partner meetings in which the Lead Agency participated.
- c) Date(s) of public hearing(s): June 7, 2013 **Reminder** - Must be no earlier than 9 months before effective date of Plan (October 1, 2013).
- d) Hearing site(s): Topeka, KS
- e) How was the content of the Plan made available to the public in advance of the public hearing(s)? The draft Plan was posted on the DCF website on May 1, 2013. Paper copies were made available upon request and were distributed at the public hearing.
- f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? All

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comments provided were recorded, acknowledged, and reviewed for consideration.

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

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

The Lead Agency published the draft Plan for review and comment on its public website May 1, 2013. One public hearing was held in Topeka, Kansas on June 7, 2013. Stakeholders were able to participate in person, via the internet and/or via a conference call. The Live Meeting format allowed parents, providers and early care and education partners, flexibility in attending the hearing in person or participating from their home or office. Partners of the Lead Agency were asked to help promote the public hearing's format by publicizing the dates, hearing location, registration, and Live Meeting information in their newsletters, other media and meetings. The Lead Agency has the capacity to translate the Plan into other languages, upon request.

1.5. Coordination Activities to Support the Implementation of CCDF Services

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

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

Note: Descriptions of how governments are organized for each State are provided at: http://www2.census.gov/govs/cog/all_ind_st_descr.pdf.

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

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<p>Agency/Entity (check all that apply)</p>	<p>Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services</p>	<p>Describe results expected from the coordination</p>
<p><input checked="" type="checkbox"/> Representatives of general purpose local government (required)</p> <p>This may include, but is not limited to: representatives from counties and municipalities, local education representatives, or local public health agencies.</p>	<p>Coordination between the Lead Agency and the Early Childhood Advisory Council occurs primarily through the five work groups which support ECAC’s work. The Lead Agency has representation on all groups. Also, a State Agencies Early Childhood Leadership Team, comprised of early childhood program administrators within four state agencies (DCF, Dept of Education, Department of Health & Environment, and the Children’s Cabinet) meets monthly. Two primary goals of this team: integrate the KECCS with the KS 0-5 School Readiness Framework; improve coordination (among agencies) of programs serving children from birth to after kindergarten entry. This will be done through identifying consistencies, gaps, barriers or inconsistencies among agencies, as well as collection and analysis</p>	<p>Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.</p> <p>The Advisory Council will be a sounding board for coordination and planning.</p> <p>The Kansas Early Childhood Comprehensive System plan goals will serve as the framework.</p> <p>Areas of need will be determined for planning purposes. Resources will be shared as possible. Activities and policies requiring new funding will be prioritized and implemented as funds become available.</p> <p>Five ECAC Work Groups will address the following: Professional Development Work Group activities include: Articulation Agreements, White Paper on 6 Essential Policy Areas in Professional Development, Shared Training Calendar and ASQ-3/ASQ-SE Statewide Trainings. Early Childhood Mental Health Work Group activities: All Children will have Access to ECMH Professionals, Develop Trauma-Informed Care (TIC) Training for Community Professionals, Implement TIC. Data Work Group will work on shared data bank and work</p>

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<p>Agency/Entity (check all that apply)</p>	<p>Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services</p>	<p>Describe results expected from the coordination</p> <p>Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.</p>
	<p>of early childhood data.</p>	<p>to include Adverse Childhood Experiences questions in Kansas Behavioral Risk Factor Surveillance System (BRFSS). Prevention of Child Abuse & Neglect Work Group will work to Implement Collective Impact in Targeted Communities. Early Learning Guidelines Work Group will work to expand Developmental Screening Using Common Instruments.</p> <p>Through the State Agencies EC Leadership Team, recommendations will go to ECAC for streamlined, coordinated improvements which will help create efficiency among state agencies policies and practices, resulting in children and families being better served.</p>
<p><input checked="" type="checkbox"/> State/Territory agency responsible for public education (required)</p> <p>This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education;</p>	<p>The Kansas State Department of Education (KSDE) will be utilized to meet this requirement. The Lead Agency will exchange information and communicate with KSDE as needs occur.</p>	<p>Through the State Agencies EC Leadership Team, recommendations will go to ECAC for streamlined, coordinated improvements which will help create efficiency among state agencies policies and practices, resulting in children and families being</p>

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	Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination
			Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies. better served.
<input checked="" type="checkbox"/>	Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services (required)	The Lead Agency coordinates with and partially funds the Interagency Coordinating Council (Part C) and the Kansas Enrichment Network (school age) by meeting regularly.	The goals are to share information, eliminate duplication, and more smoothly streamline coordination of services.
<input checked="" type="checkbox"/>	State/Territory agency responsible for public health (required) This may include, but is not limited to, the agency responsible for immunizations and programs that promote children’s emotional and mental health	Quarterly meetings are held with the Kansas Department of Health and Environment, and the Lead Agency.	The goals are to share information, changes, accept suggestions, problem-solve, and long-range plan.
<input checked="" type="checkbox"/>	State/Territory agency responsible for employment services / workforce development (required)	The Early Childhood Associate Apprenticeship Program (ECAAP) in the Kansas Department of Commerce is funded with CCDF quality dollars. In addition to the ECAAP program, Commerce has developed a program called “School-to-Registered Apprenticeship” which is at the high school level. It is a work-based learning program which clearly defines career paths between high school, community college and employment.	The goals are to produce motivated students beginning in high school who are prepared to be career-long learners by offering employment and financial assistance. This enables employers to build and maintain a skilled workforce.

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	Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
<input checked="" type="checkbox"/>	State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) including local human service agencies(required)	This is accomplished through monthly Policy Planning Meetings within the Economic and Employment Services Division. Since the Lead Agency also administers TANF, close communication occurs between staff.	The goals are to share information, problem solving, develop policy and long range plans.
<input checked="" type="checkbox"/>	Indian Tribes/Tribal Organizations (required) <input type="checkbox"/> N/A: No such entities exist within the boundaries of the State	Regular quarterly meetings are held between child care subsidy staff and representatives of the following tribal organizations: Tribal Social Services, Prairie Band of the Potawatomi Nation, Kickapoo Nation and United Tribes.	Goals include resolution of individual client issues, joint information exchange, and coordinated planning for future changes.
For the remaining agencies, check and describe (optional) any with which the Lead Agency has chosen to coordinate early childhood and school-age service delivery			
<input checked="" type="checkbox"/>	State/Territory agency with the Head Start Collaboration grant	The Lead Agency houses the Head Start State Collaboration Office, and it is integrated into the Child Care Section.	Goals include information exchange and coordinated planning.
<input type="checkbox"/>	State/Territory agency responsible for Race to the Top – Early Learning Challenge (RTT-ELC) <input checked="" type="checkbox"/> N/A: State/Territory does not participate in RTT-ELC		
<input checked="" type="checkbox"/>	State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)	Quarterly meetings are held.	Goals include resolution of individual client issues, joint information exchange, and coordination planning for future changes.

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	Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
<input checked="" type="checkbox"/>	State/Territory agency responsible for programs for children with special needs This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs	The Lead Agency is represented in quarterly meetings of the State Interagency Coordinating Council (ICC). The Lead Agency and the Head Start State Collaboration Office meet with Parts B and C.	Goals are to share information and develop plans.
<input checked="" type="checkbox"/>	State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant	The Lead Agency is represented on a taskforce.	Goals are to share information and develop plans.
<input checked="" type="checkbox"/>	State/Territory agency responsible for child welfare	The Lead Agency is part of the same State department responsible for child welfare.	Goals are to share information and develop plans.
<input checked="" type="checkbox"/>	State/Territory liaison for military child care programs or other military child care representatives	Kansas is one of 13 states participating in the DoD funded Military Child Care Liaison Project. The Lead Agency has met with the Liaison assigned to Kansas to assist in identifying current state efforts, priorities, and quality initiatives that impact the ability of military families to access high quality, off-installation child care services in their communities. The Lead Agency will collaborate with the Liaison to coordinate efforts in the planning and development of	The goals are increased awareness of the child care needs of military families; alignment of plans, goals and priorities of mutual interest; opportunities to strengthen the quality of child care in the community and the professional development system; opportunities to improve licensing, requirements, and efficient and effective oversight; and access to affordable, high quality, off-installation child care for military families in their communities.

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	Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
		priorities and quality initiatives of mutual interest.	
<input checked="" type="checkbox"/>	Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21	The Lead Agency Coordinates with the Kansas Enrichment Network, the Kansas Learning First Alliance, Head Start, Early Head Start, Healty Families America, MIECHV, and Parents as Teachers to assess the need for positive youth development.	The goal is to bridge the gap by assisting those with fewer advantages in the areas of critical thinking, problem solving, creativity, science, technology, engineering and math. This begins at early childhood and continues throughout the school age years.
<input checked="" type="checkbox"/>	Local community organizations (child care resource and referral, Red Cross)	The Lead Agency funds statewide child care resource and referral services provided through Child Care Aware of Kansas®. Child Care Aware of Kansas then subcontracts with six regional child care resource and referral agencies. Mutual meetings are held in addition to frequent phone calls and emails.	The Goals is to share information and resources for families seeking child care and child care providers.
<input checked="" type="checkbox"/>	Provider groups, associations or labor organizations	The Lead Agency has an ad hoc seat on the board of the Kansas Association for the Education of Young Children.	The goal is to share information.
<input checked="" type="checkbox"/>	Parent groups or organizations	A partnership of early childhood organizations is developing a Statewide Parent Leadership	The goal is to share information.

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Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full- day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
	Council. The Council will build on the success of the Kansas Parent Leadership Conference started by the Lead Agency through the Head Start State Collaboration Office. The council will be a source of parent input and feedback for state early childhood initiatives.	
<input type="checkbox"/>	Other	

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

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

Yes. If yes,

Provide the name of the entity responsible for the coordination plan(s):
 a) The Kansas Early Childhood Comprehensive Systems (KECCS) Plan is funded by the Maternal and Child Health Bureau, Department of Health and Human Services, Health Resources and Services Administration. The Plan is administered by the Kansas Department of Health and Environment, convened by the Kansas Children’s Cabinet and Trust Fund, and managed by the Institute for Educational Research and Public Service at the University of Kansas. As the Early Childhood Advisory Council evolves, it is anticipated that the KECCS plan will continue to serve as the framework for the Council’s planning.
 b) Describe the age groups addressed by the plan(s): Birth to age five
 c) Indicate whether this entity also operates as the State Advisory Council (as authorized under the Head Start Act of 2007):

- Yes
- No

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- No
- d) Provide a web address for the plan(s), if available: www.keccs.org

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

(658D(b)(1)(D), §98.14(a)(1))

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

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

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

The Kansas Children's Cabinet provides coordination across early childhood services. In addition, the Cabinet serves as the Early Childhood Advisory Council for ages birth to five. The Lead Agency has a representative on the Cabinet. The KECCS plan mentioned above will serve as the framework for the planning efforts.

The Lead Agency coordinates independently with the Kansas Enrichment Network which oversees school aged programs.

- State Advisory Council (as described under the Head Start Act of 2007).
If yes, describe entity, age groups and the role of the Lead Agency

- Local Coordination/Council
If yes, describe entity, age groups and the role of the Lead Agency

- Other.
Describe _____

- None

1.5.4. Does the Lead Agency conduct or plan to conduct activities to encourage public-private partnerships that promote private sector involvement in meeting child care needs? (§98.16(d))

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

- No.

1.6. Child Care Emergency Preparedness and Response Plan

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

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(CCDF-ACF-IM-2011-01) located on the Office of Child Care website at:
<http://www.acf.hhs.gov/programs/occ/resource/im-2011-01>

1.6.1. Indicate which of the following best describes the current status of your efforts in this area. Check only ONE.

- Planning.** Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated and how the plan will be coordinated with other emergency planning efforts within the State/Territory.
- Developed.** A plan has been developed as of [**04/29/2009**] and put into operation as of [**04/29/2009**] if available. Provide a web address for this plan, if available: **Provided as Attachments 1.6.1 a and 1.6.1 b**
- Other. Describe:** _____

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

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

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

PART 2

CCDF SUBSIDY PROGRAM ADMINISTRATION

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

2.1. Administration of the Program

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

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

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

- Eligibility rules and policies (e.g., income limits) are set by the:
 - State/Territory
 - Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - Other. Describe: _____
- Sliding fee scale is set by the:
 - State/Territory
 - Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - Other. Describe: _____
- Payment rates are set by the:
 - State/Territory
 - Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - Other. Describe: _____

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

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

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

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Implementation of CCDF Services/Activities	Agency (Check all that apply)
Note: If different for families receiving TANF benefits and families not receiving TANF benefits, please describe: _____	<input type="checkbox"/> Local government agencies such as county welfare or social services departments <input type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input type="checkbox"/> Other. Describe. _____
Who assists parents in locating child care (consumer education)?	<input checked="" type="checkbox"/> CCDF Lead Agency <input checked="" type="checkbox"/> TANF agency <input type="checkbox"/> Other State/Territory agency. Describe. _____ <input checked="" type="checkbox"/> Local government agencies such as county welfare or social services departments <input checked="" type="checkbox"/> Child care resource and referral agencies <input checked="" type="checkbox"/> Community-based organizations <input type="checkbox"/> Other. Describe. _____
Who issues payments?	<input checked="" type="checkbox"/> CCDF Lead Agency <input checked="" type="checkbox"/> TANF agency <input type="checkbox"/> Other State/Territory agency. Describe. _____ <input type="checkbox"/> Local government agencies such as county welfare or social services departments <input type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input type="checkbox"/> Other. Describe. _____
Describe to whom is the payment issued (e.g., parent or provider) and how are payments distributed (e.g., electronically, cash, etc)	The Payment is issued to the family on an electronic “swipe” card, along with other benefits (depending upon eligibility) such as TANF cash or Supplemental Food Nutrition Assistance (formerly Food Stamps). The family then purchases child care from the provider using their electronic benefits, by authorizing an electronic transfer into the provider’s bank account.
Other. List and describe: _____	

2.2. Family Outreach and Application Process

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

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

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

- CCDF Lead Agency
- TANF offices
- Other government offices
- Child care resource and referral agencies
- Contractors
- Community-based organizations
- Public schools
- Internet (provide website): www.dcf.ks.gov

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- Promotional materials
- Community outreach meetings, workshops or other in-person meetings
- Radio and/or television
- Print media
- Other. Describe: _____

2.2.2. How can parents apply for CCDF services?

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

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

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

Lead Agencies must certify that the State/Territory will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices(658E (c)(2)(G), §98.33).

For example, memorandums of understanding with resource and referral agencies to provide consumer education to families applying for CCDF assistance, providing parents with provider lists showing licensing history and/or Quality Rating and Improvement System (QRIS) ratings, or informational brochures that address importance of quality and different care options available. The Lead Agency created a parent/provider partnership handbook. These are available on-line or in print at local DCF offices and access sites. Child Care Aware of Kansas® is the statewide contractor providing CCR&R services for Kansas. Services have been provided through an annual contract since 1996. Expected results to improve the quality and accessibility of child care, services to families, child care providers and communities include providing parents with information about the importance quality child care. Personnel of Child Care Aware administer a privately funded QRIS program in two counties. (KQRIS) which publicizes ratings of those facilities participating in the KQRIS programs in Saline and Douglas counties.

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

For example, methods used to promote upward movement in quality rating and improvement system, methods used to encourage high quality programs to participate in the subsidy program such as tiered reimbursement, or incentives used to support high quality programs in rural, suburban, urban, and low-income communities. _____ The Lead Agency through the Kansas Early Head Start program collaborates with existing child care providers in communities. These partnering providers are required to follow Head Start Performance Standards regarding staff/child ratios, professional development, learning environments, individualization, curriculum and lesson plans, and parental involvement including home visits. These providers are monitored by KEHS grantees. Results from these efforts will be utilized for future planning. The goal to develop a method to measure Parent and Family Outcomes through the use of the Protective Factor Survey. The Strengthening Families Plan works to increase protective factors by focusing on strengths and resiliency rather than on risks and deficits. Protective factors are attributes that work as a buffer for families. These factors help parents at risk for abuse to find resources and supports to help them cope more effectively. When protective factors include: Parental Resilience; Social Connections; Knowledge of Parenting and Child Development; Concrete Support in Times of Need; and Social and Emotional Competence of Children. This builds upon the current work being implemented by the Kansas Children’s Cabinet and Trust Fund Community Based Child Prevention Programs (CBCAP). The Strengthening Families Protective Factors are also utilized within the state’s Infant and Toddler Specialist network.

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

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

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- Providing information multi-lingually
- Including temporary periods of unemployment in eligibility criteria (job search, seasonal unemployment). Length of time Varies depending on notification of loss of employment)(Note: this period of unemployment should be included in the Lead Agency’s definition of working, or job training/educational program at 2.3.3).
- Other. Describe: _____
- Other. Describe: _____
- None

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

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

- Provide CCDF assistance during periods of job search. Families are required to report a job loss within 10 days. Lead Agency staff are responsible for ending child care plans and provide a 10-day notice. Because plans close at the end of a month, families may have a period up to 5 weeks in which child care benefits are available to support the parent in their job search.
- Establish two-tiered income eligibility to allow families to continue to receive child care subsidies if they experience an increase in income but still remain below 85% of State median income (SMI)
- Synchronize review date across programs. List programs:
TANF
Food Assistance _____
- Longer eligibility re-determination periods (e.g., 1 year). Describe Kansas policy allows for re-determination periods to be set for up to one year period. Re-determination periods may vary in order to synchronize review dates with TANF or Food Assistance.
- Extend periods of eligibility for families who are also enrolled in either Early Head Start or Head Start and pre-k programs. Describe _____
- Extend periods of eligibility for school-age children under age 13 to cover the school year. Describe _____
- Minimize reporting requirements for changes in family’s circumstances that do not impact families’ eligibility, such as changes in income below a certain threshold or change in employment
- Individualized case management to help families find and keep stable child care arrangements. Describe _____
- Using non-CCDF Funds to continue subsidy for families who no longer meet eligibility, such as for children who turn 13 years of age during the middle of a program year
- Other. Describe _____
- None

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

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

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

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

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

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

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

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

Available in Spanish with capacity to translate to other languages.

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

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

<http://content.dcf.ks.gov/EES/KEESM/Forms/ES-3100.pdf> _____

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

The Lead Agency requires documentation of:	Describe how the Lead Agency documents and verifies applicant information:
<input checked="" type="checkbox"/> Applicant identity	This information is documented on the application form and attested to by the applicant through the application and signature process.
<input checked="" type="checkbox"/> Household composition	Household information is documented on the application form and attested to by the applicant through the application and signature process. The applicant's statement is accepted to document household composition. This includes the relationship of household members that may be required to be included in the child care case, such as cohabiting partners.
<input checked="" type="checkbox"/> Applicant's relationship to the child	This is documented on the application form and attested to by the applicant through the application and signature process.
<input checked="" type="checkbox"/> Child's information for determining eligibility (e.g., identity, age, etc.)	This is documented on the application form. Child care hours needed outside of school schedule.
<input checked="" type="checkbox"/> Work, Job Training or Educational Program	Checks stubs or employer statements are used to document hours worked. Work/school schedule is needed to write child care plan and determine eligibility for benefits. It must be documented that adults included in the child care case are employed a minimum of 28 hours per week or a post-secondary student and employed 20 hours per week.
<input checked="" type="checkbox"/> Income	Check stubs or employer statements are used to document income. DCF requests most recent 30 days of pay stubs and 3 months of child support income received.
<input type="checkbox"/> Other. Describe _____	

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

- Time limit for making eligibility determinations. Describe length of time
Thirty days from the date the completed application is received.
- Track and monitor the eligibility determination process
- Other. Describe _____
- None

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

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- Yes. If yes, describe: _____
 No.

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

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State TANF agency in accordance with section 407(e)(2) of the Social Security Act.

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

- a) Identify the TANF agency that established these criteria or definitions:
State/Territory TANF Agency Kansas Department for Children and Families
- b) Provide the following definitions established by the TANF agency.
- "appropriate child care": A regulated facility that meets or exceeds minimum licensing regulations. A non-regulated legally exempt provider who has completed a Health and Safety Standards Checklist and maintains a facility that meets or exceeds minimum standards.
 - "reasonable distance": Total daily transport time to and from home and to the child care provider not to exceed 2 hours. If a longer transport time is generally accepted in the community, the round trip time shall not exceed the generally accepted community standards.
 - "unsuitability of informal child care": Care for which the Lead Agency would not enter into a Provider Agreement (such as a relative unwilling to care for a child; age inappropriateness, documentation of family services/protective services case histories).
 - "affordable child care arrangements": Care for which a family has the ability to pay the cost through sufficient income or assistance through the child care subsidy program.
- c) How are parents who receive TANF benefits informed about the exception to individual penalties associated with the TANF work requirements?

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- Verbally
 Other: _____

2.3. Eligibility Criteria for Child Care

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

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

- *residing with* - Living in the same household with (including living away from home if maintaining permanent residence with and continuing to function as a family member, even if maintenance provided is inadequate.) **A cohabiting partner of the applicant/caretaker must be included in the case and their income included in the family's eligibility determination and benefit level.**
- *in loco parentis* – Any person with the legal right and responsibility to act as a parent

2.3.2. Eligibility Criteria Based Upon Age

a) The Lead Agency serves children from two weeks to 13 years (may not equal or exceed age 13).

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

- Yes, and the upper age is 18 (may not equal or exceed age 19).
Provide the Lead Agency definition of *physical or mental incapacity* – A condition which impedes appropriate behavior in one or more of the following area:
Self-help skills
Cognition
Communication
Interaction with their social and/or physical environment and special assistance limitations.
- No.

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

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- Yes, and the upper age is 18 (may not equal or exceed age 19)
 No.

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

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

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

- *working* – A physical or mental activity engaged in for the purpose of remuneration as determined by the Department for Children and Families at the time of eligibility determination. Adults included in a child care case must be employed a minimum of 28 hours per week.

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

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

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

attending job training or educational program – An approved program leading to a certificate, high school diploma or equivalency, or specific skills which is a logical progression to paid employment or greater earning potential, including Bachelor or higher degrees if they will be completed within 6 months. Persons eligible for child care while attending training must be participating in TANF work programs or be employed a minimum of 20 hours per week.

- No.

2.3.4. Eligibility Criteria Based Upon Receiving or Needing to Receive Protective Services

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

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- Yes. If yes, how does the Lead Agency define “protective services” for the purposes of eligibility? Provide a narrative description below.

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

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

protective services Child care benefits may be provided to protect children who cannot protect themselves from abuse, neglect and exploitation, to enable a child to remain in the home while the parent(s) work toward rehabilitation or when the child is at risk of a health or social condition which may adversely affect the child.

- No.

b) Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

- Yes.
 No.

2.3.5. Income Eligibility Criteria

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

income – Kansas divides income into two types: earned and unearned income. Income includes money received from such sources as wages, self-employment, property rentals, pensions, benefits and contributions. There are no deductions or resource tests to determine eligibility for child care services.

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

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

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

None

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

- Children under age 18
- Children age 18 and over – still attending school
- Teen parents
- Unrelated members of household
- All members of household except for parents/legal guardians
- Other Under certain circumstances, some of these situations may not apply. Assistance planning explained in the Kansas Economic and Employment Services Manual (KEESM), Section 4400. The KEESM policy manual may be found at:
<http://content.dcf.ks.gov/ees/keesm/keesm.htm>

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The income of a cohabiting partner to the parent/caretaker is included in the eligibility determination.

None

d) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the SMI.

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	IF APPLICABLE Income Level if lower than 85% SMI	
			(c) \$/month	(d) % of SMI [Divide (c) by (a), multiply by 100]
1	3116	2648	n/a	n/a
2	4074	3463	2392	58.7
3	5033	4278	3012	59.8
4	5992	5093	3632	60.6
5	6950	5908	4251	61.2

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

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

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

Note: This information can be included in a separate table, or by placing a “/” between the entry and exit levels in the above table.

No.

f) SMI Year FFY 2013 and SMI Source http://www.acf.hhs.gov/programs/ocs/liheap/guidance/information_memoanda/im11-09.html

g) These eligibility limits in column (c) became or will become effective on: May 1, 2013.

2.3.6. Eligibility Re-determination

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- a) Does the State/Territory follow OCC's 12 month re-determination recommendation? (See Program Instruction on Continuity of Care <http://www.acf.hhs.gov/programs/occ/resource/im2011-06>)
- Yes
- No. If no, what is the re-determination period in place for most families?
- 6 months
- 24 months
- Other. Describe
- Length of eligibility varies by county or other jurisdiction. Describe _____

- b) **Does the Lead Agency coordinate or align re-determination periods with other programs?**
- Yes.
- No. If no, **check programs that the Lead Agency aligns eligibility periods with and describe the redetermination period for each.**

- Head Start and/or Early Head Start Programs. Re-determination period _____
- Pre-kindergarten programs. Re-determination period _____
- TANF. Re-determination period _____
- SNAP. Re-determination period _____
- Medicaid. Re-determination period _____
- SCHIP. Re-determination period _____
- Other. Describe _____

- c) Describe under what circumstances, if any, a family's eligibility would be reviewed prior to redetermination. For example, regularly scheduled interim assessments, or a requirement for families to report changes. Families are required to report changes in income, household composition, address, living arrangements, choice of provider, and hours of child care needed within 10 calendar days.
- d) Describe any action(s) the State/Territory would take in response to any change in a family's eligibility circumstances prior to re-determination Benefits would be increased, decreased or eligibility could end.
- e) Describe how these policies are implemented in a family-friendly manner that promotes access and continuity of care for children. (See Information Memorandum on Continuity of Care for examples <http://www.acf.hhs.gov/programs/occ/resource/im2011-06>). RE-DETERMINATION: Kansas provides for a 12 month re-determination per period. Families are required to report a job loss within 10 days. Upon notice lead agency staff are responsible for ending the child care plans. JOB SEARCH: Because plans close at the end of a month, families may

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have a period of time up to about 5 weeks in which child care benefits are available to support the parent in their job search, while providing continuity of care for the child. CHILD SICK OR VACATION DAYS: Kansas benefits are based on estimated hours of care needed (based on parent’s work schedule and child’s school schedule if applicable) and are paid prospectively on the first of each month. Kansas does not attempt to estimate or reduce benefits for parent/child sick time or other time off. Regulated providers are required to use a parent/provider contract. Other providers are also encouraged to use such contracts. The contract is to spell out the terms of payment, which would include the provider’s policy on payment for their own vacation, sick time or other time off. Parents are responsible to pay the providers for all charges as agreed upon between the parents and providers. If this exceeds the amount of the child care assistance benefits, it is the responsibility of the parents to pay any difference from their own funds. INFORMATION SHARING WITH OTHER BENEFIT PROGRAMS: DCF aligns child care eligibility re-determination periods with both the TANF and SNAP programs in Kansas.

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

- Yes. If yes, describe _____
- No.

2.3.7. Waiting Lists

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

- Lead Agency currently does not have a waiting list and:
 - All eligible families *who apply* will be served under State/Territory eligibility rules
 - Not all eligible families *who apply* will be served under State/Territory eligibility rules
- Lead Agency has an active waiting list for:
 - Any eligible family who applies when they cannot be served at the time of application
 - Only certain eligible families. Describe those families: _____
- Waiting lists are a county/local decision. Describe _____
- Other. Describe _____

2.3.8. Appeal Process for Eligibility Determinations

Describe the process for families to appeal eligibility determinations Families have the right to appeal eligibility determinations, and requests for appeal hearings must be received within 33 days (30 days, plus 3 days mail time) of the date the notice of action was mailed. An appeal must be in writing.

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The request for hearing is sent to the Administrative Hearings section of the Department of Administration. DCF also submits a summary of the action taken, including the reasons for the action, policy manual references supporting the action and copies of all documents used in making the decision. The hearing is scheduled by the Administrative Hearings section, and during the hearing, both DCF and the family present their arguments and evidence. A decision is rendered by the hearing officer no later than 90 days after the date of receipt of the request for hearing. The decision is sent to both DCF and the family.

Either party may request a rehearing to submit new evidence or a review of the decision by the State of Appeals Committee within 18 days (15 days plus 3 days mail time).

The decision of the State Appeals Committee review is final and binding upon the client and DCF on the date of the decision.

2.4. Sliding Fee Scale and Family Contribution

The statute and regulations require Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care (658E(c)(3)(B) §98.42).

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

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

Yes. Effective Date May 1, 2013.

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

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

Check only one option.

State Median Income, Year: _____

Federal Poverty Level, Year: 2013

Income source and year varies by geographic region. Describe income source and year: _____

Other. Describe income source and year: _____

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

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

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

If the Lead Agency checked more than one of the options above, describe _____

2.4.4. Will the Lead Agency use other factors in addition to income and family size to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

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

2.4.5. The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size. (§98.42(c)).

Select **ONE** of these options.

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

- ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
- NO families with income at or below the poverty level for a family of the same size ARE required to pay a fee. The poverty level used by the Lead Agency for a family of 3 is: \$1628
- SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The Lead Agency waives the fee for the following families: _____

2.5. Prioritizing Services for Eligible Children and Families

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

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

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

How will the Lead Agency prioritize CCDF services for:	Eligibility Priority (Check only one)	Is there a time limit on the eligibility priority or guarantee?	Other Priority Rules
<p>Children with special needs</p> <p>Provide the Lead Agency definition of <i>Children with Special Needs</i> A child with developmental disabilities, mental retardation, emotional disturbance, sensory or motor impairment, or significant chronic illness who requires special health surveillance or specialized programs, interventions, technologies, or facilities.</p>	<p><input type="checkbox"/> Priority over other CCDF-eligible families</p> <p><input checked="" type="checkbox"/> Same priority as other CCDF-eligible families</p> <p><input type="checkbox"/> Guaranteed subsidy eligibility</p> <p><input type="checkbox"/> Other. Describe _____</p>	<p><input type="checkbox"/> Yes. The time limit is: _____</p> <p><input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Different eligibility thresholds. Describe _____</p> <p><input checked="" type="checkbox"/> Higher rates for providers caring for children with special needs requiring additional care</p> <p><input type="checkbox"/> Prioritizes quality funds for providers serving these children</p> <p><input type="checkbox"/> Other. Describe _____</p>

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

2.5.2. How will CCDF funds be used to provide child care assistance to meet the needs of families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF?

(658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

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

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

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

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

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Term(s)	Definition(s)
Priority #1	TANF families including those participating in Work Programs, families participating in Food Stamp Employment and Training, and Tribal Jobs participants.
Priority #2	Families receiving Social Service Child Care.
Priority #3	Families no longer eligible for TANF but who are still receiving child care while transitioning to employment, whose income is at or below 185% of the federal poverty level.
Priority #4	Teen parents completing high school/GED.
Priority #5	Employed families whose income is at or below 185% of the federal poverty level including special needs children.
Eligibility Condition: Kansas eligibility policies and tiered penalties for non-cooperation with Child Support Enforcement.	Kansas applies tiered penalties for non-cooperation with Child Support Services. Cooperation with Child Support Enforcement is required to receive child care subsidy assistance, and non-cooperation by a TANF or Child Care recipient results in ineligibility for TANF and Child Care for a minimum of three months for the first time, six months for the second time, one year for the third time, and ten years for the fourth or subsequent non-cooperation event.
Kansas Eligibility Condition: Fraud	Kansas applies a lifetime disqualification penalty to TANF and Child Care households found guilty of fraud in one or both programs.

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

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

CCDF Plan Effective Date: October 1, 2013

Amended Effective: _____

2.6.1. Child Care Certificates

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

- Before parent has selected a provider
- After parent has selected a provider

Other. Describe The Lead Agency staff will determine if the provider selected by the parent is enrolled with the DCF in order for child care plans to be written and benefits to be issued for the provider's services. If the chosen provider is already enrolled, the Plan is completed and benefits are approved beginning the date agreed upon by the provider, parent and DCF application date or date of need. If the chosen provider is not currently authorized/enrolled, paperwork is made available to the provider so the chosen provider can be considered for enrollment in the subsidy program. Every attempt is made to have the effective date of the provider enrollment cover the entire time the family would be eligible for benefits.

Ongoing benefits are issued to eligible families on the first day of each month. Parents and providers decide how much and when benefits are transferred for payment throughout the month. This method of benefit issuance (similar to other federal programs) allows subsidized parents to purchase child care from providers in accordance with provider policies as private pay parents do. Eligible families may change providers at any time and must notify DCF. If needed, parents can use benefits to pay any enrolled provider (i.e., substitute care, switching mid-month). Parents are required to report ongoing changes to their case to insure accuracy of the benefit level and for federal reporting requirements.

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

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

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

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

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

2.6.2. Child Care Services Available through Grants or Contracts

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

- Yes. If yes, **describe** the type(s) of child care services available through grants or contracts, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts:
 1. Kansas Early Head Start (KEHS) grantees provide enhanced child care services for eligible families. KEHS is a community-based program which provides comprehensive child and family development services to low income pregnant women and families with children through age of three.
 2. Kansas Early Head Start grants were awarded in a competitive process in 1998.
 3. KEHS programs are required to offer families a choice of a family child care home(s) or child care center. To accomplish this, KEHS partner with existing community-based providers.

No. If no, skip to 2.6.3.

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

- Increase the supply of specific types of care
 - Programs to serve children with special needs

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- Wrap-around or integrated child care in Head Start, Early Head Start, pre-k, summer or other programs
- Programs to serve infant/toddler
- School-age programs
- Center-based providers
- Family child care providers
- Group-home providers
- Programs that serve specific geographic areas
 - Urban
 - Rural
- Other. Describe _____
- Support programs in providing higher quality services
- Support programs in providing comprehensive services
- Serve underserved families. Specify: _____
- Other. Describe _____

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

- Yes.
- No, and **identify** the localities (political subdivisions) and services that are not offered: Kansas Early Head Start grantees are located in 47 of 105 counties in Kansas.

d) How are payment rates for child care services provided through grants/contracts determined? Payment rates are determined by Kansas Early Head Start grantees and community rates.

e) What is the estimated proportion of direct services that will be available for child care services through grants/contracts? Approximately 25% of grant funds.

2.6.3. How will the Lead Agency inform parents and providers of policies and procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds? (658E(c)(2)(B), §98.31)

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

- Signed declaration
- Parent Application
- Parent Orientation
- Provider Agreement
- Provider Orientation
- Other. Describe: This requirement is satisfied for regulated providers by the Kansas Department of Health and Environment (KDHE), Early Care & Youth Programs Section, Child Care Licensing & Registration Program, with

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partial funding from the Lead Agency. KDHE does this through state administrative regulations (K.A.R.s) which require parental access:

K.A.R. 28-4-123 Parental Access to Child Care Facilities.

Each parent or guardian or a child enrolled in a day care facility or preschool as defined in K.S.A. 65-517, K.A.R. 28-4-113 or K.A.R. 28-4-420 shall have access to the premises during all hours of operation. Each residential facility as defined in K.A.R. 28-4-311 and K.A.R. 28-4-268 shall develop a plan for parental visitation in cooperation with the legal custodian if different from the parent.

K.A.R. 28-4-583. Access to the premises; safety of off-premises activities.

(a) Access to the premises. Each operator shall give each custodial parent or other adult responsible for a child or youth attending the program immediate access to the premises during all hours of operation.

The requirement to allow parents access to their children while the children are in care is also specified in the DCF Child Care Provider Handbook and the Parent-Provider Partnership which is a handbook given to parents.

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

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

- No
- Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all limits the Lead Agency will establish.
 - Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act
 - Restricted based on provider meeting a minimum age requirement
 - Restricted based on hours of care (certain number of hours, non-traditional work hours)
 - Restricted to care by relatives
 - Restricted to care for children with special needs or medical condition
 - Restricted to in-home providers that meet some basic health and safety requirements
 - Other. Describe _____

2.6.5. Describe how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available to the public on request. **(658E(c)(2)(C), §98.32)** Through a Memorandum of Agreement (MOA) with the Kansas Department of Health and Environment (KDHE) it is expected that KDHE will maintain a record of substantiated facility complaints, including parental complaints. This information is made available to the public on

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written request, and is made available in accordance with the Kansas Open Records Act. The complaint system includes:

- A. Policies on investigations of all complaints of non-compliance, including anonymous complaints.
- B. Maintenance of records.
- C. A fair hearing procedure before substantiation.
- D. A system which provides rebuttals or updates by providers.
- E. A system which provides for confidentiality of the complaint.
- F. Maintenance of a child abuse/neglect registry through the Lead Agency.

The cost for an open record request is \$0.25 per page plus \$7.00 per administrative hour. The cost is waived for requests that are under \$10 or for requests made by the original complainant. In order to request a compliance check from KDHE, parents are requested to provide the following information in writing:

Name and address of the child care facility.

Type of information requested (Notices of Survey Findings, Administrative Orders).

Time period needed.

Requestor's full name, complete mailing address, and email or telephone number.

The Client and Provider Portal (CAPP) Provider Management System provides the general public the ability to search Kansas child care provider information for compliance data. This website can be found at <http://www.kdheks.gov/bcclr/>

2.7. Payment Rates for Child Care Services

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

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

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

Yes. Effective Date: May 1, 2013

http://content.dcf.ks.gov/ees/KEESM/Appendix/C-18_ProviderRateCht.pdf

No. If no, attach other payment rates and their effective date(s) as **Attachment 2.7.1a, 2.7.1b**, etc.

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

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

Track and monitor the payment process

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Other. Describe: Providers must be enrolled in the subsidy program by the Lead Agency. Once approved, the provider must enroll with the EBT (Electronic Benefits Transfer) contractor in order to receive payments from eligible parents.

The Lead Agency staff will determine if the provider selected by the parent is enrolled with the Lead Agency in order for Child Care Plans to be written and benefits to be issued for the provider's services. If the chosen provider is already enrolled, the Plan is completed and benefits are approved beginning the date agreed upon by the provider, parent and agency application date, or date of need. If the chosen provider is not currently authorized/enrolled, paperwork is made available to the parent/provider so the chosen provider can be considered for enrollment in the subsidy program. Every attempt is made to have the effective date of the provider enrollment cover the entire time the family would be eligible for benefits.

Ongoing benefits are issued to eligible families on the first day of each month. Parents and providers decide how much and when benefits are transferred for payment throughout the month. This method of benefit issuance (similar to other federal programs) allows subsidized parents to purchase child care from providers in accordance with provider policies as private pay parents do. Eligible families may change providers at any time and must notify the agency. If needed, parents can use benefits to pay any Lead Agency providers (i.e., substitute care, switching mid-month). Parents are required to report ongoing changes to their case to insure accuracy of the benefit level and for federal reporting requirements.

None

2.7.3. Market Rate Survey

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

- a) Provide the month and year when the local Market Rate Survey(s) was completed (§98.43(b)(2)): April 2013.
- b) Provide a **summary of the results** of the survey. The April 2013 Market Rate Survey can be found at:
http://www.dcf.ks.gov/services/ees/Documents/Child_Care/Provider_Market_Rate_Study.pdf

The summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

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

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

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

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

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

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

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2.7.4a – Highest Rate Area (Centers)	(a) Monthly Payment Rate at the 75th percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed Center Infants (11 months)	\$1,141.82	\$870.98	25 th – 30 th
Full-Time Licensed Center Preschool (59 months)	\$761.86	\$629.37	30 th – 35 th
Full-Time Licensed Center School-Age (84 months)	\$627.42	\$578.70	45 th – 50 th

2.7.4b – Lowest Rate Area (Centers)	(a) Monthly Payment Rate at the 75th percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed Center Infants (11 months)	\$450.10	\$473.49	80 th – 85 th
Full-Time Licensed Center Preschool (59 months)	\$405.29	\$403.34	70 th – 75 th
Full-Time Licensed Center School-Age (84 months)	\$374.11	\$350.73	60 th – 65 th

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

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

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

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

2.7.4c – Highest Rate Area (FCC)	(a) Monthly Payment Rate at the 75th percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)	\$711.20	\$617.67	45 th – 50 th
Full-Time Licensed FCC Preschool (59 months)	\$656.64	\$535.84	35 th – 40 th
Full-Time Licensed FCC School-Age (84 months)	\$656.64	\$535.84	35 th – 40 th

2.7.4d – Lowest Rate Area (FCC)	(a) Monthly Payment Rate at the 75th percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)	\$413.08	\$362.42	45 th – 50 th
Full-Time Licensed FCC Preschool (59 months)	\$374.11	\$335.14	45 th – 50 th
Full-Time Licensed FCC School-Age (84 months)	\$374.11	\$335.14	45 th – 50 th

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

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- a) Describe how license-exempt center payment rates are set: Rates are the same as licensed center due to the fact they are regulated by other entities.
- b) Describe how license-exempt family child care home payment rates are set: Family child care homes licensed by border states utilized by Kansas families are paid the same rate as family child care homes licensed in Kansas. Approved out of home relative providers' rates have remained the same since February 1, 2005 and were calculated using 65% of the rate for registered providers in Kansas. Registered providers' rates (whose category of care no longer exists in Kansas) at that time were set at the 60 percentile of the 2000 market analysis.
- c) Describe how license-exempt group family child care home payment rates are set: Group family child care homes licensed by border states utilized by Kansas families are paid the same rate as group family child care homes licensed in Kansas.
- d) Describe how in-home care payment rates are set: In home care is paid at a flat rate of \$1.72 an hour statewide for all children in this type of care. This rate has been in effect since October 1, 2004 and continues today.

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

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

- Differential rate for nontraditional hours. Describe _____
- Differential rate for children with special needs as defined by the State/Territory. Describe The Lead Agency provides an enhanced benefit rate to purchase care for a child with a physical, mental, or emotional disability if that child requires care above and beyond typical care for a child of that age.
- Differential rate for infants and toddlers. Describe _____
- Differential rate for school-age programs. Describe _____
- Differential rate for higher quality as defined by the State/Territory. Describe _____
- Other differential rate. Describe _____
- None.

Reminder - CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. In the next three questions, Lead Agencies are asked to describe how their payment policies reflect the affordable copayments for

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families' provision of equal access (i.e., minimizing additional fees to parents), how payment practices are implemented consistent with the general child care market to be fair to providers (see Information Memorandum on Continuity of Care for examples <http://www.acf.hhs.gov/programs/occ/resource/im2011-06>), and the summary of facts describing how payment rates are adequate to ensure equal access to the full range of providers.

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

- Allows providers to charge the difference between the maximum reimbursement rate and their private pay rate
- Pays for provider fees (e.g., registration, meals, and supplies). Describe: The Lead Agency will provide assistance with payment of enrollment fees, providing \$10 per child per year with a maximum of \$25 for all children in the household.
- Policies vary across region, counties and or geographic areas. Describe _____
- Other. Describe _____

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

- a) Number of absent days allowed. Describe _____ Kansas issues benefits to parents via an EBT card account. Payment to the provider is made by the parent in accordance with their parent/provider contract. Payment policies regarding absent days are between the parent and provider, and are expected to be the same for DCF families and private pay families.
- b) Paying based on enrollment. Describe _____ None
- c) Paying on the same schedule that providers charge private pay families (e.g., hourly, weekly, monthly) _____ Payment to the provider is made by the parent in accordance with their parent/provider contract. Payment policies regarding payment schedules are between the parent and provider, and are expected to be the same for DCF families and private pay families.
- d) Using electronic tools (automated billing, direct deposit, EBT cards, etc.) to make provider payments. Describe _____ Benefits are issued to parents via an EBT card account. Parents transfer benefits electronically to an approved provider's bank account to pay for services.

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

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

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

The Lead Agency trains its field staff about the full range of child care choices available to parents which include regulated centers, family child care and group homes, relative and in-home care. The expected result is that parents will have more options in choosing child care.

The Lead Agency created a parent/provider partnership handbook which provides information regarding child care choices. These are available on-line or in print at local offices.

The resource and referral call centers provide parents with information on choices for child care.

Through the Electronic Benefit Payment System, parents have access to a full month's child care benefit based on hours of need, at the beginning of the month. This allows parents to negotiate payment terms with providers in the same way as a private pay parent.

The Lead Agency will initiate the enrollment process with any eligible provider who is not currently enrolled but is chosen by the parent.

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

The Lead Agency, through a contractor, completed its most recent market rate analysis in April 2013. Payment rate data was provided by Child Care Aware of Kansas and analyzed by Mercer Government Human Services Consulting Firm based in Minneapolis, MN. This analysis was not based on a random sample, but instead used rates from all regulated providers reported to the resource and referral agencies by child care providers.

All licensed child care facilities, which are regulated through the Kansas Department of Health and Environment, are entered into the Child Care Aware of Kansas database which is a subsystem of NACCRRRA-ware. Each local resource and referral agency enters all facilities within their Service Delivery Area. This database is updated on an on-going basis at each resource and referral agency.

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Based on the April 2013 analysis completed by Mercer, benefit rates state wide represent an average of the 35th to 40th percentile for licensed child care centers, and the 45th to 50th percentile for licensed family child care providers, with overall rates running at the 47th percentile. Fiscal limitations continue to prevent an increase in benefit rates. Providers are not limited to charging subsidized parents the subsidy rate and can make up any difference between the subsidy rate and their private pay rate by charging the family the difference. However, providers may not charge subsidized families more than they charge private pay families. Many providers do, however, limit their charges to subsidized families to the DCF subsidy benefit rate.

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

The Lead Agency's Income and Family Share Schedule has 11 levels. This assures families a more gradual increase in their family share deduction for child care.

The income amounts are adjusted annually to coincide with the changes in the Federal Poverty Level (FPL).

As a percent of household gross income, family share deductions are less than 10%.

The family's assigned family share ranges from \$0 to \$243 per month for a family of three based on their monthly gross income. The family share deduction also increases with the increase in income.

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

2.8 Goals for the next Biennium

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

What are the Lead Agency's goals for the administration of the CCDF subsidy program in the coming Biennium? For example, what progress does the State/Territory expect to make on continuing improved services to parents and

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providers, continuity of care for children, improving outreach to parents and providers, building or expanding information technology systems, or revising rate setting policies or practices).

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

Goal 1 – Increase the percentage of child care assistance applications received on line through the CAPP Portal by September 30, 2015.
Goal 2 -
Goal 3 -
Goal 4 -
Goal 5 -

PART 3
HEALTH AND SAFETY AND QUALITY IMPROVEMENT ACTIVITIES

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

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

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

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

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

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submitted until December 31, 2014.

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

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

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

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

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

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

Definition: Licensing requirements are defined as regulatory requirements, including registration or certification requirements established under State, local, or tribal law, necessary for a provider to legally operate and provide child care services in a State or locality (§98.2). This does not include registration or certification

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requirements solely for child care providers to be eligible to participate in the CCDF program. Those requirements will be addressed in 3.1.2.

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

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

Yes.

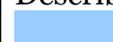
No. Please identify the State or local (if applicable) entity/agency responsible for licensing. Kansas Department of Health and Environment

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

Expected results are to assure foundational health and safety standards in Kansas child care facilities. An agreement with the Kansas Department of Health and Environment Child care Licensing Program is reviewed annually. The agreement outlines activities to be provided for compliance with licensing and regulatory requirements. Regulatory improvements are made to State operations to keep up with growing program demands, to meet the need for timeliness of action and to respond effectively to the public or other agencies. Regulatory improvements are also made through aid to local counties to supplement funding for child care regulatory work at the local level. Funding improves effectiveness at the local level by enabling counties to provide additional services and staff as well as provide a consistent and comprehensive regulatory program. Funds to KDHE supplement, not supplant, levels of state and local expenditures for child care licensing.

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

	Center-Based Child Care	Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	Family Child Care	In-Home Care <input checked="" type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory.
Yes, for all providers in this category	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, for some providers in this category	Describe <u>Centers on tribal lands or federal property are not required to be licensed.</u>	Describe <u>A provider caring only for related children for example a grandmother or aunt, or a provider caring for no more than 2 unrelated children for no more than a combined total of 20 hours weekly are not required to be licensed.</u>	Describe <u>A provider caring only for related children for example a grandmother or aunt, or a provider caring for no more than 2 unrelated children for no more than a combined total of 20 hours weekly are not required to be licensed.</u>	Describe _____
No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	Describe 	Describe 	Describe 	Describe 

d) CCDF identifies and defines four categories of care: child care centers, family child care homes, group child care homes and in-home child care providers (§98.2). The CCDF definition for each category is listed below. For

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each CCDF category of care, please identify which types of providers are subject to licensing and which providers are exempt from licensing in your State/Territory in the chart below. **Note: OCC recognizes that each State/Territory identifies and defines its own categories of care. OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care but consistent with your reported 801 data.**

CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
Center-Based Child Care	Center-based child care provider is defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.	Describe which types of center-based settings are subject to licensing in your State/Territory <u>Child Care Centers, Preschools, School Age Programs and Drop in Programs.</u>	Describe which types of center-based settings are exempt from licensing in your State/Territory Centers on tribal lands or federal property For example, some jurisdictions exempt school-based centers, centers operated by religious organizations, summer camps, or Head Start programs.
Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	Group home child care provider is defined as two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.	Describe which types of group homes are subject to licensing <u>A provider caring for more than 2 unrelated children or one or two for more than a combined total of 20 hours weekly are required to be licensed.</u>	Describe which types of group homes are exempt from licensing <u>A provider caring only for related children for example a grandmother or aunt, or a provider caring for no more than 2 unrelated children for no more than a combined total of 20 hours weekly are not required to be licensed.</u>
Family Child Care	Family child care provider is defined as one individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the	Describe which types of family child care home providers are subject to licensing <u>A provider caring for more than 2 unrelated children or one or two for more than a combined total of 20 hours weekly are required to be licensed.</u>	Describe which types of family child care home providers are exempt from licensing <u>A provider caring only for related children for example a grandmother or aunt, or a provider caring for no more than 2 unrelated children for no more</u>

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CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
	nature of the parent(s)'s work. Reminder - Do not check if family child care home providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.		<u>than a combined total of 20 hours weekly are not required to be licensed.</u>
In-Home Care	In-home child care provider is defined as an individual who provides child care services in the child's own home. Reminder - Do not respond if in-home child care providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.	<input checked="" type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory. Describe which in-home providers are subject to licensing 	Describe which types of in-home child care providers are exempt from licensing <u>Kansas law does not regulate child care provided in the child's own home; the provider and parent sign a self assessment checklist verifying the health and safety standards of the home have been discussed.</u>

Note: In lieu of submitting or attaching licensing regulations to certify the requirements of §98.40(a)(1), Lead Agencies may provide their licensing regulations to the National Resource Center for Health and Safety in Child Care and Early Education. Please check the NRCKid's website at <http://nrckids.org/CFOC3> to verify the accuracy of your licensing regulations and provide any updates to the National Resource Center. **Check this box to indicate that the licensing requirements were submitted and verified at NRCKid's.**

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

* American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. (2011) *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd Edition.* Elk Grove Village, IL: American Academy of

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Pediatrics; Washington, DC: American Public Health Association. Available online: <http://nrckids.org/CFOC3>

Indicator	For each indicator, check all requirements for licensing that apply, if any.			
	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care
<p>Do the licensing requirements include child: staff ratios and group sizes?</p> <p>If yes, provide the ratio for age specified.</p>	<p><input checked="" type="checkbox"/> Yes, Child: staff ratio requirement</p> <p>Infant ratio (11 months): Infant ratio 2 weeks to 12 months requires a 1:3 staff to child ratio with a maximum group size of 9. 2 weeks to 6 years requires 1:4 staff to child ratio (with a maximum of 2 infants) with a maximum group size of 8 (maximum of 4 infants)</p> <p>Toddler ratio (35 months): 12 months to 2 1/2 years requires 1:5 staff to child ratio with a maximum group size of 10. 2 to 3 years requires 1:7 staff to child ratio with a maximum group size of 14. 2 1/2 to school age requires a 1:10 staff to child ratio with a</p>	<p><input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.</p> <p><input checked="" type="checkbox"/> Yes, Child: staff ratio requirement</p> <p>Infant ratio (11 months): Under 18 months maximum is 1 child, with up to 8 children aged 18 months to 5 years of age, with up to 3 children aged 5 to 11, not to exceed a maximum of 12 children of any ages.</p> <p>Under 18 months maximum is 2 children, with up to 7 children aged 18 months to 5 years of age, with up to 3 children 5 to 12, not to exceed a maximum of 12 children.</p> <p>Under 18 months, maximum of 3 children, with up to 6 children aged 18 months to 5 years of age, with up to 3 children 5 years of age to 12, not to exceed a maximum of 12 children of any ages.</p>	<p><input checked="" type="checkbox"/> Yes, Child: staff ratio requirement. List ratio requirement by age group: One Adult: No children under 18 months, with up to 7 children aged 18 months to five years of age with up to 3 children aged 5 to 11, not to exceed a maximum of 10 children of any ages.</p> <p>Under 18 months maximum is 1 child, with up to 5 children aged 18 months to 5 years of age, with 4 children aged 5 to 12, not to exceed a maximum of 10 children of any ages.</p> <p>Under 18 months maximum is 2 children with up to 4 children aged 18 months to 5 years of age with up to 3 children aged 5 to 12 years of age, not to</p>	<p><input type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)</p> <p><input type="checkbox"/> Yes, Child: staff ratio requirement. List ratio requirement by age group:</p> <p><input checked="" type="checkbox"/> No ratio requirements.</p> <p><input type="checkbox"/> Yes, Group size requirement. List ratio requirement by age group</p> <p><input checked="" type="checkbox"/> No group size requirements.</p>

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Indicator	For each indicator, check all requirements for licensing that apply, if any.			
	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care
	<p>maximum group size of 20.</p> <p>Preschool ratio (59 months): 3 to school age requires 1:12 staff to child ratio with a maximum group size of 24.</p> <p>Kindergarten enrollees require 1:14 staff to child ratio with a maximum group size of 28. School age requires 1:16 staff child ratio with a maximum group size of 32.</p> <p><input type="checkbox"/> No ratio requirements.</p> <p><input checked="" type="checkbox"/> Yes, Group size requirement Infant group size (11 months): Infant ratio 2 weeks to 12 months requires a 1:3 staff to child ratio with a maximum group size of 9. 2 weeks to 6 years requires 1:4 staff to child ratio (with a maximum of 2</p>	<p><input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.</p> <p>Under 18 months maximum is 4 children, with up to 4 children aged 18 months to 5 years of age, with up to 2 children aged 5 to 12, not to exceed a maximum of 10 children of any ages.</p> <p>Toddler ratio (35 months): see above</p> <p>Preschool ratio (59 months): see above</p> <p><input type="checkbox"/> No ratio requirements.</p> <p><input checked="" type="checkbox"/> Yes, Group size requirement Infant group size (11 months): Under 18 months maximum is 1 child, with up to 8 children aged 18 months to 5 years of age, with up to 3 children aged 5 to 11, not to exceed a maximum of 12 children of any ages.</p> <p>Under 18 months maximum is 2 children, with up to 7 children aged 18 months to 5 years of age, with up to 3 children 5 to 12, not</p>	<p>exceed a maximum of 9 children of any ages.</p> <p>Under 18 months maximum is 3 children, with up to 3 children aged 18 months to 5 years, with up to 2 children aged 5 to 12 years of age, not to exceed a maximum of 8 children of any ages.</p> <p><input type="checkbox"/> No ratio requirements.</p> <p><input checked="" type="checkbox"/> Yes, Group size requirement. List ratio requirement by age group. One Adult: No children under 18 months, with up to 7 children aged 18 months to five years of age with up to 3 children aged 5 to 11, not to exceed a maximum of 10 children of any ages.</p> <p>Under 18 months maximum is 1 child, with up to 5 children aged 18 months to 5 years of age, with 4 children aged 5 to 12, not to exceed a</p>	<p><input type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)</p>

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Indicator	For each indicator, check all requirements for licensing that apply, if any.			
	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care
	<p>infants) with a maximum group size of 8 (maximum of 4 infants). Toddler group size (35 months): 12 months to 2 ½ years requires 1:5 staff to child ratio with a maximum group size of 10. 2 to 3 years requires 1:7 staff to child ratio with a maximum group size of 14. 2 ½ to school age requires a 1:10 staff to child ratio with a maximum group size of 20.</p> <p>Preschool group size (59 months): 3 to school age requires 1:12 staff to child ratio with a maximum group size of 24.</p> <p>Kindergarten enrollees require 1:14 staff to child ratio with a maximum group size of 28.</p> <p>School age requires 1:16 staff child ratio with a maximum group size of 32.</p>	<p><input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.</p> <p>to exceed a maximum of 12 children.</p> <p>Under 18 months, maximum of 3 children, with up to 6 children aged 18 months to 5 years of age, with up to 3 children 5 years of age to 12, not to exceed a maximum of 12 children of any ages.</p> <p>Under 18 months maximum is 4 children, with up to 4 children aged 18 months to 5 years of age, with up to 2 children aged 5 to 12, not to exceed a maximum of 10 children of any ages.</p> <p>Toddler group size (35 months): see above</p> <p>Preschool group size (59 months): see above</p> <p><input type="checkbox"/> No group size requirements.</p>	<p>maximum of 10 children of any ages.</p> <p>Under 18 months maximum is 2 children with up to 4 children aged 18 months to 5 years of age with up to 3 children aged 5 to 12 years of age, not to exceed a maximum of 9 children of any ages.</p> <p>Under 18 months maximum is 3 children, with up to 3 children aged 18 months to 5 years, with up to 2 children aged 5 to 12 years of age, not to exceed a maximum of 8 children of any ages.</p> <p><input type="checkbox"/> No group size requirements.</p>	<p><input type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)</p>

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Indicator	For each indicator, check all requirements for licensing that apply, if any.			
	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care
	<input type="checkbox"/> No group size requirements.	<input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.		<input type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)
Do the licensing requirements identify specific educational credentials for child care directors?	<input type="checkbox"/> High school/GED <input checked="" type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input checked="" type="checkbox"/> Other: Program Directors must meet requirements based on facility capacity which may include clock hours, CDA, associates degree, semester hours of academic study or training in child development, early childhood education curriculum resources, nutrition, child guidance, parent education, supervised practicum, and administration of early childhood programs.	<input checked="" type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input checked="" type="checkbox"/> Other: Licensed (family) day care home providers are not required to hold a child care director credential.	<input checked="" type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input checked="" type="checkbox"/> Other: Licensed (family) day care home providers are not required to hold a child care director credential.	N/A
Do the	<input checked="" type="checkbox"/> High	Do the licensing	<input type="checkbox"/> High	Do the

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Indicator	For each indicator, check all requirements for licensing that apply, if any.			
	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care
licensing requirements identify specific educational credentials for child care teachers?	school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input checked="" type="checkbox"/> Other: Teaching staff counted in staff to child ratio must meet staffing qualifications, which includes a minimum of 10 clock hours of workshops approved by the state licensing staff.	requirements identify specific educational credentials for child care teachers? N/A	school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: N/A	<input type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home) licensing requirements identify specific educational credentials for child care teachers? N/A
Do the licensing requirements specify that directors and caregivers must attain a specific number of training hours per year?	<input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year <input type="checkbox"/> No training requirement <input checked="" type="checkbox"/> Other: Each program director and teaching staff counted in staff to child ratio must meet staffing qualifications, which includes a	Do the licensing requirements specify that directors and caregivers must attain a specific number of training hours per year? Initial requirement: Each applicant and primary provider must have a child development associate	<input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year <input type="checkbox"/> No training requirement <input checked="" type="checkbox"/> Other: Initial requirement: Each applicant and primary provider must have a child development associate credential or	Do the licensing requirements specify that directors and caregivers must attain a specific number of training hours per year? N/A

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Indicator	For each indicator, check all requirements for licensing that apply, if any.			
	Center-Based Child Care	Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	Family Child Care	In-Home Care <input type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)
	<p>minimum of 10 clock hours of workshops approved by the state licensing staff. In addition the program director and teaching staff must complete ; 2 hours of safe sleep practices and sudden infant death syndrome if the individual will be caring for children under 12 months of age, 2 hours of basic child development, 2 hours of recognizing the signs of child abuse or neglect, including abusive head trauma, pediatric first aid and pediatric cardiopulmonary resuscitation certifications.</p> <p>Annual Requirement The program director shall receive at least five clock hours of approved in-service training. Teaching staff must receive 10 hours of approved in-service training.</p>	<p>credential or complete at least 15 hours of professional development training, which may include required training; 2 hours of safe sleep practices and sudden infant death syndrome if the individual will be caring for children under 12 months of age, 2 hours of basic child development, 2 hours of recognizing the signs of child abuse or neglect, including abusive head trauma, pediatric first aid and pediatric cardiopulmonary resuscitation certifications.</p> <p>Annual Requirement For each licensure year, each primary care provider shall complete five clock-hours of professional development training, maintain</p>	<p>complete at least 15 hours of professional development training, which may include required training; 2 hours of safe sleep practices and sudden infant death syndrome if the individual will be caring for children under 12 months of age, 2 hours of basic child development, 2 hours of recognizing the signs of child abuse or neglect, including abusive head trauma, pediatric first aid and pediatric cardiopulmonary resuscitation certifications.</p> <p>Annual Requirement For each licensure year, each primary care provider shall complete five clock-hours of professional development training, maintain current accreditation by the national association for family child care,</p>	

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Indicator	For each indicator, check all requirements for licensing that apply, if any.			
	Center-Based Child Care	Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	Family Child Care	In-Home Care <input type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)
		current accreditation by the national association for family child care, or hold a current child development associate credential.	or hold a current child development associate credential.	

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

Yes. Describe (See Goals 1 and 2 of Section 3.1.7 of this plan.)

Goal 1 - KDHE plans to review and revise General Regulations K.A.R. 28-4-122 through K.A.R. 28-4-132, to reflect current research and effective practice. Included are Safety Procedures regulations K.A.R. 28-4-128, specific to emergency preparedness during natural or other disasters. Preliminary work is in progress. Goal 2 - The Department (KDHE) is currently working in partnership with the National Association for Regulatory Association (NARA) to develop a Kansas Licensing Indicator System (KLIS). The indicator system will direct a shift from the current comprehensive checklist survey instrument to an indicator system methodology that would re-focus the emphasis on the licensing process, balancing workloads and increasing consistency, efficiency and the effectiveness of the inspection process.

No

3.1.2 Enforcement of Licensing Requirements

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

Describe the State/Territory's policies for effective enforcement of the licensing requirements using questions 3.1.2a through 3.1.2e below. This

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description includes whether and how the State/Territory uses visits (announced and unannounced), background checks, and any other enforcement policies and practices for the licensing requirements.

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

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

CCDF Categories of Care	Frequency of Routine Announced Visits	Frequency of Routine Unannounced Visits
<input checked="" type="checkbox"/> Center-Based Child Care	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe Initial inspection is announced	<input checked="" type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe
<input checked="" type="checkbox"/> Group Home Child Care	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe Initial inspection is announced	<input checked="" type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe
<input checked="" type="checkbox"/> Family Child Care Home	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe Initial inspection is announced	<input checked="" type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe
<input type="checkbox"/> In-Home Child Care <input checked="" type="checkbox"/> N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2b)	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe

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

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

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Licensing Procedures	Describe which procedures are used by the State/Territory for enforcement of the licensing requirements.
The State/Territory requires providers to attend or participate in training relating to opening a child care facility prior to issuing a license.	<input checked="" type="checkbox"/> Yes. Describe Orientation with contracted Health Departments is required to complete the application for a Child Care Center, Preschool, Licensed Day Care Home, and Group Day Care Home. Required training for all program types is verified at the initial inspection. A license will not be issued to an applicant until all the required training has been completed and verified. <input type="checkbox"/> No. <input type="checkbox"/> Other. Describe
The State/Territory has procedures in place for licensing staff to inspect centers and family child care homes prior to issuing a license.	<input checked="" type="checkbox"/> An on-site inspection is conducted. <input type="checkbox"/> Programs self-certify. Describe <input type="checkbox"/> No procedures in place. <input type="checkbox"/> Other. Describe
Licensing staff has procedures in place to address violations found in an inspection.	<input checked="" type="checkbox"/> Providers are required to submit plans to correct violations cited during inspections. <input checked="" type="checkbox"/> Licensing staff approve the plans of correction submitted by providers. <input checked="" type="checkbox"/> Licensing staff verify correction of violation. <input checked="" type="checkbox"/> Licensing staff provide technical assistance regarding how to comply with a regulation. <input type="checkbox"/> No procedures in place. <input checked="" type="checkbox"/> Other. Describe KDHE conducts compliance inspections to monitor and verify ongoing compliance
Licensing staff has procedures in place to issue a sanction to a noncompliant facility.	<input type="checkbox"/> Provisional or probationary license <input checked="" type="checkbox"/> License revocation or non-renewal <input checked="" type="checkbox"/> Injunctions through court <input checked="" type="checkbox"/> Emergency or immediate closure not through court action <input checked="" type="checkbox"/> Fines for regulatory violations <input type="checkbox"/> No procedures in place. <input checked="" type="checkbox"/> Other. Describe Notice of Non Compliance, requiring corrections.
The State/Territory has procedures in place to respond to illegally operating child care facilities.	<input type="checkbox"/> Cease and desist action <input checked="" type="checkbox"/> Injunction <input type="checkbox"/> Emergency or immediate closure not through court action <input type="checkbox"/> Fines <input type="checkbox"/> No procedures in place. <input checked="" type="checkbox"/> Other. Describe Complaints of illegal care

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Licensing Procedures	Describe which procedures are used by the State/Territory for enforcement of the licensing requirements.
	are investigated and reviewed by KDHE. Substantiated complaints are referred to the county attorney for prosecution pursuant to state statute.
The State/Territory has procedures in place for providers to appeal licensing enforcement actions.	<input checked="" type="checkbox"/> Yes. Describe Administrative procedures are established and followed in accordance with provisions of the Kansas Administrative Procedures Act (KAPA). KDHE employs two attorneys to enforce requirements for child care facilities. <input type="checkbox"/> No. <input type="checkbox"/> Other. Describe

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

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

No

CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
<input checked="" type="checkbox"/> Center-Based Child Care	<input checked="" type="checkbox"/> Child Abuse Registry	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe At least once every three years.	<input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input checked="" type="checkbox"/> Non-teaching staff <input checked="" type="checkbox"/> Volunteers <input type="checkbox"/> Other _____
	<input checked="" type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if State/Territory background check includes fingerprints	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe At least once every three years.	<input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input checked="" type="checkbox"/> Non-teaching staff <input checked="" type="checkbox"/> Volunteers <input type="checkbox"/> Other _____

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CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
	<input type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Director <input type="checkbox"/> Teaching staff <input type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input type="checkbox"/> Other _____
	<input type="checkbox"/> Sex Offender Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Director <input type="checkbox"/> Teaching staff <input type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input type="checkbox"/> Other _____
<input checked="" type="checkbox"/> Group Child Care Homes <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	<input checked="" type="checkbox"/> Child Abuse Registry	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe At least once every three years	<input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home Regulation requires background checks be conducted on all persons over 10 years of age and older living, working or regularly volunteering. Children in care are excluded from this requirement.
	<input checked="" type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes fingerprints	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe At least once every three years.	<input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home Regulation requires background checks be conducted on all persons over 10 years of age and older living, working or regularly volunteering. Children in care are excluded from this requirement.
	<input type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home

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CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
		<input type="checkbox"/> Other. Describe 	
	<input type="checkbox"/> Sex Offender Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe 	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home
<input type="checkbox"/> Family Child Care Homes	<input checked="" type="checkbox"/> Child Abuse Registry	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe At least once every three years.	<input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home Regulation requires background checks be conducted on all persons over 10 years of age and older living, working or regularly volunteering. Children in care are excluded from this requirement.
	<input checked="" type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes fingerprints	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe At least once every three years.	<input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home Regulation requires background checks be conducted on all persons over 10 years of age and older living, working or regularly volunteering. Children in care are excluded from this requirement
	<input type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe 	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home

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

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

KBI/DCF background forms are required with initial and renewal applications. Regulation requires background checks be conducted on all persons over 10 years of age and older living, working or regulary volunteering. Children in care are excluded from this requirement. Identifying information is required to be submitted initially upon application and within one week of working in the facility. Upon receipt of the application, KDHE initiates the background checks which are conducted at least once every three years.

d -1) The cost associated with each type of background check conducted
There is no cost to provider’s background checks.

d-2) Who pays for background checks
Due to interagency agreements, there is no cost to program for background checks.

d-3) What types of violations would make providers ineligible for CCDF? Describe:
Crimes against a person, felony conviction under the uniformed controlled substances act, has committed physical, mental or emotional abuse or neglect or sexual abuse as validated by DCF.

d-4) The process for providers to appeal the Lead Agency’s decision based on the background check findings. Describe: Timely appeals are processed in accordance with the Kansas administrative procedures act. KDHE office of legal services represents the agency and may be involved with settlements.

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

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

Yes. Describe: The Department launched the online information dissemination system (Child Care and Early Education Portal) in March 2012. The system is part of a larger joint technology initiative between the Department for Children and Families (DCF) and KDHE known as the Client and Provider Portal (CAPP). The information displayed online is made possible through an interface with the KDHE licensing database (CLARIS). Facility address and phone number are not displayed

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unless applicants and licensees request the information be displayed (K.A.R. 28-4-93). This authorization is made at the time of initial and renewal application. The ability for users to view survey findings online is made possible by a separate KDHE technology initiative, CLARIS Inspection Module (CIM), launched statewide in February 2012. CIM automated the paper-based survey process. This enhancement to CLARIS makes it possible display findings online as required by K.S.A. 65-534 and increases survey efficiency.

No

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

Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Such requirements shall include the prevention and control of infectious diseases (including immunization), building and physical premises safety, and minimum health and safety training appropriate to the provider setting. These health and safety requirements apply to all providers caring for children receiving CCDF services and which also may be covered by the licensing requirements. (658E(c)(2)(F), §98.41)

Check if the Lead Agency certifies that there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))

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

The Lead Agency requires:	For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.			
	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
<input checked="" type="checkbox"/> Physical exam or health statement for providers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Physical exam or health statement for children	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tuberculosis check for providers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Tuberculosis check for children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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The Lead Agency requires:	For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.			
	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
<input type="checkbox"/> Provider immunizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Child immunizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Hand-washing policy for providers and children	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Diapering policy and procedures	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Providers to submit a self-certification or complete health and safety checklist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Other. Describe Out of Home Relative Providers complete a self-certification Health and Safety Standards checklist with Lead Agency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

The Lead Agency requires:	For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.			
	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
<input checked="" type="checkbox"/> Fire inspection	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Building inspection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Health inspection	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Inaccessibility of toxic substances policy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Safe sleep policy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tobacco exposure reduction	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Transportation policy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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The Lead Agency requires:	For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.			
	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
<input checked="" type="checkbox"/> Providers to submit a self-certification or complete health and safety checklist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other. Describe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
Child Care Centers	First Aid	Each person regularly caring for children and counted in ratios	Maintain certification
	CPR	Each person regularly caring for children and counted in ratios	Maintain certification
	Medication Administration Policies and Practices	Each designated staff person administering prescription medication	N/A
	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	2 hours for each person caring for children birth to 12 months of age	N/A
	Shaken Baby Syndrome and abusive head trauma	2 hours Signs and symptoms of abuse	N/A

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	prevention	and neglect, including abusive head trauma	
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A	N/A
	Physical Activities	N/A	N/A
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A	N/A
	Recognition and mandatory reporting of suspected child abuse and neglect	2 hours for each person regularly caring for children	N/A
	Emergency preparedness and planning response procedures	Each person regularly caring for children	N/A
	Management of common childhood illnesses, including food intolerances and allergies	N/A	N/A
	Transportation and child passenger safety (if applicable)	N/A	N/A
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	6 hours of academic credit or equivalent clock hours in working with children with special needs and developing individual program plans	10 hours of training specific to working with children with special needs
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	2 hours for each person regularly caring for children	N/A
	Supervision of children	N/A	N/A
	Behavior management	N/A	N/A
	Other. Describe 		5 hours in supervision, behavior

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
			management, nutrition, physical activity, and other child care topics
Group Home Child Care	First Aid	Each person regularly caring for children	Maintain certification
	CPR	Each person regularly caring for children	Maintain certification
	Medication Administration Policies and Practices	N/A	N/A
	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	2 hours for each person regularly caring for children	N/A
	Shaken Baby Syndrome and abusive head trauma prevention	2 hours Signs and symptoms of abuse and neglect, including abusive head trama	
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A	N/A
	Physical Activities	N/A	N/A
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A	N/A
	Recognition and mandatory reporting of suspected child abuse and neglect	2 hours Signs and symptoms of abuse and neglect, including abusive head trama	N/A
	Emergency preparedness and planning response procedures	N/A	N/A
	Management of common childhood illnesses, including food intolerances and allergies	N/A	N/A
	Transportation and child passenger safety (if applicable)	N/A	N/A

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A	N/A
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	2 hours of child development	N/A
	Supervision of children	N/A	N/A
	Behavior management	N/A	N/A
	Other. Describe 		5 hours in supervision, behavior management, nutrition, physical activity, and other child care topics.
Family Child Care Providers	First Aid	Each person regularly caring for children	Maintain certification
	CPR	Each person regularly caring for children	Maintain certification
	Medication Administration Policies and Practices	N/A	N/A
	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	2 hours for each person regularly caring for children	N/A
	Shaken Baby Syndrome and abusive head trauma prevention	2 hours Signs and symptoms of abuse and neglect, including abusive head trauma	N/A
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A	N/A
	Physical Activities	N/A	N/A
	Procedures for preventing	N/A	N/A

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	the spread of infectious disease, including sanitary methods and safe handling of foods		
	Recognition and mandatory reporting of suspected child abuse and neglect	2 hours Signs and symptoms of abuse and neglect, including abusive head trauma	N/A
	Emergency preparedness and planning response procedures	N/A	N/A
	Management of common childhood illnesses, including food intolerances and allergies	N/A	N/A
	Transportation and child passenger safety (if applicable)	N/A	N/A
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A	N/A
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	2 hours of child development	N/A
	Supervision of children	N/A	N/A
	Behavior management	N/A	N/A
	Other. Describe 		5 hours in supervision, behavior management, nutrition, physical activity, and other child care topics.
In-Home Child Care Providers	First Aid	N/A	N/A
	CPR	N/A	N/A
	Medication Administration Policies and Practices	N/A	N/A

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	N/A	N/A
	Shaken Baby Syndrome and abusive head trauma prevention	N/A	N/A
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A	N/A
	Physical Activities	N/A	N/A
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A	N/A
	Recognition and mandatory reporting of suspected child abuse and neglect	N/A	N/A
	Emergency preparedness and planning response procedures	N/A	N/A
	Management of common childhood illnesses, including food intolerances and allergies	N/A	N/A
	Transportation and child passenger safety (if applicable)	N/A	N/A
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A	N/A
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	N/A	N/A

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	Supervision of children	N/A	N/A
	Behavior management	N/A	N/A
	Other. Describe 	N/A	N/A

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

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

All in-or -out of home relative providers must complete a self assessment checklist for health and safety. They must also pass a Kansas Child Abuse and Neglect Registry Check.

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

3.1.4 Effective enforcement of the CCDF health and safety requirements.

For providers who care for children receiving CCDF assistance and who are NOT subject to the enforcement procedures described in 3.1.2 for licensed providers, please describe how the Lead Agency enforces the CCDF health and safety enforcement requirements. All in or out of home relative and in home non relative providers must complete a self assessment checklist for health and safety. They must also pass a Kansas Child Abuse and Neglect Registry Check. The signature of the provider and parent on the self assessment checklist verifies that the health and safety standards of the home have been discussed. The parent or responsible adult conducts a walk through inspection of his/her home.

- a) Describe whether and how the Lead Agency uses on-site visits (announced and unannounced) _____ The Lead Agency does not use on-site visits.
- b) Describe whether the Lead Agency uses background checks _____ The Lead Agency conducts background checks on all license exempt providers and all persons age 10 and over who reside, work or volunteer regularly in a child care facility.

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

Yes. If yes, what documentation, if any, is required? Describe _____
The parent or guardian and the provider must complete the Health and Safety Standards checklist by conducting a walk-through inspection in the home where care will be given. Both must sign to certify that a walk-through inspection has been conducted by both parties.

No

d) Describe whether the Lead Agency uses any other enforcement policies and practices for the health and safety requirements None at the present time

Check if the Lead Agency certifies that procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))

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

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

Yes. Describe The Lead Agency's Kansas Early Head Start (KEHS) is a comprehensive prevention and early childhood development program for pregnant women and children, birth to age four. Services provided include developmental screenings, services for children with disabilities, mental and physical health, nutrition, and social services. KEHS and other early childhood education programs coordinate child find screening and referral efforts with appropriate agencies and organizations in their communities. KEHS is not statewide and does not serve all eligible children.

No

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

Yes. Describe

No

Other. Describe Training, resources and supports are defined as contained within the grant funding to KEHS programs. KEHS grantees have to meet Head Start Performance Standards.

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There is not a separate line item or description

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

Yes. Describe :Only within the confines of the grant funding to KEHS programs. KEHS programs must meet Head Start Performance Standards.

No

Other. Describe [redacted]

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

Yes. If Yes, provide the name of the tool(s) [redacted]

No

Other. Describe KEHS is encouraged to use ASQ and ASQ-SE

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

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

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

Number of licensed programs. Describe (optional)

Data is available to anyone

Numbers of programs operating that are legally exempt from licensing. Describe (optional) [redacted]

Number of programs whose licenses were suspended or revoked due to non-compliance. Describe (optional) Data is available to anyone

Number of injuries in child care as defined by the State/Territory. Describe (optional) Data is available to anyone

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- Number of fatalities in child care as defined by the State/Territory. Describe (optional) Data is available to anyone
- Number of monitoring visits received by programs. Describe (optional) Data is available to anyone
- Caseload of licensing staff. Describe (optional) Data is available to anyone
- Number of programs revoked from CCDF due to non-compliance with health and safety requirements. Describe (optional)
- Other. Describe
- None

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

An agreement with the Kansas Department of Health and Environment, Early Care & Youth Programs Section, KDHE Child Care Licensing (KDHE) is reviewed annually. The agreement outlines activities to be provided for compliance with licensing and regulatory requirements. Expected results are to assure foundational health and safety standards in Kansas child care facilities.

The agreement with KDHE assures it will enforce all applicable health and safety requirements as determined through site surveys and investigations by maintaining a record of substantiated facility complaints, including parental complaints, and make information regarding such complaints available to the public on request in accordance with the Kansas Open Records Act. This complaint system includes a record of rebuttals or updates by providers. KDHE also agrees to monitor statewide activities to ensure initial training for new child care licensing surveyors, update skill training for additional training opportunities to expand professional development, and assure surveys and investigations are in compliance with agency policies, procedures and contractual requirements. Regulatory improvements are made to State operations to keep up with growing program demands, to meet the need for timeliness of action, and to respond effectively to the public or other agencies.

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

KDHE provides to the lead agency quarterly and annual program reports and updates on statistical information and data concerning compliance with health and safety requirements.

3.1.7 Goals for the next Biennium –

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

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

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

<p>Goal 1 – KDHE plans to review and revise General Regulations K.A.R. 28-4-122 through K.A.R. 28-4-132, to reflect current research and effective practice. Included are Safety Procedures regulations K.A.R. 28-4-128, specific to emergency preparedness during natural or other disasters. Preliminary work is in progress.</p>
<p>Goal 2 - The Department (KDHE) is currently working in partnership with the National Association for Regulatory Association (NARA) to develop a Kansas Licensing Indicator System (KLIS). The indicator system will direct a shift from the current comprehensive checklist survey instrument to an indicator system methodology that would re-focus the emphasis on the licensing process, balancing the workloads and increasing consistency, efficiency and the effectiveness of the inspection process.</p>
<p>Goal 3 - Enhance the CIM inspection (online)tool to include complaint inspections and school age program/ drop in program routine inspections.</p>
<p>Goal 4 - Enhance the online information dissemination system so it provides complaint inspection findings.</p>
<p>Goal 5 -</p>



CCDF has a number of performance measures that are used to track progress for key aspects of the program at the national level. These performance measures are included in budget materials submitted to Congress and other documents. Please follow this link <http://www.acf.hhs.gov/programs/occ/resource/government->

performance-and-results-act-gpra-measures to see the CCDF performance measures. A number of these performance measures rely on information reported in the State and Territorial Plans as a data source. We have added a ruler icon  in Section 3.2 through 3.4 in order to identify the specific questions used in the performance measures. When answering these questions, Lead Agencies should ensure that their answers are accurate and complete in order to promote the usefulness and integrity of the performance measures.

3.2 Establishing Voluntary Early Learning Guidelines (Component #2)

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



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

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

If yes, insert web addresses, where possible: www.ksde.org

Which State/Territory agency is the lead for the early learning guidelines?
Kansas Department of Education (KSDE) and Lead Agency-Head Start State Collaboration Office (HSSCO)



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

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

Domains	Birth-to-Three ELGs	Three-to-Five ELGs	Five and Older ELGs
Physical development and health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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Domains	Birth-to-Three ELGs	Three-to-Five ELGs	Five and Older ELGs
Social and emotional development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Approaches to learning	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Logic and reasoning (e.g., problem-solving)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Language development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Literacy knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mathematics knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Science knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Creative arts expression (e.g., music, art, drama)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Social studies knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
English language development (for dual language learners)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
List any domains not covered in the above _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other. Describe 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

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

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



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

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

- To define the content of training required to meet licensing requirements
- To define the content of training required for program quality improvement standards (e.g., QRIS standards)
- To define the content of training required for the career lattice or professional credential
- To require programs in licensing standards to develop curriculum/learning activities based on the voluntary ELGs
- To require programs in quality improvement standards to develop curriculum/learning activities based on the voluntary ELGs
- To develop State-/Territory –approved curricula
- Other. List The Lead Agency partners with KSDE on the ELG’s.

Four year old at-risk and pre-kindergarten programs participating in the program administered by the Kansas State Department of Education align curriculum with the ELG’s. These programs are not statewide.

Higher education curriculum references the ELGs. Early childhood special education uses the ELGs in Individual Educational Plan (IEP) development.

None.



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

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

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

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

In this section, assessment is framed with two distinct purposes/tools – 1) ongoing assessment of children’s progress within the classroom to improve and individualize instruction (this corresponds to 3.2.6a) and 2) assessments conducted within pre-kindergarten and/or at kindergarten entry to inform policymakers about the school

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readiness of children across the State on a broad range of domains, used to guide program initiatives (this corresponds to 3.2.6b).

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

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

Yes. Describe

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

Yes. Describe

No

Other. Describe

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

Yes. Describe

No

Other. Describe

No

Other. Describe

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

Yes. Describe

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

Yes. Describe

No

Other. Describe

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

All children. Describe

Samples of children. Describe

Other. Describe

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

Yes. Describe

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- No
- Other. Describe

- No
- Other. Describe

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

Yes. Describe Kansas Department of Education is piloting the process with early childhood partners.

- No
- Not applicable. State does not have an SLDS.

3.2.7 Data & Performance Measures on Voluntary Early Learning Guidelines –

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

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

- Number/percentage of child care providers trained on ELG’s for preschool aged children. Describe (optional)
- Number/percentage of child care providers trained on ELG’s for infants and toddlers. Describe (optional)
- Number of programs using ELG’s in planning for their work. Describe (optional)
- Number of parents trained on or served in family support programs that use ELG’s. Describe (optional)
- Other. Describe
- None

b) **Performance measurement.** What, if any, are the Lead Agency’s performance measures related to dissemination and implementation of the early learning guidelines? Since the ELGs are voluntary, the Lead Agency does not set performance measures related to dissemination and implementation.

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- c) **Evaluation.** What are the State/Territory's plans, if any, for evaluation related to early learning guidelines and the progress of children in child care? Evaluation can include efforts related to monitoring implementation of an initiative validation of standards or program assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically. The Lead Agency has no plans at this time for evaluation of the ELGs and the progress of children in child care because the ELGs are voluntary, not mandatory.

3.2.8 Goals for the next Biennium –

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

- 1) Increase training opportunities for family care providers regarding early learning guidelines.
- 2) Increase training opportunities regarding teaching dual language learners.

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

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

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

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

While not all States and Territories have developed or implemented a formal QRIS, all are pursuing quality improvement strategies that can be described within this framework (based upon previous CCDF Plans). Using this framework to organize this section allows States/Territories to report on their quality improvement

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activities systematically whether they have a QRIS or not. Over time, States and Territories are encouraged to work on linking their quality improvement initiatives and strategies across all of these elements, culminating in a comprehensive Quality Rating and Improvement System with adequate support for providers to attain higher levels of quality and transparency for parents and the community regarding the quality of child care.

a) Describe which entities are involved in planning and administering the program quality improvement activities in 3.3, including State/Territory entities and local or community level entities. Child Care Aware of Kansas®, Kansas Child Care Training Opportunities, Inc., Kansas Enrichment Network, Kansas Early Head Start, Early Childhood Associate Apprenticeship Program, and KDHE

3.3.1 Element 1 – Program Standards

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



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

- Ratios and group size
- Health, nutrition and safety
- Learning environment and curriculum
- Staff/Provider qualifications and professional development
- Teacher/providers-child relationships
- Teacher/provider instructional practices
- Family partnerships and family strengthening
- Community relationships
- Administration and management
- Developmental screenings
- Child assessment for the purposes of individualizing instruction and/or targeting program improvement
- Cultural competence
- Other. Describe Professional development and quality initiative opportunities are available for child care providers.
- None. If checked, skip to 3.3.2.

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

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State/Territory has chosen to establish.

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

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

- Licensing is a pre-requisite for participation
- Licensing is the first tier of the quality levels
- State/Territory license is a “rated” license.
- Other. Describe Licensing is a pre-requisite for regulated providers participation in the child care subsidy program in Kansas and to partner for our quality initiative within the Kansas Early Head Start Program. Additional opportunities for quality enhancement are available.
- Not linked.

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

- Programs that meet State/Territory pre-k standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between pre-k and the quality improvement system)
- Programs that meet Federal Head Start Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between Head Start and the quality improvement system)
- Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or an alternative pathway to meeting the standards)
- Other. Describe
- None

3.3.2 Element 2 –Supports to Programs to Improve Quality

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



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

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Types and Purposes of Support	Information or Written Materials	Training	On-Site Consultation
<input checked="" type="checkbox"/> Attaining and maintaining licensing compliance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Attaining and maintaining quality improvement standards beyond licensing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Attaining and maintaining accreditation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Providing targeted technical assistance in specialized content areas:			
Health and safety	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Infant/toddler care	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
School-age care	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Inclusion	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Teaching dual language learners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Business management practices	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other. Describe 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> None. Skip to 3.3.3.			

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

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

Through the Kansas Children’s Cabinet (not CCDF funding), Early Childhood Block Grants are customized and quality improvement supports are determined locally for specific geographic areas of the state. This is not statewide.

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

- Yes.
- No
- Other. Describe The Lead Agency provides funding to support quality supports for child care providers. Services are provided through a network of professional development, direct and indirect technical assistance, and other resources. In the Quality STEPS Project a comprehensive assessment is used to identify levels of quality in 5 key

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areas: Learning Environment, Family Partnerships, Training and Education, Adult-child ratios and group size, and Program Accreditation. Focus areas will include supports to improved quality, availability, child development, and professional development to raise the quality of care for infants and toddlers. The Quality STEPS Project will serve 60 providers statewide.

Funds also support the states effort to establish a workforce center to facilitate a Training Delivery system, a trainer directory, a statewide training calendar, and incentive program for trainers, and a Child Development Associate (CDA) credential scholarship program for early childhood professionals.

The Kansas Early Head Start program seeks to increase the availability of child care slots for infants and toddlers, and to raise the quality of child care for all children in the State. KEHS programs are required to provide EHS services in collaboration with child care providers in their communities. A major component of KEHS is to deliver quality training to child care providers, to encourage professional development and continuous program improvement. KEHS child care providers will be licensed with the Kansas Department for Health and Environment. In addition to licensing, child care providers will be required to obtain their Infant and Toddler Child Development Associate (CDA). Child care facilities partnering with KEHS are monitored using the Clifford-Harms Environmental Rating Scale.

Child Care Aware of Kansas® administers a Kansas Quality Rating Information System (KQRIS) as one activity in the quality improvement framework. KQRIS is privately funded and currently available in 2 counties.

3.3.3 Element 3 – Financial Incentives and Supports

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



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

Types of Financial Incentives and Supports for Programs	Child Care Centers	Child Care Homes	License-Exempt Providers
<input type="checkbox"/> Grants to programs to meet or maintain licensing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Types of Financial Incentives and Supports for Programs	Child Care Centers	Child Care Homes	License-Exempt Providers
<input type="checkbox"/> Grants to programs to meet QRIS or similar quality level	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> One-time awards or bonuses on completion of quality standard attainment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Tiered reimbursement tied to quality for children receiving subsidy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> On-going, periodic grants or stipends tied to improving/maintaining quality	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Tax credits tied to meeting program quality standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other. Describe: Scholarships	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> None. Skip to 3.3.4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3.3.4 – Element 4 - Quality Assurance and Monitoring

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



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

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Types of Program Quality Assessment Tools	Child Care Centers	Child Care Homes	License-Exempt Providers
<input checked="" type="checkbox"/> Environment Rating Scales (e.g., ECERS, ITERS, SACERS, FDCRS) Describe, including frequency of assessments. The Quality Steps Program (QSP) utilizes the ITERS-R and FCCERS-R Environmental Rating Scale (ERS) tools. Center-based programs are assessed using the ITERS-R tool and Home-based family child care programs are assessed with the FCCERS-R tool. In 2012-2013, QSP participants (center-based & family child care) received one Environment Rating Scale (ERS) assessment. In 2013-2014 and the 2014-2015 participants will receive two ERS assessments (baseline and follow-up).	<input checked="" type="checkbox"/> Infant/Toddler <input type="checkbox"/> Preschool <input type="checkbox"/> School-Age	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Classroom Assessment Scoring System (CLASS) Describe, including frequency of assessments.	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<input type="checkbox"/> Program Administration Scale (PAS) for child care centers or Business Administration Scale (BAS) for family child care homes Describe, including frequency of assessments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Customized instrument, including submission of written documentation, developed for State/Territory quality improvement system. This may include instruments developed for quality improvements in 21 st Century Learning Center programs Describe, including frequency of assessments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other. Describe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> None. Skip to 3.3.5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

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- Have a mechanism to track different quality assessments/monitoring activities to avoid duplication
- Include QRIS or other quality reviews as part of licensing enforcement
- Have compliance monitoring in one sector (e.g., Head Start/Early Head Start, State/Territory pre-k) serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- Have monitoring for meeting accreditation standards serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- Other. Describe: Coordination is accomplished and duplication avoided through the ECAC work groups and the State Interagency Early Childhood Leadership Team.
- None

3.3.5 – Element 5 - Outreach and Consumer Education

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



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

- Yes. If yes, how is it used?
 - Resource and referral/consumer education services use with parents seeking care
 - Parents enrolling in child care subsidy are educated about the system and the quality level of the provider that they are selecting
 - Searchable database on the web
 - Voluntarily, visibly posted in programs
 - Mandatory to post visibly in programs
 - Used in marketing and public awareness campaigns
 - Other. Describe: The Kansas Quality Rating Improvement System (KQRIS) uses a five star rating system. KQRIS is administered by Child Care Aware of Kansas, and is funded by sources other than CCDF. This is not statewide and available in two counties in Kansas

No. If no, skip to 3.3.6.

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

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which forms, if any, the State/Territory uses to communicate levels of quality for child care programs.

- Print
- Radio
- Television
- Web
- Telephone
- Social Marketing
- Other. Describe
- None

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

3.3.6. Quality Rating and Improvement System (QRIS)

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

- Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating State/Territory-wide.
 - Participation is voluntary for _____
 - Participation is mandatory for _____
- Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating as a pilot or in a few localities but not State/Territory-wide.
- No, the State/Territory does not have a QRIS or similar quality improvement system that includes linked activities in all five elements.
 - State/Territory is in the development phase
 - State/Territory has no plans for development
- Other. Describe

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

- Child care centers
- Group child care homes
- Family child care homes
- In-home child care
- License exempt providers
- Early Head Start programs
- Head Start programs
- Pre-kindergarten programs
- School-age programs

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Other. Describe Faith based child care programs, for-profit childcare and non-profit child care within the two counties KQRIS is available.

3.3.7. If the State/Territory has or will have any quality improvement strategies for targeted groups of providers (e.g., relative caregivers or caregivers who are legally exempt from licensing) that are not described in your responses to any question in section 3.3 above, please describe: A goal has been established to increase quality and program integrity for relative providers and in-home providers participating within the child care subsidy program in Kansas.

3.3.8 Data & Performance Measures on Program Quality –

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

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

Data on the quality level for individual programs (e.g. QRIS level) as defined by your State/Territory. Describe (optional). N/A

Number of programs that move program quality levels annually (up or down). Describe (optional) N/A

Program scores on program assessment instruments. List instruments: ECERS-R, ITER-R and FCCERS-R, Teacher Evaluation scores. Describe (optional) N/A

Classroom scores on program assessment instruments. List instruments: ECERS-R, ITER-R, and FCCERS-R, Teacher Evaluation scores. Describe (optional) N/A

Qualifications for teachers or caregivers within each program. Describe (optional) N/A

Number/Percentage of children receiving CCDF assistance in licensed

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care. Describe (optional) Data is available on the number of children receiving licensed care from the Lead Agency's data base.

Number/percentage of children receiving CCDF assistance who attend care at each of the tiers of the quality as defined by the State/Territory Data is not available.

Number/Percentage of programs receiving financial assistance to meet higher program standards. Describe (optional) Data is available on the number of programs receiving financial assistance through the child care quality initiatives outlined within this plan.

Other. Describe: Other data available from the Quality Step Project is limited to 60 providers statewide.

None

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

The Lead Agency considers licensing as a foundation for program quality for regulated providers in Kansas. Quality indicators and data gathered for the Quality Performance Report are tracked and monitored based upon the quality initiatives outlined in the targeted and quality CCDF funding chart included in this state plan.

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

The state will be monitoring the program support initiatives described earlier in this plan. These will include an evaluation of the individual programs and data collection regarding: services provided through the network of professional development, direct and indirect technical assistance, and other resources provided. In the Quality STEPS Project a comprehensive assessment is used to identify levels of quality in 5 key areas: Learning Environment, Family Partnerships, Training and Education, Adult-child ratios and group size, and Program Accreditation. Focus areas will include supports to improved quality, availability, child development, and professional development to raise the quality of care for infants and toddlers. The Quality STEPS Project will serve 60 providers statewide.

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Monitoring will also occur of our workforce center initiative that will be established to develop a Training Delivery system, a trainer directory, a statewide training calendar, and incentive program for trainers, and a Child Development Associate (CDA) credential scholarship program for early childhood professionals.

3.3.9 Goals for the next Biennium –

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

The Lead Agency will continue it's work with the Early Childhood Advisory Council workgroups to develop and improve opportunities for quality for all providers. The agency's goal for the 2014-15 state plan is:

- 1) Increase the quality of care for children participating in the child care subsidy program who are receiving care through relative and in-home care. This will be accomplished through increased opportunities and participation in professional development; a comprehensive review of lead agency policy and procedures with regards to program integrity and oversight; and revisions and/or additions in policy as determined to increase the quality of services received.

All goals developed will be subject to State funding availability and administrative priorities.

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

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

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workforce activities and describe their goals for the upcoming Biennium.

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

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

Child and Adult Food Program

Child Care Aware of Kansas® and six member agencies at the local level

Child Care Providers Coalition

Early Childhood Higher Education Options (ECHO)

Early Childhood Quality Improvement Program (EQIP)

Families Together

Home Visitation Task Force

Interagency Coordinating Council for Children with Developmental Disabilities

Kansas Association for Infant Mental Health

Kansas Association for the Education of Young Children

Kansas Child Care Training Opportunities (KCCTO)

Kansas Children's Cabinet

Kansas Children's Service League

Kansas Department of Commerce

Kansas Department of Health and Environment

Kansas Enrichment Network

Kansas Head Start Association

Kansas Head Start State Collaboration Office (Head Start and Early Head Start)

Kansas Learning First Alliance

Kansas Parent Information Resource Center

Kansas State Department of Education

Parents as Teachers

Save the Children

3.4.1 Workforce Element 1 - Core Knowledge and Competencies

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

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

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

If yes, insert web addresses, where possible:

http://www.ks.childcareaware.org/PDFs/2011CoreComp_Eng.pdf

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

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

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

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

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

- Cross-walked with the Child Development Associate (CDA) competencies
- Cross-walked with national teacher preparation standards (e.g., NAEYC standards for early childhood professional preparation, National Board of Professional Teaching Standards, National Council for Accreditation of Teacher Education/Council for the Accreditation of Educator Preparation, Head Start SOLAR staff skills indicators)
- Cross-walked with apprenticeship competencies
- Other. Describe Clarification of the box “Cross-walked with apprenticeship competencies”: Since the apprentices take curriculum at community colleges, CCs are cross walked with the community college curriculum.

- None

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

- Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe _____
- Providers working directly with children in family child care homes, including aides and assistants. Describe _____
- Administrators in centers (including educational coordinators, directors). Describe: Kansas has developed a center director’s credential but not competencies.
- Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe _____
- Education and training staff (such as trainers, CCR&R staff, faculty). Describe _____
- Other. Describe Kansas has developed an Infant mental health credential but not competencies.
- None

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

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

3.4.2 Workforce Element 2 - Career Pathways

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



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

Yes. Describe A Careers in Early Childhood Education Guide for Kansas was published in September, 2011 with recommended education, training, and technical assistance guidance. The Careers in Early Childhood Education Guide is to be used by individuals considering entering the early childhood workforce and those seeking to advance their careers.

CCDF supports the Early Childhood Associate Apprenticeship Program administered by the Kansas Department of Commerce. ECAAP, a Kansas Registered Apprenticeship Program, is a training model based on the skills and knowledge the early childhood industry needs from its employees. It combines Related Technical Instruction with planned, day-by-day training on the job under the supervision of a skilled worker. Apprentices start at a reasonable wage, determined by the employer. As their skills and value increase, so do their wages. ECAAP is a training model that gives the employer the opportunity to train workers in child care centers, preschoolers or group homes.

Because of this strong link to workforce development, KansasWorks, ECAAP has developed a School-to-Registered Apprenticeship component. This is a work-based learning program beginning in high school. It defines career paths to allow individuals to move between high school programs and employment. It also connects K-12 workforce development efforts to postsecondary education. This also enables employers to build and maintain a skilled workforce.

In School-to-Registered Apprenticeship, students are employed part-time with a registered apprenticeship sponsor and are simultaneously enrolled in their high school Early Childhood Education and Services Pathway Program. Apprentices earn credit for their on-the-job experience and may begin earning college credits while in high school. This is at Wamego (Kansas) and Ottawa (Kansas) High Schools, and the Coffeyville public schools are in a developmental stage. In addition, the community college coursework in early childhood may be completed totally on-line if the student chooses.

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

Insert web addresses, where possible: <http://www.kansasecaap.org>

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

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

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

- Infants and toddlers
- Preschoolers
- School-age children
- Dual language learners
- Children with disabilities, children with developmental delays, and children with other special needs
- Other. Describe: Director credential and infant mental health credential
- None

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

- Voluntary guide and planning resource
- Required placement for all practitioners and providers working in programs that are licensed or regulated in the State/Territory to serve children birth to 13
- Required placement for all practitioners working in programs that receive public funds to serve children birth to 13
- Required placement for adult educators (i.e., those that provide training, education and/or technical assistance)
- Required placement for participation in scholarship and/or other incentive and support programs
- Required placement for participation in the QRIS or other quality improvement system
- Other. Describe _____

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None

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

Yes. If yes, describe

No

3.4.3 Workforce Element 3 – Professional Development Capacity

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



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

Yes. If yes, describe

No



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

Yes. If yes, describe

No

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

Standards set by the institution

Standards set by the State/Territory higher education board

Standards set by program accreditors

Standards set by State/Territory departments of education

Standards set by national teacher preparation accrediting agencies

Other. Describe

None

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

Training approval process. Describe Training approval for re-licensure (state regulation) must be pre-approved by the Kansas Department of Health and Environment.

Trainer approval process. Describe Trainers for learning used in re-licensure (state regulation) and Continuing Education Units (CEUs) must meet minimum education and experience requirements.

Training and/or technical assistance evaluations. Describe Most noncredit training has an evaluation of the training by the participants at the conclusion of the training.

Other. Describe

None

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

Yes. If yes, describe Most community colleges in Kansas which offer early childhood curriculum share a common core curriculum (Common Core Courses) composed of seven courses. Four year universities have articulation agreements based upon individual arrangements between other four year universities. Between individual four year universities and individual two year community colleges, coursework is determined on a course-by-course basis if it articulates or not.

No

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

Yes. If yes, describe On-line training developed and delivered by the Kansas Children's Service League may be taken for college credit if the student pays the extra college tuition and fees. Additionally, the School-to-Registered Apprenticeship program has in place two high schools' curriculum which articulates to community college credit.

No

3.4.4 Workforce Element 4 – Access to Professional Development

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

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

Yes. If yes, for which sectors?

Child care

Head Start/Early Head Start

Pre-Kindergarten

Public schools

Early intervention/special education

Other. Describe Available to both regulated and unregulated child care providers.

No

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

Yes. If yes, describe

No

Insert web addresses, where possible:

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

Scholarships. Describe The Lead Agency funds the Early Childhood Associate Apprentice Program (ECAAP) which has scholarships available for community college coursework, CDA fees, books and travel expenses based upon financial need. More information may be found at <http://kansasecaap.org/>. Scholarships are based upon financial need, and recipients must also apply for other forms of financial aid before receiving a scholarship. Scholarships for CDA's are available through the Kansas Child Care Training Opportunities, Inc. (KCCTO) office. More information may be found at www.kccto.org

Free training and education. Training and Educational opportunities are offered in a variety of ways across the state and include both free and at cost. Stipends, grants and scholarships are also available.

Reimbursement for training and education expenses. Describe

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Grants. Describe Stipends and Grants available through the Child Care Aware Quality STEPS program and Childhood Wellness Program offered through Child Care Aware of Kansas. Loans. Describe

Loan forgiveness programs. Describe

Substitute pools. Describe [redacted]

Release time. Describe [redacted]

Other. Describe:

The Lead Agency funds Child Care Aware of Kansas® as the statewide child care resource and referral agency and for services to raise the quality of care for infant and toddlers. Part of this funding supports locally-based noncredit training for child care providers. Additionally, Child Care Aware of Kansas® also advises individual providers about training and educational pathways.

Additionally, access is strengthened by on-line early childhood credit courses which are available from Kansas community colleges. A four year degree in early childhood education may be earned entirely on-line by one Kansas university.

Financial incentives available to Trainers: Mini-grants are available to trainers through Kansas Child Care Training Opportunities, Inc. (KCCTO) for use for training expenses such as guest speakers, training materials, room rental, and professional expenses. These grants are based upon experience, education, and hours of training offered.

None

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

Yes. If yes, describe This is available through local Child Care Aware of Kansas® member agencies; Kansas Child Care Opportunities, Inc. (KCCTO); Early Childhood Associate Apprenticeship Program (ECAAP) and the Kansas Enrichment Network.

No

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

Yes. If yes, describe

In the Early Childhood Associate Apprenticeship Program (ECAAP), mentors are assigned to formally supervise and mentor apprentices. Mentors must complete college credit coursework prior to mentoring, and receive a token stipend when they mentor an apprentice. In Head Starts and Early Head Starts, consultants and specialists are used on an as-needed basis to provide technical assistance with individual children and families.

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Technical assistance and consultations are available to providers through the Child Care Aware Quality STEP program, the Early Childhood Wellness Project, and the Infant and Toddler Specialist Services offered through Child Care Aware of Kansas.

Through their training delivery system, KCCTO provides for coaching, mentoring, and technical assistance to CDA candidates. KCCTO will further offer train the trainer events across Kansas to increase coaching, mentoring, and technical assistance knowledge and skills. This will be accomplished through: 1) supporting face to face training by offering and coordinating regular training events to increase trainer and technical assistance components; 2) updating the current CDA Advisor Course; 3) offering the CDA course on line; 4) establishing a web based CDA advisory registry housed within their Workforce Development Center; and including in this a searchable listing of CDA advisors who meet the Council of Professional Development Eligibility requirements and have completed the on-line CDA Advisor training.

No

3.4.5 Workforce Element 5- Compensation, Benefits and Workforce Conditions

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

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

- Yes. If yes, describe
 No

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

- Yes. If yes, describe The TEACH® and WAGE\$® use rewards. The Kansas Quality Rating Information System also allows these if they are part of the written Program Improvement Plan. These rewards are not funded through CCDF and are not available statewide.
 No

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

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- Yes. If yes, describe
 No

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

- Yes. If yes, describe
 No

3.4.6 Data & Performance Measures on the Child Care Workforce –

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

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

- Data on the size of the child care workforce. Describe (optional) A workforce study was completed in 2010 and can be found at:
http://www.ks.childcareaware.org/PDFs/2010%20Workforce%20Studies/WKFC_Study2010.pdf
- Data on the demographic characteristics of providers or providers working directly with children. Describe (optional)) A workforce study was completed in 2010 and can be found at:
http://www.ks.childcareaware.org/PDFs/2010%20Workforce%20Studies/WKFC_Study2010.pdf
- Records of individual teachers or caregivers and their qualifications. Describe (optional) Using NACCRRWare, Child Care Aware of Kansas® maintains data on teachers and caregivers known to that system.
- Retention rates. Describe (optional)
- Records of individual professional development specialists and their qualifications. Describe (optional)
- Qualifications of teachers or caregivers linked to the programs in which they teach. Describe (optional) The Kansas Preschool Program conducted by the Kansas State Department of Education, links teachers to programs, but this is not statewide.
- Number of scholarships awarded . Describe (optional) The number of scholarships is tracked by the Early Childhood Association

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Apprenticeship Program (ECAAP), Child Care Aware of Kansas, and Kansas Child Care Training Opportunities, Inc. (KCCTO).

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

Number of credentials and degrees conferred annually. Describe (optional) This data is limited. This information is limited and specific to The Early Childhood Associate Apprenticeship Program (ECAAP) tracks the number of apprenticeship credentials conferred annually.

Data on T/TA completion or attrition rates. Describe (optional): This data is limited to T/TA tracked by the lead agency. The state will be monitoring the program support initiatives described earlier in this plan. These will include an evaluation of the individual programs and data collection regarding: Services provided through the network of professional development, direct and indirect technical assistance, and other resources made available to the early childhood workforce.

Data on degree completion or attrition rates. Describe (optional)

Other. Describe _____

None

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

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

Yes.

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

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

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

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

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

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- Education and training staff (such as trainers, CCR&R staff, faculty). Describe
- Other. Describe
- None

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

- all providers working in programs that are licensed or regulated by the State/Territory to serve children birth to 13?
- all providers working in programs that receive public funds to serve children birth to age 13?

No

c) **Performance measurement.** What, if any, performance measures does the State/Territory use related to its workforce and professional development systems? For contractors receiving funding from CCDF funds, performance measures are set forth in individual contracts and reported on to the lead agency quarterly.

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

Workforce and professional development initiatives funded with CCDF funds are monitored and evaluated based upon performance measures outlined in each individual contract.

3.4.7 Goals for the next Biennium –

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

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

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

Goal 1 –Development of a searchable web based CDA Advisor Registry for child care providers’ use within the state.
Goal 2 –Development and maintenance of a searchable web based statewide training calendar with information on resources, supports, and training opportunities throughout Kansas.
Goal 3 -
Goal 4 -
Goal 5 -

AMENDMENTS LOG

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

Lead Agencies are required to request approval from Administration for Children and Families (ACF) whenever a “substantial” change in the Lead Agency’s approved CCDF plan occurs. Please refer to the ACF Program Instruction regarding CCDF Plan amendments for more information

<http://www.acf.hhs.gov/programs/occ/resource/pi-2009-01>

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

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

Instructions for Submitting Amendments:

Complete the first 3 columns of the Amendment Log and send a copy of the Log (showing the latest amendment sent to ACF) and the amended section(s) to the ACF Regional Office contact. Lead Agency also should indicate the Effective Date of the amended section in the footer at the bottom of the amended page(s). A copy of the Log, showing the latest amendment pending in ACF, is retained as part of the Lead Agency's Plan.

ACF will complete column 4 and returns a photocopy of the Log to the grantee following its review and approval of the amendment. The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

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

APPENDIX 1
QUALITY PERFORMANCE REPORT

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

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

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

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

- Provide a national assessment of State's and Territory's progress toward improving the quality of child care, including a focus on program quality and child care workforce quality;
- Track State's and Territory's annual progress toward meeting high quality indicators and benchmarks, including those that they set for themselves in their CCDF Plans and those that are of interest to the U.S. Department of Health and Human Services in measuring CCDF program performance;
- Assist national and State/Territory technical assistance efforts to help States/Territories make strategic use of quality funds; and
Assist with program accountability

This report collects progress on the five goals identified in Part 2 and Part 3 of the Child Care and Development Fund (CCDF) Plan for FY2014-2015 along with key data in relation to the four components of child care quality used as a quality framework in Part 3 of the Child Care and Development Fund Plan for FY 2014-2015:

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

Ensuring the Health and Safety of Children (Component #1)

In this section, Lead Agencies provide information on the minimum health and safety standards and activities in effect over the past year as of September 30, 2014.

A1.1 Progress on Overall Goals

Based on the goals described in the Lead Agency’s CCDF Plan at Section 3.1.7, please report your progress using the chart below.

You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., revised licensing regulation to include elements related to SIDS prevention, lowered caseload of licensing staff to 1:50, or increased monitoring visits to twice annually for child care centers). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible

Note: If your licensing standards changed during this period, please provide a brief summary of the major changes and submit the updated regulations to the National Resource Center for Health and Safety in Child Care (www.nrckids.org) _____

A1.2 Key Data

OCC is collecting this information as one part of our overall effort to better understand States/Territories’ activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here and that some data requested may be collected by another agency or entity other than the Lead Agency. Each State/Territory’s policy context and priorities and standards will

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play a role in the way that quality improvement activities are developed and implemented. For example, the number of programs with licensing violations will be affected by how stringent the licensing standards are. States with more stringent standards may be more likely to report more violations than those with less stringent licensing standards. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A1.2.1 Number of Programs

a) How many licensed center-based programs operated in the State/Territory as of September 30, 2014? _____

N/A

Describe:

b) How many licensed home-based programs operated in the State/Territory as of September 30, 2014? _____

N/A

Describe:

c) Does the State/Territory have data on the number of programs operating in the State/Territory that are legally exempt from licensing? At a minimum, the Lead Agency should provide the number of legally exempt providers serving children receiving CCDF.

Yes. If yes, include the number of programs as of September 30, 2014 and describe (Use the Describe Box to provide the universe of programs on which the number is based)

No. Describe:

A1.2.2 Number and Frequency of Monitoring Visits

For licensed programs, a monitoring visit is an onsite visit by department personnel to a licensed child care program with the goal of ensuring compliance with licensing regulations. This may include initial licensing determination visits, licensing renewal visits, periodic announced or unannounced visits, and visits made after a complaint is lodged. For legally exempt providers, a monitoring visit is an onsite visit to a child care program with the goal of ensuring compliance with health and safety standards as defined by CCDF and required for receipt of CCDF funds. Use the Describe box to provide your State/Territory monitoring visit requirement.

a) How many licensed center-based programs received at least one monitoring visit between October 1, 2013 and September 30, 2014?

_____ a-1) Of those programs visited, how many were unannounced? _____

a-2) Of those programs visited, how many were triggered by a complaint or identified risk? _____

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a-3) What percentage of required visits for licensed center-based program were completed? _____

N/A

Describe:

b) How many licensed family child care programs received at least one monitoring visit between October 1, 2013 and September 30, 2014?

_____ b-1) Of those programs visited, how many were unannounced? _____

b-2) Of those programs visited, how many were triggered by a complaint or identified risk? _____

b-3) What percentage of required visits for licensed family child care programs were completed? _____

N/A

Describe:

c) How many legally exempt providers receiving CCDF received at least one monitoring visit between October 1, 2013 and September 30, 2014? Of those,

c-1) Of those programs visited, how many were unannounced? _____

c-2) Of those programs visited, how many were triggered by a complaint or identified risk? _____

c-3) What percentage of required visits for legally exempt providers were completed? _____

N/A

Describe:

A1.2.3 Number of Licensing Suspensions, Licensing Revocations and Terminations from CCDF

Suspension of license includes any enforcement action that requires the temporary suspension of child care services because of licensing violations. Revocation of license includes termination or non-renewal of licensure and any other enforcement action that requires the closure of a program because of licensing violations.

	How many programs had their licenses suspended due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs had their licenses revoked due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs were terminated from participation in CCDF due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year?	N/A	Describe
Child Care Centers				<input type="checkbox"/>	

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	How many programs had their licenses suspended due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs had their licenses revoked due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs were terminated from participation in CCDF due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year?	N/A	Describe
Group Child Care Homes	█	█	█	<input type="checkbox"/>	█
Family Child Care Homes	█	█	█	<input type="checkbox"/>	█
In-Home Providers	█	█	█	<input type="checkbox"/>	█

A1.2.5 How many previously license-exempt providers were brought under the licensing system during the last fiscal year? _____

N/A

Describe: █

A1.2.6 How many injuries as defined by the State/Territory occurred in child care during the last year?

Please provide your definition of injuries in the Describe box and indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). _____

N/A

Describe: █

A1.2.7 How many fatalities occurred in child care or as the result of a child care accident or injury as of the end of the last year?

Please indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). _____

N/A

Describe: █

Establishing Early Learning Guidelines (Component #2)

A2.1 Progress on Overall Goals

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A2.1.1 Did the State/Territory make any changes to its voluntary early learning guidelines (including guidelines for school-age children) as reported in 3.2 during the last fiscal year?

- Yes. Describe _____
 No

A2.1.2 Based on the goals described in the Lead Agency’s CCDF Plan at Section 3.2.8, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs trained on using the ELG’s, Aligned the ELG’s with Head Start Child Development and Early Learning Framework). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible

A2.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory’s policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A2.2.1a How many individuals were trained on early learning guidelines (ELG’s) or standards over the last fiscal year?

Responses to this question should be consistent with information provided in question 3.2.3 in the CCDF Plan.

Provider Categories	Birth to Three ELG’s	Three-to-Five ELG’s	Five and Older ELG’s	N/A	Describe

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Provider Categories	Birth to Three ELG's	Three-to-Five ELG's	Five and Older ELG's	N/A	Describe
How many teachers/providers in center-based programs were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____	_____	_____	<input type="checkbox"/>	_____
How many family child care providers were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____	_____	_____	<input type="checkbox"/>	_____
How many legally exempt providers were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____	_____	_____	<input type="checkbox"/>	_____

A2.2.1b How many children are served in programs implementing the ELG's?

Refer to question 3.2.4 in the CCDF Plan for examples of how ELG's can be implemented in programs. Program capacity can be used as an estimate of children served.

Provider Categories	Birth to Three ELG's	Three-to-Five ELG's	Five and Older ELG's	N/A	Describe
How many children are served in center-based programs implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____	_____	_____	<input type="checkbox"/>	_____
How many children are served in program implementing the ELG's? Separate by age group	_____	_____	_____	<input type="checkbox"/>	_____

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Provider Categories	Birth to Three ELG's	Three-to-Five ELG's	Five and Older ELG's	N/A	Describe
if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____	_____	_____		
How many children are served in programs implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____ _____	_____ _____	_____ _____	<input type="checkbox"/>	_____

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

A3.1 Progress on Overall Goals

A3.1.1 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.3.9, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs included in the QRIS, Aligned the QRIS standards with Head Start performance standards, or expanded the number of programs with access to an on-site quality consultant). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible

A3.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual

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information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A3.2.1 Number of Program Receiving Targeted Technical Assistance

Targeted technical assistance is technical assistance (coaching, mentoring and consultation) that is designed to address a particular domain/area of quality. Responses in this section should be consistent with responses provided in question 3.3.2 in the CCDF Plan which focuses on targeted technical assistance to programs (rather than providers) that is intended for moving programs to higher levels of quality.

- a) How many programs received targeted technical assistance during the last fiscal year (October 1, 2013 through September 30, 2014)?

N/A

Describe:

- b) If possible, report the number of programs who received targeted technical assistance in the following areas:

Health and safety _____

Infant and toddler care _____

School-age care _____

Inclusion _____

Teaching dual language learners _____

Understanding developmental screenings and/or observational assessment tools for program improvement purposes _____

Mental health _____

Business management practices _____

N/A

Describe:

A3.2.2 Number of Programs Receiving Financial Supports

Responses to this question should be consistent with responses provided in question 3.3.3 of the CCDF Plan. **Financial supports** must be intended to reward, improve, or sustain quality. They can include grants, cash, reimbursements, gift cards, or purchases made to benefit a program. This includes tiered reimbursements for CCDF subsidies. **One-time grants, awards, or bonuses** include any kind of financial support that a program can receive only once. **On-going or periodic quality stipends** include any kind of financial support intended to reward, improve, or sustain quality that a program can receive more than once.

- a) How many programs received one-time, grants, awards or bonuses?

Child Care Centers _____

N/A

Describe:

Family Child Care Homes _____

N/A

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Describe:

b) How many programs received on-going or periodic quality stipends?

Child Care Centers _____

N/A

Describe:

Family Child Care Homes _____

N/A

Describe:

A3.2.3 Number of Eligible Programs for State/Territory QRIS or Other Quality Improvement System

a) What is the total number of eligible child care centers for QRIS _____ OR Other Quality Improvement System? _____

N/A

Describe:

b) What is the total number of eligible family child care homes for QRIS _____ OR Other Quality Improvement System? _____

N/A

Describe:

c) What is the total number of eligible license-exempt providers for QRIS _____ OR Other Quality Improvement System? _____

N/A

Describe:

A3.2.4 Number and Percentage of Programs Participating in State/Territory QRIS or Other Quality Improvement System

a) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of child care center programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of Child Care Centers Participating in QRIS _____ OR Other Quality Improvement System _____

Percentage of Child Care Centers Participating in QRIS _____ OR Other Quality Improvement System _____

N/A

Describe:

b) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of family child care programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

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Number of Family Child Care Homes QRIS _____ OR Other Quality Improvement System _____

Percentage of Family Child Care Homes QRIS _____ OR Other Quality Improvement System _____

N/A

Describe:

- c) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of license-exempt programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of License-Exempt Providers QRIS _____ OR Other Quality Improvement System _____

Percentage of License-Exempt Providers QRIS _____ OR Other Quality Improvement System _____

N/A

Describe:

A3.2.5. Number of Programs at Each Level of Quality

For each type of care, provide the total number of quality levels and the number of programs at that level of the total number of participating as reported in A3.2.4. Describe metric if other than QRIS, such as accreditation.

	Number of levels of quality	Number of programs at each level	N/A	Describe
Child Care Centers			<input type="checkbox"/>	
Family Child Care Homes			<input type="checkbox"/>	
License-Exempt Providers			<input type="checkbox"/>	

A3.2.6 Number of Programs Who Moved Up or Down within QRIS

If quality threshold is something other than QRIS, describe the metric used, such as accreditation. These numbers ARE NOT expected to total the number of participating programs in the QRIS as reported in A3.2.4.

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	How many programs moved up within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year?	How many programs moved down within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year?	N/A	Describe
Child Care Centers	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Family Child Care Homes	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
License-Exempt Providers	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

A3.2.7 Number of CCDF Subsidized Children Served in Programs Participating in the State/Territory Quality Improvement System

Note. If the State/Territory does not have a formal QRIS, the State/Territory may define another quality indicator and report it here.

- a) What percentage of CCDF children were served in participating programs during the last fiscal year? _____
- b) What percentage of CCDF children were served in high quality care as defined by the State/Territory? _____ Provide the definition of high quality care in the Describe box. This may include assessment scores, accreditation, or other metric, if no QRIS.

N/A
Describe:

Pathways to Excellence for the Child Care Workforce: Professional Development Systems and Workforce Initiatives (Component #4)

A4.1 Progress on Overall Goals

A4.1.1 Based on the goals described in the Lead Agency’s CCDF Plan at Section 3.4.7, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Implement a wage supplement program, Develop articulation agreements). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible
--	--

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Goals Described in FY 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible

A4.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory’s policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A4.2.1 Number of Teachers/Caregivers and Qualification Levels

- a) What is the total number of child care center teachers in the State/Territory as of September 30, 2014? _____
 N/A
 Describe:

- b) What is the total number of family child care providers in the State/Territory as of September 30, 2014? _____
 N/A
 Describe:

- c) What is the number of center teachers and family child care providers by qualification level as of the end of the last fiscal year? Count only the highest level of education attained.

	Child Care Center Teachers	Family Child Care Providers	N/A	Describe
Child Development Associate (CDA)	_____	_____	<input type="checkbox"/>	_____
State/Territory Credential	_____	_____	<input type="checkbox"/>	_____
Associate’s degree	_____	_____	<input type="checkbox"/>	_____
Bachelor’s degree	_____	_____	<input type="checkbox"/>	_____

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	Child Care Center Teachers	Family Child Care Providers	N/A	Describe
Graduate/Advanced degree	_____	_____	<input type="checkbox"/>	_____

A4.2.2 Number of Individuals Included in State/Territory’s Professional Development Registry during Last Fiscal Year (October 1, 2013 through September 30, 2014)

Teachers in child care centers _____
 Family child care home providers _____
 License-exempt providers _____
 N/A
 Describe:

A4.2.3 Number of Individuals Receiving Credit-Based Training and/or Education as defined by State/Territory during the last fiscal year

Teachers in child care centers _____
 Family child care home providers _____
 License-exempt providers _____
 N/A
 Describe:

A4.2.4 Number of Credentials and Degrees Awarded during Last Fiscal Year

If possible, list the type of credential or degree and in what type of setting the provider worked.

Setting	List Type of Credential and Provide Number Awarded	List Type of Degree and Provide Number Awarded	N/A	Describe
Teachers in child care centers	_____	_____	<input type="checkbox"/>	_____
Family child care home providers	_____	_____	<input type="checkbox"/>	_____
License-exempt providers	_____	_____	<input type="checkbox"/>	_____

A4.2.5 Number of Individuals Receiving Technical Assistance during Last Fiscal Year

Describe any data you track on coaching, mentoring, or other specialist consultation. If possible, include in what type of setting the provider worked. Responses to this

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question should be consistent with information provided in question 3.4.4e of the CCDF Plan.

Setting	List Type of Technical Assistance and Provide Number	N/A	Describe
Teachers in child care centers	_____	<input type="checkbox"/>	_____
Family child care home providers	_____	<input type="checkbox"/>	_____
License-exempt providers	_____	<input type="checkbox"/>	_____

A4.2.6 Type of Financial Supports Provided and Number of Teachers/Providers Receiving as of End of Last Fiscal Year?

- Scholarships. How many teachers/providers received? _____
 - Reimbursement for Training Expenses. How many teachers/providers received? _____
 - Loans. How many teachers/providers received? _____
 - Wage supplements. How many teachers/providers received? _____
 - Other. Describe
 - N/A
- Describe:

Building Subsidy Systems that Increase Access to High Quality Care

In this section, Lead Agencies provide progress on their subsidy administration goals over the past year as of September 30, 2014.

A5.1 Progress on Overall Goals

Based on the goals described in the Lead Agency’s CCDF Plan at Section 2.8, please report your progress using the chart below. You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., established copayment policies that sustain income and sustain quality, or established eligibility policies that promote continuity of care). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible

APPENDIX 2
CCDF PROGRAM ASSURANCES AND CERTIFICATIONS

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

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

The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))

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

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

1. Assurance of compliance with Title VI of the Civil Rights Act of 1964:

<http://www.hhs.gov/forms/HHS690.pdf>

2. Certification regarding debarment:

<http://www.acf.hhs.gov/grants/certification-regarding-debarment-suspension-and-other>

3. Definitions for use with certification of debarment:

<http://www.acf.hhs.gov/grants/certification-regarding-debarment-suspension-and-other-o>

4. HHS certification regarding drug-free workplace requirements:

<http://www.acf.hhs.gov/grants/certification-regarding-drug-free-workplace-requirements>

5. Certification of Compliance with the Pro-Children Act of 1994:

<http://www.acf.hhs.gov/grants/certification-regarding-environmental-tobacco-smoke>

6. Certification regarding lobbying:

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<http://www.acf.hhs.gov/grants/certification-regarding-lobbying>

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

Attachment 1.6.1 a

Kansas Department for Children and Families

DCF Disaster Response Guidelines

Introduction

DCF seeks to respond in a coordinated, effective and efficient manner to all disasters and emergency situations that come our way. Weather related disasters can come in many forms and vary greatly in their magnitude. Emergency situations fluctuate from being a minor disruption to causing complete interruption of business and community life for an extended period of time.

Different types of emergency situations, from destruction of a Service Center, to a devastated community, to a radioactive release from a nuclear power station all require a different type of response. In the Kansas Emergency Management Plan, DCF is the primary agency for Emergency Support Function 6: Mass Care, Housing and Human Services, and this too brings with it certain agency obligations during times of disaster.

The information contained in this document is primarily about the human-side of responding to a disaster and is not focused on the recovery of business operations. The document is meant to be a resource for DCF staff involved in planning for and responding to a disaster or emergency situation. The information in the document cannot substitute for good judgment and reason, nor can it address every possible situation that may present itself during a crisis.

Emergency Support Function (ESF) 6: Mass Care, Housing and Human Services

Each ESF in the Kansas Response Plan is headed by a primary state agency which has been selected based on its authorities, resources and capabilities in that functional area. DCF is the primary agency for ESF 6: Mass Care, Housing and Human Services. In addition to sending a representative to the State Emergency Operations Center (SEOC) to manage that function when the SEOC is activated during an emergency, DCF has a role in helping Emergency Managers plan and provide for the safety of every person in the community, including individuals in the community requiring special assistance, and populations considered vulnerable, at risk or special needs.

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How to address the transportation, shelter, and unique support needs of individuals with special needs should be addressed by the Emergency Managers, of each county or region in the State, in their Emergency Operations Plan (EOP). DCF Regional Staff can assist Emergency Managers in knowing the distinct populations within their regions for which to plan and for identifying resources in the area that can assist special needs populations during an emergency.

As long as individuals with special needs have family or staff who can accompany them and meet their needs they will be able to go to any Red Cross Shelter during an evacuation. If individuals with special needs do not have a support person or caregiver who can accompany them, in the course of developing their EOP, County Emergency Managers should make arrangements to provide this necessary support, preferably within the Red Cross Shelter, or in an alternative location if necessary. The Emergency Manager may seek assistance from DCF PPS staff and staff from other community agencies to provide the support and care giving needed by someone with special needs in a shelter who is not accompanied by a care giver.

DCF can also help to ensure that providers under contract with the agency to serve vulnerable consumers have adequate plans in place to provide for the safety of individuals they serve. If the provider of services plan for insuring the safety of their consumers is insufficient, the County Emergency Manager should have addressed this contingency in their EOP.

Web addresses for resources that may be helpful include:

- The Kansas Response Plan
<http://www.accesskansas.org/kdem/pdf/library/2008%20KRP.pdf>
- Kansas Emergency Managers by County
http://www.kansas.gov/kdem/contact_us/cocoordinator_lepclisting.shtml
- Emergency Management Institute (EMI) on-line course regarding special needs populations
<http://training.fema.gov/EMIWeb/IS/is197SP.asp>.
- FEMA's Planning Guide for Special Needs Populations
<http://www.fema.gov/pdf/media/2008/301.pdf>

Coordinated Response

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The Kansas Response Plan (KRP) is built on the template of the National Incident Management System (NIMS) which provides a consistent framework for incident management at all jurisdictional levels. While most emergency situations are handled locally, when there's a major incident help may be needed from other jurisdictions, the state and the federal government. NIMS was developed so responders from different jurisdictions and disciplines can work together better, because they are working under a standardized command and management structure.

Some general guidelines to Incident Management include:

- Emergency first responders will be the first on the scene of a disaster to conduct search and rescue efforts
 - During this time help from other agencies is not needed
- After search and rescue is complete and the response phase begins, all activities need to be coordinated through the incident command structure that has been established following the incident
- The County or Regional Emergency Manager is generally the Incident Commander
 - They often designate a Liaison Officer to be the point of contact for representatives of other governmental agencies and non-governmental organizations to provide input on their agency's available resources
 - All requests for state or federal resources needed to assist with the disaster response must come from the local Emergency Manager to the State Emergency Operations Center (SEOC)
 - The Emergency Support Function (ESF) representatives, from the various state agencies, who have responded to the SEOC, will work to acquire the resources needed by the Emergency Manager
- Unless DCF has been designated in the County's Emergency Operations Plan (EOP) as an entity that will provide support to special needs populations, DCF staff should contact the Incident Liaison Officer before responding to the disaster location, to find out if they are needed and where they should report.
 - If the Incident Liaison Officer cannot be reached DCF should contact the SEOC before responding to the disaster location. Phone numbers for the SEOC are:
 - Main Number = 785-274-1409 (during work hours)
 - 24 Hour Duty-Line (800-905-7521)
 - Devan Tucking-Strickler, Human Services Officer = 785-217-7233; cell: 785-231-4892

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- If DCF has been designated in the County's EOP as needing to assist with special needs populations, the staff should respond as outlined in the Plan

Some basic NIMS training, while not required, might be helpful for staff who will be involved in responding to disaster shelters or recovery sites, or who work with county emergency managers, first responders or providers in developing disaster response plans. NIMS Training Courses 100, 200 and 700 are designed to enable personnel to operate efficiently during an incident or event within the Incident Command System (ICS) and are available for free on-line.

These and other types of disaster response training can be accessed at <https://ks.train.org/DesktopShell.aspx>. Click on *Course Search*. On the left side of the page, under *Search Options*, click on *By Course ID*. The ID for the ICS 100 course is 1002558, for the ICS 200 course is 1005012 and for the ICS 700 course is 1002546. An account has to be set up on the home page in order to register for a course.

When a Significant Portion of a Community is affected by a Disaster (Regional Response)

❖ Pre-disaster Planning

- Keep your employee ID with you at all times, in order to enter a disaster service site (Shelter or Disaster Recovery Center)
- Have calling lists of Regional Management Team members in an accessible location. Managers should have calling lists of their staff available
- Keep this document in an accessible location as a reference in case of a disaster
- Have a sufficient number of lap tops for staff to work at more than one disaster service site at a time
- Prepare disaster response kits, containing applications, signage, work supplies, and lists of items and resources that may be needed at a disaster service site such as coolers, cell phones, contact information for Information Technology staff and Central Office Program staff. Have kits at several Service Centers in a Region, so that if one is destroyed another Service Center can make theirs available
- Develop relationships with local Red Cross and Salvation Army volunteers, and United Way 211 representatives in the Region.
 - The Red Cross
 - Is responsible for identifying shelter locations across Kansas
 - Opens and staffs shelters during disasters

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- Assists individuals find missing family members or friends
- Provides medical and psychological first aid to people impacted by the disaster
- The Salvation Army
 - Provides mobile feeding and hydration stations during disasters
 - Sorts and distributes donated goods
 - Provides direct financial assistance to disaster victims for essential living supplies, such as food, clothing, medicine, bedding or baby products; emergency housing needs; and disaster-related medical or funeral expenses
- United Way 211
 - Assists with coordinating volunteers during the response and recovery phases of a disaster
 - Assists with coordinating donations from businesses and organizations following a disaster by matching known needs with businesses and organizations willing to donate goods

❖ Initial Response

(If the SEOC is activated, the DCF Representative who reports to the SEOC will notify the DCF Executive Team and the Regional Directors that the SEOC is operating)

- Contact agency personnel who live in the disaster area to ensure their safety
- Notify Regional staff and DCF Executive Team regarding the safety of staff impacted by the disaster
- Provide a status report regarding DCF special needs populations to the Incident Management Team Liaison Officer (Central Office Program Managers will have contact providers in the impacted area to check on the safety of special needs consumers and communicated this information to the Regional Office(s) and the DCF Representative at the SEOC)
- Designate a single point of contact for DCF ITS and Operations
- Central Office ITS single point of contact is John Moyer; and Central Office Operations single point of contact is Bobby Kosmala
- Determine one person who will be the on-site coordinator for DCF services, and assure they have accommodations close by, if necessary
- After emergency first responders have completed search and rescue efforts, contact the Incident Management Team Liaison Officer (or the SEOC), informing him/her of the services you have to offer and asking permission to go to the designated disaster services site

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- Identify who is managing the disaster services site and inform them of your presence and why you are there
- If the disaster is significant and there is the likelihood that Federal Public and Individual Assistance will be forthcoming contact the DCF Representative at the SEOC, or the SEOC directly to ask for a Task Number that will allow DCF to receive FEMA reimbursement if a federal disaster is later declared. Phone numbers for the SEOC are:
 - Main Number = 785-274-1409 (during work hours)
 - 24 Hour Duty-Line (800-905-7521)
 - Devan Tucking-Strickler, Human Services Officer = 785-217-7233; cell: 785-231-4892
- The DCF on-site coordinator needs to be in contact with the Incident Management Team Liaison Officer on an on-going basis to coordinate operations with other responding agencies and to notify him/her of unmet needs. The Liaison can request the Incident Commander contact the SEOC to ask for assistance in addressing unmet needs
- If a Disaster Recovery Center is open where multiple state agency services will be located, or if DCF applications will be taken at a shelter, have a disaster response kit brought to the site
- Develop a schedule for staff coverage at the Disaster Recovery Center and/or shelters and begin tracking hours worked immediately
- Insure staff are clear regarding what benefits and services are available through DCF:
 - Vision Cards and Medical Cards will be replaced and applications for assistance will be processed on a priority basis for individuals living in the disaster area
 - Individuals who were receiving Food Assistance prior to the disaster are eligible for replacement of benefits for lost food
 - *If a Federal Disaster with Individual Assistance is declared*, income verification requirements may be temporarily waived, and disaster expenses may be deducted from income for families living in the counties included in the Federal declaration
 - TANF, APS, Family Services, and Community Services allocations may be utilized to assist families affected by the disaster, but the *program guidelines for utilizing these funds must be followed*. Central Office Program Directors may waive some of the paperwork requirements

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- Free crisis counseling to residents of counties declared a Federal disaster is available immediately and for up to one year following the disaster through the All Hazards Behavioral Health program
- Ensure same-day APS and CPS investigations are referred to Social Workers not impacted by the disaster
- Refer families needing assistance not available through DCF to the Red Cross, Salvation Army or other Volunteer Agency active in the disaster
- Local Operations staff need to work with Central Office Operations and ITS to set up telephone and computer system access, and supply equipment to the Disaster Recovery Center/Shelter, as needed
- Inform DCF Exec Team regarding the extent of DCF response operations in the disaster area

❖ Continuing Response

- The DCF on-site coordinator should attend community response/recovery coordination meetings, as long as DCF continues to play a role in the response and recovery
- Keep DCF Exec and Regional Staff informed regarding the on-going status of DCF involvement in the response and recovery
- Rotate staff responding to the disaster service site, if the response time is lengthy
- Provide for the mental health needs of staff impacted by the disaster and involved in the response operations
- Resume normal operations as soon as possible

Nuclear Power Station Emergency

Wolf Creek Nuclear Power Station near Burlington, KS

Cooper Nuclear Power Station near Brownville, NE

- If there is a nuclear accident, the Kansas Division of Emergency Management (KDEM) will activate the State Emergency Operations Center (SEOC). A representative from DCF will report to the SEOC to serve as the coordinator for emergency operations related to mass care, housing and human services
- The DCF representative at the SEOC will notify the DCF Executive Team; the Regional Directors, Family Services Directors, and Ops Directors; and the PPS Director and Assistant Director of the accident

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- Each Region and PPS should acknowledge receipt of the first notification so that the DCF SEOC representative knows that someone will be monitoring future updates

- The DCF representative at the SEOC will continue to keep the DCF Executive Team; the Regional Directors, Family Services Directors, and OPS Directors; and the PPS Director and Assistant Director informed as events unfold at the nuclear power station. The types of information provided will include:
 - Counties impacted by the accident
 - Evacuation orders
 - Shelter locations

- Only Regions with counties impacted by the accident and PPS need to continue to keep the DCF SEOC representative informed regarding what actions they are taking such as:
 - Determining the safety of DCF special needs consumers (PPS)
 - Providing support and assistance to individuals with special needs according to the county's Emergency Operations Plan (EOP), or as approved by the Incident Management Team Liaison Officer (Region)
 - Deploying to shelters to offer assistance to Red Cross volunteers (Region)

- If a shelter is open, the DCF SEOC representative will add the following individuals to their notifications:
 - Central Office EES Director
 - Central Office, EES Strengthening Family Services Director
 - Central Office, EES Commodities Manager

- The DCF representative at the SEOC will relay the information received from PPS regarding the safety of DCF special needs consumers to the DCF Executive Team, the

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impacted Region(s), and the SEOC Director, who is in communication with the Incident Management Team

When an DCF Service Center is Damaged or Destroyed (Regional Response)

❖ Pre-disaster planning

- Keep your employee ID with you at all times, in order to be allowed into the disaster site
- Keep staff emergency contact phone numbers in an accessible location, as computer equipment may not be working
- Keep this document in an accessible location as a reference in case of a disaster
- Establish and test calling-trees as a means of contacting staff
- Establish which staff will be allowed to enter a damaged or destroyed Service Center
- Staff allowed to enter the Service Center should have keys to the building, as electronic entry devices may not be working
- Designate a single point of contact for DCF ITS and Operations
- Central Office ITS single point of contact is John Moyer; and Central Office Operations single point of contact is Bobby Kosmala
- Be prepared to quickly provide personal safety items, such as gloves, face masks, etc, to staff allowed to enter the Service Center and assist with file recovery and clean up
- Establish how to dispose of or salvage damaged files and office equipment
- Ensure all staff are aware of their alternative work site, and other aspects of the Region's Continuation of Operations Plan (COOP), in the event a Service Center is closed for a period of time
- Review with staff the location of office tornado shelters

❖ Initial Response

- Wait until local emergency first responders have completed search and rescue efforts before the designated staff go to the Service Center impacted by the disaster
- Notify the Incident Management Team Liaison that you will be entering the disaster site and going to the damaged Service Center
- Enter the Service Center, when determined to be safe, to assess the damage and secure confidential files
- Utilize personal safety items, such as gloves and face masks to protect yourself from injury
- Take reasonable efforts to prevent further damage to the property, equipment and files

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- Notify Service Center staff regarding the status of Service Center operations for the day
- Notify all Regional Staff and the DCF Executive Team regarding the safety of staff and status of Service Center operations

❖ Continuing Response

- Arrange for confidential files and salvageable equipment to be removed from the building if necessary
- Organize clean up tasks so staff can work efficiently, and provide personal safety items, such as gloves and face masks
- Coordinate repair or replacement of the building with Central Office Operations and the landlord
- Implement the Regional COOP or resume normal operations as soon as possible

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Attachment 1.6.1 b

Bureau of Family Health
Child Care Licensing Program
Curtis State Office Building
1000 SW Jackson St., Suite 200
Topeka, KS 66612-1274



Phone: 785-296-1270
Fax: 785-296-0803
cclr@kdheks.gov
www.kdheks.gov/kidsnet

Robert Moser, MD, Secretary

Department of Health & Environment

Sam Brownback, Governor

Emergency Disaster Guidelines
Early Care and Youth Programs

The purpose of this document is to provide guidance to local health departments, child care and school age programs and partners regarding the care of children and youth in facilities when their parents are absent, when the community experiences a natural or environment disaster. Guidelines are provided for 1) temporary emergency facilities within the disaster area or set up outside the disaster area but not licensed at the time of the disaster, 2) regulated facilities not directly impacted by the disaster; and 3) local health departments contracted to provide child care regulatory services affected by the disaster and 4) regulated facilities that are within the disaster area or facilities temporarily closed and then reopened following the disaster.

Temporary Emergency Child Care Facilities within the disaster area or set up outside the disaster but not licensed at the time of the disaster:

The department will not require the licensure of Temporary Emergency Child Care Facilities located within Emergency Shelters for displaced families. In addition, Emergency Child Care organized and operated by relief agencies such as the American Red Cross or Salvation Army or local organizations or volunteers to provide child care for emergency workers and displaced children and youth will not require licensure.

While the department is not requiring licensure of Emergency Temporary Child Care Facilities noted above, the department expects that safe and healthy child care practices are provided for displaced children and youth.

Consideration should be given to:

Basic Record Keeping

For children and youth:

- Name, age and gender
- Basic health information including known allergies, special needs and medications

For adults:

- Name and address of adults supervising the children and youth

Preventing the spread of communicable disease

- Emphasize the necessity of hand washing with soap and running water
- Post hand washing and safe diapering procedures in bathrooms and diapering areas
- Avoid shared bedding
- Disinfect eating areas before and after each use

Providing adequate supervision of adults working with children and youth including structure for staff support and children and youth: Recommended staff/child ratios and group size:

<u>Ages of Children/Youth</u>	<u>Staff/Child Ratio</u>	<u>Group Size</u>
Mixed Age Grouping, limit 2 infants	1 to 5	10
Infants to 12 months	1 to 3	9
Toddlers (12 months to 2 ½ years)	1 to 5	10
Preschool (2 ½ to school age)	1 to 10	20
School age	1 to 15	30

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Providing a framework for structure, routine and age appropriate activities

Ensuring safe toys and materials

The department recommends that healthy adults and children 16 years of age and older working or volunteering in Temporary Emergency Child Care Facilities obtain current immunizations in consultation with their health care provider.

Regulated Child Care and School Age Program Facilities not directly impacted by the disaster:

The department is granting the following allowances in Kansas Child Care Regulation to ease any barriers in community efforts to accommodate a shortage of adult child care workers, displaced families, children and youth into existing regulated child care facilities:

Displaced children and youth entering regulated child care facilities for temporary emergency care:

- not required to provide documentation of current immunizations and health assessment for up to 60 days
- obtain as much information as possible about the children's/youth's health needs including any current medications being taken and any known medication, food or other allergies.

Healthy adults and children 16 years of age and older placed for temporary emergency housing or to provide assistance in care for children and youth:

- not required to provide documentation of a current negative TB test or health assessment for up to 6 months
- identifying information is to be submitted to the department for background checks within 5 days
- persons exhibiting symptoms of illness or who have been exposed to communicable disease should consult immediately with a health care professional

Licensed capacity and supervision in case of Natural or Environmental Disaster:

If a shortage of child care or child care workers exists to provide child care during such an emergency, licensed capacity or staff/child ratios may be exceeded when no other community options exist. Supervision of children and youth and communicable disease controls must be maintained. The licensee remains responsible for the children's health, safety and well-being.

If temporary housing or the placement of emergency relief workers children in a regulated family foster home would cause the facility to exceed the license capacity, foster care staff should be contacted via telephone for review on a case by case basis for possible options and solutions. If a residential facility needs exception to regulations to accept additional children or youth or if a new residential facility needs to be opened, the local child care surveyor and KDHE foster care administrator must be notified immediately for coordination. The foster care staff will prioritize review of cases involving displaced families for quick resolution.

Local health departments contracted to provide child care regulatory services affected by the disaster:

In case of significant staff shortage when emergency response procedures are in place for public health, the local contractor is to respond to critical child care regulatory complaints and communicable disease surveillance in child care facilities. All other child care regulatory work stated in the contract may be suspended until normal operations resume.



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Local health departments should work within their geographic area with other health departments to develop a preparedness plan that would include assistance for child care regulatory activity in case of disaster and work assist as a contact person in efforts to coordinate child care needs in the community.

When local child care regulatory services resume, the child care facility surveyor will work with KDHE staff to develop a plan to conduct local regulatory services that were temporarily suspended during the disaster, including identification and coordination regarding licenses that were non-renewed and new applications that may need to be closed due to lost facilities.

Guidance for regulated facilities within the disaster area or facilities that are temporarily closed and then reopened following the disaster:

Facilities that are not structurally damaged and with access to a supply of clean drinking water (may be bottled or made safe following boiling), may remain open. Facilities must have electricity and a working phone. If heating or cooling is not functioning, efforts to safely control temperature for comfort are made.

When facilities that were damaged during a disaster are ready to re-open, the local child care facility surveyor or KDHE designee is to be notified. KDHE will request a compliance check of the environment to assess health and safety. Details provided on the survey request should contain disaster/emergency type and request to prioritize the survey. The child care facility surveyor will conduct the survey and forward to KDHE. The licensee will be notified when it is safe to resume child care.

When a licensee moves to another facility, a new application is required and will be given priority processing by KDHE to expedite issuance of a temporary permit or license. Applicants are to mark the application in large, bold print **DISASTER PRIORITY APPLICATION** and submit to the local child care facility surveyor or KDHE designee.

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Attachment 2.4.1 Sliding Fee Schedule

Kansas Department for Children and Families Monthly Family Income and Family Share Deduction Schedule for Child Care Services Effective May 1, 2013

Families, may apply for DCF child care subsidy. This subsidy is based on the gross monthly income and size of the family. A Family Share Deduction (FSD) may be assigned to the family and is determined by using the chart below. This deduction is used to reduce the total benefit and the family then receives the net amount. This net benefit amount may not fully cover the cost of care. The provider charges the family according to their set rates, and any charges not covered by the DCF subsidy are the responsibility of the family to pay.

Notes:

1. There is only one deduction scheduled for all families.
2. The family's income must be equal to or under the "Income Limit" amount.

Family Members	Level I 70% Of Poverty		Level II 100% Of Poverty		Level III 110% Of Poverty		Level IV 120% Of Poverty		Level V 130% Of Poverty		Level VI 140% Of Poverty		Level VII 150% Of Poverty		Level VIII 160% Of Poverty		Level IX 170% Of Poverty		Level X 180% Of Poverty		Level XI 185% Of Poverty	
	Limit	FSD	Limit	FSD	Limit	FSD	Limit	FSD	Limit	FSD	Limit	FSD	Limit	FSD	Limit	FSD	Limit	FSD	Limit	FSD	Limit	FSD
2	\$905	\$0	\$1,293	\$18	\$1,422	\$46	\$1,552	\$63	\$1,681	\$84	\$1,810	\$110	\$1,940	\$141	\$2,069	\$165	\$2,198	\$175	\$2,327	\$186	\$2,392	\$197
3	1,140	0	1,628	22	1,791	58	1,954	79	2,116	106	2,279	138	2,442	177	2,605	207	2,768	220	2,930	233	3,012	243
4	1,374	0	1,963	27	2,159	70	2,356	95	2,552	127	2,748	166	2,945	213	3,141	249	3,337	265	3,533	281	3,632	293
5	1,609	0	2,298	31	2,528	82	2,758	112	2,987	149	3,217	194	3,447	250	3,677	291	3,907	310	4,136	329	4,251	343
6	1,843	0	2,633	36	2,896	94	3,160	128	3,423	170	3,686	222	3,950	286	4,213	333	4,476	355	4,739	376	4,871	392
7	2,078	0	2,968	40	3,265	106	3,562	144	3,858	192	4,155	251	4,452	322	4,749	375	5,046	400	5,342	424	5,491	442
8	2,312	0	3,303	45	3,633	118	3,964	160	4,294	213	4,624	279	4,955	358	5,285	418	5,615	445	5,945	471	6,111	492
9	2,547	0	3,638	49	4,002	130	4,366	176	4,729	235	5,093	307	5,457	394	5,821	460	6,185	489	6,548	519	6,730	541
10	2,781	0	3,973	54	4,370	142	4,768	192	5,165	256	5,562	335	5,960	430	6,357	502	6,754	534	7,151	567	7,350	591
11	3,016	0	4,308	59	4,739	154	5,170	209	5,600	278	6,031	363	6,462	467	6,893	544	7,324	579	7,754	614	7,970	641
12	3,250	0	4,643	63	5,107	166	5,572	225	6,036	300	6,500	392	6,965	503	7,429	586	7,893	624	8,357	662	8,590	691

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ATTACHMENT 2.6.1 Child Care Certificate

DEPT FOR CHILDREN & FAMILIES 260680
1901 DELAWARE ST
LAWRENCE KS
66046-3173

SALLY BROWN JR
3406 HAMMOND APT B
LAWRENCE KS 66049

STATE OF KANSAS
DEPARTMENT FOR CHILDREN AND FAMILIES
CHILD CARE FAMILY PLAN

DATE 04/26/13

PARENT: SALLY BROWN JR

CASE NUMBER: 12305678

THIS IS THE AMOUNT OF CHILD CARE BENEFITS YOU WILL RECEIVE EACH MONTH. THE CHILD CARE BENEFITS LISTED IN THIS NOTICE ARE IN ADDITION TO ANY CHILD CARE BENEFITS YOU HAVE ALREADY RECEIVED FOR THESE MONTHS.

MAY 2013			JUNE 2013		
	HOURS	BENEFIT		HOURS	BENEFIT
JOHNNY	157	256.84	JOHNNY	157	256.84
PROVIDER TOTAL:		256.84	PROVIDER TOTAL:		256.84
OLSON, LENA		C195821	OLSON, LENA		C195821
TOTAL FOR MONTH:		256.84	TOTAL FOR MONTH:		256.84

JULY 2013			AUGUST 2013		
	HOURS	BENEFIT		HOURS	BENEFIT
JOHNNY	157	256.84	JOHNNY	157	256.84
PROVIDER TOTAL:		256.84	PROVIDER TOTAL:		256.84
OLSON, LENA		C195821	OLSON, LENA		C195821
TOTAL FOR MONTH:		256.84	TOTAL FOR MONTH:		256.84

SEPTEMBER 2013			OCTOBER 2013		
	HOURS	BENEFIT		HOURS	BENEFIT
JOHNNY	157	256.84	JOHNNY	157	256.84
PROVIDER TOTAL:		256.84	PROVIDER TOTAL:		256.84
OLSON, LENA		C195821	OLSON, LENA		C195821
TOTAL FOR MONTH:		256.84	TOTAL FOR MONTH:		256.84

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NOVEMBER 2013			DECEMBER 2013		
	HOURS	BENEFIT		HOURS	BENEFIT
JOHNNY	157	256.84	JOHNNY	157	256.84
PROVIDER TOTAL:		256.84	PROVIDER TOTAL:		256.84
OLSON, LENA		C195821	OLSON, LENA		C195821
TOTAL FOR MONTH:		256.84	TOTAL FOR MONTH:		256.84

JANUARY 2014			FEBRUARY 2014		
	HOURS	BENEFIT		HOURS	BENEFIT
JOHNNY	157	194.04	JOHNNY	157	194.04
PROVIDER TOTAL:		194.04	PROVIDER TOTAL:		194.04
OLSON, LENA		C195821	OLSON, LENA		C195821
TOTAL FOR MONTH:		194.04	TOTAL FOR MONTH:		194.04

MARCH 2014		
	HOURS	BENEFIT
JOHNNY	157	194.04
PROVIDER TOTAL:		194.04
OLSON, LENA		C195821
TOTAL FOR MONTH:		194.04

Payment for child care services is your responsibility. Child care benefits from DCF may not cover all your child care expenses.

Providers shall NOT collect the client's card PIN for benefits. This may be seen as provider fraud.

Expected hours of care are estimated based on information you provided to DCF. *YOU WILL NOT RECEIVE ANOTHER PLAN FOR THESE MONTHS

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UNLESS THE PLAN IS CHANGED OR AT YOUR REQUEST.* You are responsible for contacting DCF before this plan ends or when changes occur. Failure to notify DCF may result in your being responsible for incorrect benefits.

If you disagree with agency actions, you have Fair Hearing rights. DCF must get a written request within 30 days of the above date.

Benefits are contingent upon continued availability of government funding for child care. If funds are no longer available, this agreement may be reduced or terminated with ten days notice.

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FOR ADDITIONAL INFORMATION, CONTACT:

OPEN FILES LAWRENCE
DEPT FOR CHILDREN & FAMILIES 260680
1901 DELAWARE ST
LAWRENCE KS
66046-3173
(785) 832-3700

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