Child Care and Development Fund (CCDF) Plan

for

State/Territory

Kansas

FFY 2016-2018

This Plan describes the CCDF program to be administered by the State/Territory for the period 6/1/2016 – 9/30/2018. 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 of applicable laws printed herein 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 XXXX-XXXX expires XXXX

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Introduction and How to Approach Plan Development

Access to stable, high quality child care and early learning experiences improves the odds of success for two generations – parents and children - who rely on child care across the country. The Child Care and Development Fund (CCDF) provides resources to State, Territory, and Tribal grantees that enable low-income parents to work or pursue education and training so that they may better support their families while at the same time promoting the learning and development of their children. The CCDF also provides funding to enhance the quality of child care for all children.

On November 19, 2014, President Obama signed the bipartisan-supported Child Care and Development Block Grant (CCDBG) Act of 2014 into law (Pub.L. 113-186) (https://www.acf.hhs.gov/sites/default/files/occ/child_care_and_development_block_grant_markup.pdf). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for State and Territory grantees. The law establishes minimum child care assistance eligibility periods, health and safety standards and training requirements for providers, monitoring, consumer information and other components that when fully implemented will strengthen child care in this country and support child and family success.

States and Territories must comply with the provisions of the Child Care and Development Block Grant (CCDBG) Act, as revised by reauthorization. The Office of Child Care (OCC) has provided interpretive guidance on the new requirements of the law through Program Instructions or responses to Frequently Asked Questions, which are available at: http://www.acf.hhs.gov/programs/occ/ccdf-reauthorization. Pending the issuance of implementing regulations, States and Territories are to comply with the law based on their reasonable interpretation of the requirements in the revised CCDBG statute. Further Federal clarification through guidance and regulation is forthcoming. Once final rules are issued, any States and Territories that do not fully meet the requirements of the regulations will need to revise their policies and procedures to come into compliance, and file appropriate Plan amendments related to those changes.

CCDF Plan Overview. The Administration for Children and Families (ACF) re-designed the CCDF Plan to assist State and Territory grantees to plan for full implementation of the law. We recognize that the CCDBG Act of 2014 includes a significant number of changes, some of which are straightforward to implement, while others are complex and will be phased-in over several years. The level of effort needed for implementation will vary across the country depending on the number of changes a State or Territory needs to make. We encourage all States and Territories to take time to think systematically and consider large-scale changes to advance a coherent vision for their child care programs and achieve the goals of the reauthorization – that is, to improve the health, safety, and quality of child care and to improve low-income working families' access to child care assistance and care that promotes child development. Some States and Territories will need time to enact changes through their legislatures or rulemaking processes. In addition, some requirements will take time to fully operationalize. ACF will work with States and Territories to ensure that adoption and implementation of these important changes are done in a thoughtful and comprehensive manner.

The Plan process continues to be the primary mechanism by which ACF will determine State and Territory compliance with requirements in the new law. The CCDBG Act of 2014 changed the Plan cycle from a biennial to a triennial Plan period; thus, this Plan will cover a 3-year period. (658E(b)) States and Territories are required to submit their FY 2016-2018 CCDF Plans by March 1, 2016, and approved Plans will become effective June 1, 2016. This Pre-Print will provide a tool for States and Territories to describe to ACF their implementation plans to:

1. Define CCDF Leadership and Coordination with Relevant Systems
2. Promote Family Engagement through Outreach and Consumer Education
3. Provide Stable Child Care Financial Assistance to Families
4. Ensure Equal Access to High Quality Child Care for Low-Income Children
5. Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings
6. Recruit and Retain a Qualified and Effective Child Care Workforce
7. Support Continuous Quality Improvement
8. Ensure Grantee Accountability

These organizational categories reflect key functions of an integrated system of high quality care for low-income working families. Although the Plan is divided into sections for reporting and accountability purposes, ACF encourages Lead Agencies to approach the Plan in a cross-cutting, integrated manner. The intention is that grantees and the federal government will be able to use this information to track and assess progress, determine need for technical assistance and CCDF Plan amendments, and ultimately determine compliance with specific requirements and deadlines.

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The State/Territory acknowledges its responsibility to adhere to them regardless of these modifications. The Plan contains definitions where provided by law. For terminology not defined in the law, some illustrative examples may be provided. These should only be considered examples, and not requirements, for purposes of responding. If no definitions are provided, States/Territories should respond based on their own definitions for those terms.

CCDBG Implementation Deadlines. In some cases, the CCDBG Act of 2014 specifies a particular date when a provision is effective. Where the law does not specify a date, the new requirements became effective upon the date of enactment and States/Territories have until September 30, 2016 to implement the new statutory requirement(s). ACF has determined that when a State or Territory cannot certify compliance with a specific requirement at the time of CCDF plan submission, the grantee must provide a State/Territory-specific implementation plan for achieving compliance with such provision(s). The implementation plan must provide sufficient information to support approval of the Plan for funding.

Specifically, as part of its implementation plan, States/Territories will be asked to describe:

- Overall target completion date (no later than appropriate effective date deadline)

- Current status for any requirement in this section (not yet started, partially implemented, substantially implemented, other) including describing progress to date for any requirements already implemented and listing any unmet requirements that are not yet fully implemented
- Specific steps (activities) you will take to complete implementation of the unmet requirement(s) (e.g., secure legislative or rule changes, modify agreements with coordinating agencies, etc.)
- Timeline for implementation including projected start date and end date for each step
- Agency/entity responsible for completing implementation of the goal/objective, and partners who will work with the responsible agency to complete implementation of the goal/objective.

We recognize that it will take multiple steps and interim activities toward complete implementation of the requirement. We have included spaces to allow respondents to outline those interim steps and associated timelines (projected start and end dates) for those interim steps to be outlined. A comprehensive summary of the topical implementation plans across sections will be generated electronically to facilitate monitoring of progress towards completion.

ACF will work with States and Territories to monitor progress towards achievement of these requirements and will conduct ongoing reviews of implementation plans until fulfillment of the requirement. As part of the ongoing reviews, States and Territories will be asked to complete regular updates to the implementation plan through the e-submission site. Upon completion of the implementation plan, the State/Territory will submit a Plan amendment to certify fulfillment of the requirement(s). These updates and amendments can be submitted at any time prior to the effective date of the requirement. For example, States and Territories may, and are encouraged to, submit amendments to certify compliance with requirements upon completion, but no later than the effective date of the requirements (refer to the Program Instruction on Effective Dates for these deadlines https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02 and corresponding timeline of effective dates https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02-attachment-timeline-of-effective-dates-for-States-and-Territories-ccdbg-act-of-2014).

Lead Agencies can access a variety of federal technical assistance resources to support implementation of the new requirements at: https://childcareta.acf.hhs.gov/ccdf-reauthorization In addition to these materials, States and Territories will continue to receive support through the Office of Child Care's Technical Assistance Network (CCTAN) to assist with implementation of the new law. ACF recommends reviewing these resources prior to starting and completing each section of the Plan.

CCDF Plan Submission. States and Territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions in the ACF-118 site may be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities (see

http://www.section508.gov/ for more information). Until the final draft is approved, States and Territories may use the draft CCDF Plan preprint templates as they work to implement the new law. In responding to questions, States and Territories are asked to provide brief, specific summary text and/or bullet points only. Do not use tables or copy and paste charts, attachments or manuals into the Plan.

All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing CCDBG compliance monitoring efforts. . In cases where the CCDBG Act of 2014 did not change CCDF regulatory requirements (e.g., Public Hearing requirements), the CCDF regulations are still in effect and relevant questions are included in this Plan.

The CCDF Plan does not contain the Quality Performance Report (QPR) appendix included in previous Plans. The CCDBG Act of 2014 requires ongoing collection of some information that was included in the QPR. ACF will issue a separate information collection tool for public comment and approval linked to the CCDF Plan and updated based on the new requirements in the law.

1 Define CCDF Leadership and Coordination with Relevant Systems

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

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

1.1 CCDF Leadership

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, to represent the State (or

Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E(c)(1))

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

Identify the Lead Agency or joint inter-agency office designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals, and disallowance notifications to the designated contact identified here. (658D(a))

- ☐ Name of Lead Agency Kansas Department for Children and Families
- ☐ Address of Lead Agency 555 S. Kansas Avenue; Topeka, KS 66603-3444
- ☐ Name and Title of the Lead Agency Official Phyllis Gilmore, Secretary
- ☐ Phone Number 785-296-3274
- ☐ E-Mail Address phyllis.gilmore@dcf.ks.gov
- ☐ Web Address for Lead Agency (if any) 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, or the person with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information.

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator Karen Beckerman

Title of CCDF Administrator Strengthening Family Services Director

Address of CCDF Administrator 555 S Kansas Avenue, Topeka, KS 66603-3444

Phone Number 785-296-4717

E-Mail Address karen.beckerman@dcf.ks.gov

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

Name of CCDF Co-Administrator _____

Title of CCDF Co-Administrator _____

Phone Number _____

E-Mail Address _____

Description of the role of the Co-Administrator _____

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any) 785-368-6447

Web Address for CCDF program (for the public) (if any)
http://www.dcf.ks.gov/services/ees/Pages/Child_Care/Child-care-and-early-education.aspx

Web Address for CCDF program policy manual (if any)
http://content.dcf.ks.gov/EES/KEESM/Keesm.htm

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

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

- ☐ Outreach and Consumer Education (section 2):
  - Agency/Department/Entity Kansas Department for Children and Families
  - Name of Lead Contact Carrie Hastings
- ☐ Subsidy/Financial Assistance (section 3 and section 4)
  - Agency/Department/Entity Kansas Department for Children and Families
  - Name of Lead Contact Sally Hargis
- ☐ Licensing/Monitoring (section 5):
  - Agency/Department/Entity Kansas Department of Health and Environment
  - Name of Lead Contact Lorrena Steelman
- ☐ Child Care Workforce (section 6):
  - Agency/Department/Entity Kansas Department for Children and Families
  - Name of Lead Contact Judy Golden
- ☐ Quality Improvement (section 7):
  - Agency/Department/Entity Kansas Department for Children and Families
  - Name of Lead Contact Kelly Meigs
- ☐ Grantee Accountability/Program Integrity (section 8):
  - Agency/Department/Entity Kansas Department for Children and Families
  - Name of Lead Contact Karen Beckerman

1.2 CCDF Policy Decision Authority

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

1.2.1 Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level? In other words, identify whether CCDF program rules and policies are established by the State or Territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies. Check one.

☒ All program rules and policies are set or established at the State/Territory level.

☐ Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.

☐ Eligibility rules and policies (e.g., income limits) are set by the:

☐ State/Territory

☐ County. If checked, describe the type of eligibility policies the county can set _____

☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity(ies) can set _____

☐ Other. Describe _____

☐ Sliding fee scale is set by the:

☐ State/Territory

☐ County. If checked, describe the type of sliding fee scale policies the county can set _____

☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity(ies) can set _____

☐ Other. Describe _____

☐ Payment rates are set by the:

☐ State/Territory

☐ County. If checked, describe the type of payment rate policies the county can set _____

☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set _____

☐ Other. Describe _____

☐ Other. List and describe (e.g., quality improvement systems, payment practices) _____

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

a) Who determines eligibility?

☒ CCDF Lead Agency

☐ TANF agency. Describe. _____

☐ Other State/Territory agency. Describe. _____

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

☐ Child care resource and referral agencies. Describe. _____

☐ Community-based organizations. Describe. _____

☐ Other. Describe. _____

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

☐ CCDF Lead Agency

☐ TANF agency. Describe. _____

☐ Other State/Territory agency. Describe. _____

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

☒ Child care resource and referral agencies. Describe. Lead Agency contracts with Child Care Aware of Kansas.

☐ Community-based organizations. Describe. _____

☐ Other. Describe. _____

c) Who issues payments?

☒ CCDF Lead Agency

☐ TANF agency. Describe. _____

☐ Other State/Territory agency. Describe. _____

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

☐ Child care resource and referral agencies. Describe. _____

☐ Community-based organizations. Describe. _____

X Other. Describe. Payments are made by parents to providers, upon receipt of child care benefits issued by the DCF (Lead Agency).

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government. (658D(b)(2)) General purpose local governments is defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf

The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

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

X [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns Describe Collaboration on specific plan content occurred with county health department staff through coordination with the Kansas Department of Health and Environment and through the Child Care Systems Team membership. The final draft of the CCDF state plan was made available for review to these entities also.

X [REQUIRED, IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). Describe The final draft of the CCDF state plan was made available for review and comment to the Children's Cabinet, currently serving at the state ECAC.

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

  X Yes EES Director serves as the Secretary's Designee

  ☐ No.

- If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body

such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy _____

X [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes. Describe, including which Tribe(s) you consulted with The Lead Agency will be sharing the draft state plan for comment and input with the Iowa Tribe of Kansas and Nebraska, the Kickapoo Tribe of the Kickapoo, and the Prairie Band of Potawatomi Nation. A member of the Prairie Band of Potawatomi Nation has agreed to serve on the QRIS Advisory Group.

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

X State/Territory agency responsible for public education. Describe: On-going planning and coordination occurs between DCF and KDHE staff and a representative of this agency through the Kansas State Agencies Early Childhood Leadership Team work. The final draft of the CCDF state plan was posted and made available for review and comment.

X State/Territory agency/agencies responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool). Describe On-going planning and coordination occurs between DCF and KDHE staff and a representative of this agency through the Kansas State Agencies Early Childhood Leadership Team work. The final draft of the CCDF state plan was posted and made available for review and comment

X State/Territory institutions for higher education, including community colleges. Describe On-going planning and coordination occurs between DCF, the Early Childhood Higher-Education Options (ECHO) consortium and the Early Childhood Quality Instructional Partners (EQIP). The ECHO consortium represents the 4 year universities and the EQIP group represents the 2 year colleges. Both groups meet quarterly and the HSCO attends these meetings. The final draft of the CCDF state plan was posted and made available for review and comment.

.X State/Territory agency responsible for child care licensing. Describe On-going planning and coordination occurs between DCF and KDHE staff. KDHE actively participates in the development and completion of the CCDF state plan. The final draft of the CCDF state plan was posted and made available for review and comment.

X State/Territory office/director for Head Start State collaboration. Describe On-going planning and coordination occurs with the Head Start State Collaboration office located within the Economic Employment Services/Strengthening Family Services Section of DCF. The Director actively participates in the development and completion of the CCDF state plan.

X State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe On-going planning and coordination occurs between DCF and the EHS-CC Partnership Grantee in Kansas. The final draft of the CCDF state plan was posted and made available for review and comment.

X State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe The final draft of the CCDF state plan was posted and made available for review and comment.

X State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe The final draft of the CCDF state plan was posted and made available for review and comment. This office is located within the child care licensing agency, KDHE.

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

X State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe On-going planning and coordination occurs between DCF and KDHE- MIECHV staff through the Kansas State Agencies Early Childhood Leadership Team work. The final draft of the CCDF state plan was posted and made available for review and comment.

X Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe The final draft of the CCDF state plan was posted and made available for review and comment. This office is located within the child care licensing agency, KDHE.

X McKinney-Vento State coordinators for Homeless Education. Describe This office was consulted with specific to plans for services to homeless families. The final draft of the CCDF state plan was posted and made available for review and comment.

X State/Territory agency responsible for public health. Describe The final draft of the CCDF state plan was posted and made available for review and comment. This office is located within the child care licensing agency, KDHE.

X State/Territory agency responsible for mental health. Describe On going planning and coordination occurs between DCF and statewide entities involved in direct mental health services, which include EHS/HS; KDHE- MIECHV, Part C Infant Toddler Services; KSDE- Part B 619, Parents as Teachers, through the Kansas State Agencies Early Childhood Leadership Team work. The final draft of the CCDF was posted and made available for review and comment.

X State/Territory agency responsible for child welfare. Describe DCF- This is the same agency as the lead agency, DCF.

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

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

X State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe On-going planning and coordination occurs with the TANF Agency located within the Economic Employment Services/Strengthening Family Services Section of DCF.

X State/community agencies serving refugee or immigrant families. Describe On-going planning and coordination occurs with the state refugee Agency located within the Economic Employment Services Section of DCF.

X Child care resource and referral agencies. Describe Collaboration on specific plan content occurred with child care resource and referral staff through coordination with the Kansas Department of Health and Environment and through the Child Care Systems Team membership. The final draft of the CCDF state plan was made available for review to these entities also.

X Provider groups or associations. Describe Collaboration on specific plan content occurred with child care resource and referral staff through coordination with the Kansas Department of Health and Environment and through the Child Care Systems Team membership. The final draft of the CCDF state plan was made available for review to these entities also.

☐ Labor organizations. Describe _____
☐ Parent groups or organizations. Describe _____
☐ Other. Describe _____

1.3.2 Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)). Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

a) Date(s) of notice of public hearing 01-14-16 **Reminder** - Must be at least 20 calendar days prior to the date of the public hearing.

b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice. Electronic notice was published in the Kansas Register, provided to local child care resource and referral agencies, provided to local licensing surveyors, child care professional organizations, other state agencies, and Lead Agency local offices. Electronic notices were sent to other partners and stakeholders. Notifications of the public hearing were given at multiple stakeholder and partner meetings in which the Lead Agency participated.

c) Date(s) of public hearing(s) 02/11/2016 **Reminder** - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.

d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed. The hearing was held in Topeka, KS and was also available via live meeting with teleconference option.

e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s) The draft plan was posted on the DCF website on 01/14/2016. 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 comments provided were recorded, acknowledged, and reviewed for consideration.

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

- ☐ Working with advisory committees. Describe _____
- ☐ Working with child care resource and referral agencies. Describe _____
- ☐ Providing translation in other languages. Describe _____
- X Making available on the Lead Agency website. List the website dcf.ks.gov
- ☐ Sharing through social media (Twitter, Facebook, Instagram, email, etc.). Describe
- ☐ Providing notification to stakeholders (e.g., provider groups, parent groups). Describe _____

X Other. Describe Links will be posted on the Lead Agency website and made available at the public hearing. DCF will provide the link to both members of the QRIS Advisory Group and the State Agencies Early Childhood Leadership Team. KDHE will publish links in their provider newsletter and update stakeholders at the Child Care Licensing Systems Improvement Team meetings.

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

The CCDBG Act of 2014 added a requirement that the Plan describe how the State/Territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the Federal, State/Territory, and local levels for children in the programs listed below.

1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families. (658E(c)(2)(O)) Please describe the goals of this coordination, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school, enhancing and aligning quality of services, linking comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. NOTE that this list appears similar to the list provided in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however, this list includes entities required by law, along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and

continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.

X [REQUIRED] Programs operating at the Federal, State and local levels for children in pre-school programs (e.g., state-or locally-funded pre-k, Head Start, school-based programs, public and private preschools, programs serving preschool children receiving special education services, etc.). Describe
Kansas will partner with Head Start/Early Head Start programs to identify strong community based child care providers to serve EHS eligible children participating in the child care subsidy program.
Objectives include the following:

- Increase comprehensive supports in high quality infant and toddler child care centers, group child care homes and family child care services in high-risk, high-need communities.
- Build protective factors for vulnerable children and families.
- Connect families to health and wellness services.
- Support families as they move toward self-sufficiency.

Objectives for Practitioners, Providers, and Communities:

- Increase the quality of child care providers through recruitment and participation.
- Build a cadre of qualified, effective infant-toddler teachers with deep infant and toddler expertise and experience.
- Gather, analyze, and offer programs access to data that will assist them in improving their practice, supports, and outcomes for infants, toddlers and their families.
- Enhance the statewide network of resources and supports by improving cross-systems professional development and systems linkages.
- Coordinate local early childhood systems to successfully link infant-toddler and preschool.
- Positively impact regional/state economy.

X [REQUIRED, IF APPLICABLE] Tribal early childhood programs. Describe, including which Tribe(s) coordinating with the Prairie Band of Potawatomi Nation
DCF is coordinating with this partner in the development of a statewide Quality Rating Improvement System (QRIS). The newly developing QRIS will provide a statewide network of quality child care resources empowering families in making informed decisions about child care. The QRIS will provide parents the tools and knowledge to assess what quality care looks like, how to select high quality care and where to access it. Goals of the QRIS will be to:

- Improve the quality of care
- Improve parents' understanding of quality care
- Improve professional development of child care providers
- Align funding and services of the state early learning system

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

X [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities. Describe: DCF is coordinating with KDHE Part C Infant and Toddler Services in the development of a statewide Quality Rating Improvement System (QRIS). The newly developing QRIS will provide a statewide network of quality child care resources empowering families in making informed decisions about child care. The QRIS will provide parents the tools and knowledge to assess what quality care looks like, how to select high quality care and where to access it. Goals of the QRIS will be to:

- Improve the quality of care
- Improve parents' understanding of quality care
- Improve professional development of child care providers

- Align funding and services of the state early learning system

X [REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney-Vento Homeless Education Assistance Act). Describe: Kansas will partner with Head Start/Early Head Start programs who currently serve homeless children to identify strong community based child care providers to serve EHS eligible children participating in the child care subsidy program.
Objectives include the following:

- Increase comprehensive supports in high quality infant and toddler child care centers, group child care homes and family child care services in high-risk, high-need communities.
- Build protective factors for vulnerable children and families.
- Connect families to health and wellness services.
- Support families as they move toward self-sufficiency.

Objectives for Practitioners, Providers, and Communities:

- Increase the quality of child care providers through recruitment and participation.
- Build a cadre of qualified, effective infant-toddler teachers with deep infant and toddler expertise and experience.
- Gather, analyze, and offer programs access to data that will assist them in improving their practice, supports, and outcomes for infants, toddlers and their families.
- Enhance the statewide network of resources and supports by improving cross-systems professional development and systems linkages.
- Coordinate local early childhood systems to successfully link infant-toddler and preschool.
- Positively impact regional/state economy.

X [REQUIRED] Early childhood programs serving children in foster care. Describe Kansas will partner with Head Start/Early Head Start programs who currently serve children in foster care to identify strong community based child care providers to serve EHS eligible children participating in the child care subsidy program.
Objectives include the following:

- Increase comprehensive supports in high quality infant and toddler child care centers, group child care homes and family child care services in high-risk, high-need communities.
- Build protective factors for vulnerable children and families.
- Connect families to health and wellness services.
- Support families as they move toward self-sufficiency.

Objectives for Practitioners, Providers, and Communities:

- Increase the quality of child care providers through recruitment and participation.
- Build a cadre of qualified, effective infant-toddler teachers with deep infant and toddler expertise and experience.
- Gather, analyze, and offer programs access to data that will assist them in improving their practice, supports, and outcomes for infants, toddlers and their families.
- Enhance the statewide network of resources and supports by improving cross-systems professional development and systems linkages.
- Coordinate local early childhood systems to successfully link infant-toddler and preschool.
- Positively impact regional/state economy.

X State/Territory agency responsible for child care licensing. Describe DCF is coordinating with Child Care Licensing within KDHE in the development of a statewide Quality Rating Improvement System (QRIS). The newly developing QRIS will provide a statewide network of quality child care resources empowering families in making informed decisions about child care. The QRIS will provide parents the

tools and knowledge to assess what quality care looks like, how to select high quality care and where to access it. Goals of the QRIS will be to:

- Improve the quality of care
- Improve parents' understanding of quality care
- Improve professional development of child care providers
- Align funding and services of the state early learning system

X State/Territory agency with Head Start State collaboration grant. Describe: The Head Start State Collaboration Office is located within DCF and is actively involved in both the QRIS and KEHS-CC Partnership coordination work.

X State Advisory Council authorized by the Head Start Act. Describe The Children's Cabinet is currently designated as the State Advisory Council in Kansas. DCF is coordinating with the Children's Cabinet and Trust Fund in the development of a statewide Quality Rating Improvement System (QRIS) through membership of Children's Cabinet Staff on the State QRIS Advisory Group. The newly developing QRIS will provide a statewide network of quality child care resources empowering families in making informed decisions about child care. The QRIS will provide parents the tools and knowledge to assess what quality care looks like, how to select high quality care and where to access it. Goals of the QRIS will be to:

- Improve the quality of care
- Improve parents' understanding of quality care
- Improve professional development of child care providers
- Align funding and services of the state early learning system

X State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe: The following is a brief summary of DCF's coordination with the goal of continued support for the work of the Federal EHS/Child Care Partnership grantee in Kansas:

- DCF and The Family Conservancy have an MOU to support the EHS/Child Care Partnership work.
- The DCF Strengthening Families team meets regularly with the Family Conservancy project management team, with the goal to meet at minimum quarterly.
- DCF CCDF team visited the Family Conservancy office and participated in a site visit to their child care partner.
- A DCF Regional Child Care Provider Enrollment team member is a community member on the Family Conservancy's policy council, and participates in EHS/CC partnership calls, webinars and meetings.

X McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons. Describe DCF met with Kansas Department of Education's (KSDE) McKinney Vento Homeless Assistance Act liaison. Online training courses for child care providers will be developed and available by September 30, 2016 using shared resources from this meeting. Serving homeless families will also be part of the tool kit being developed for providers on the Kansas Early Learning Standards.

X Child care resource and referral agencies. Describe DCF is coordinating with Child Care Aware of Kansas in the development of a statewide Quality Rating Improvement System (QRIS). The newly developing QRIS will provide a statewide network of quality child care resources empowering families in making informed decisions about child care. The QRIS will provide parents the tools and

knowledge to assess what quality care looks like, how to select high quality care and where to access it. Goals of the QRIS will be to:

- Improve the quality of care
- Improve parents' understanding of quality care
- Improve professional development of child care providers
- Align funding and services of the state early learning system

X State/Territory agency responsible for public education. Describe DCF is coordinating with the Kansas Department of Education in the development of a statewide Quality Rating Improvement System (QRIS). The newly developing QRIS will provide a statewide network of quality child care resources empowering families in making informed decisions about child care. The QRIS will provide parents the tools and knowledge to assess what quality care looks like, how to select high quality care and where to access it. Goals of the QRIS will be to:

- Improve the quality of care
- Improve parents' understanding of quality care
- Improve professional development of child care providers
- Align funding and services of the state early learning system

X State/Territory institutions for higher education, including community colleges. Describe DCF has coordinated with representatives of higher education and community colleges on CCDF state plan via work completed on the state career ladder, early learning guidelines, and professional development opportunities.

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

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

X Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services. Describe DCF is coordinating with KDHE Part C Infant-Toddler Program and KSDE Part B 619 in the development of a statewide Quality Rating Improvement System (QRIS). The newly developing QRIS will provide a statewide network of quality child care resources empowering families in making informed decisions about child care. The QRIS will provide parents the tools and knowledge to assess what quality care looks like, how to select high quality care and where to access it. Goals of the QRIS will be to:

- Improve the quality of care
- Improve parents' understanding of quality care
- Improve professional development of child care providers
- Align funding and services of the state early learning system

☐ State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant. Describe _____

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

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

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

X State/Territory agency responsible for child welfare. Describe The lead agency, DCF. Strengthening Families/Child Care will partner with Head Start/Early Head Start programs who currently serve children in foster care to identify strong community based child care providers to serve EHS eligible children participating in the child care subsidy program.
Objectives include the following:

- Increase comprehensive supports in high quality infant and toddler child care centers, group child care homes and family child care services in high-risk, high-need communities.
- Build protective factors for vulnerable children and families.
- Connect families to health and wellness services.
- Support families as they move toward self-sufficiency.

Objectives for Practitioners, Providers, and Communities:

- Increase the quality of child care providers through recruitment and participation.
- Build a cadre of qualified, effective infant-toddler teachers with deep infant and toddler expertise and experience.
- Gather, analyze, and offer programs access to data that will assist them in improving their practice, supports, and outcomes for infants, toddlers and their families.
- Enhance the statewide network of resources and supports by improving cross-systems professional development and systems linkages.
- Coordinate local early childhood systems to successfully link infant-toddler and preschool.
- Positively impact regional/state economy.

☐ State/Territory liaison for military child care programs. Describe _____
☐ State/Territory agency responsible for employment services/workforce development. Describe _____
☐ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe _____
☐ State/Territory community agencies serving refugee or immigrant families. Describe _____
☐ Provider groups or associations. Describe _____
☐ Labor organizations. Describe _____
☐ Parent groups or organizations. Describe _____
☐ Other. Describe _____

1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O))(ii)) Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high quality care that meets the needs of children and families. For example, State/Territory agencies may use multiple funding sources to offer grants or contracts to

programs to deliver services; a State/Territory may allow county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits (https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

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

X Yes. If yes, describe at a minimum:

- How do you define "combine" Subsidy dollars will be utilized for basic child care costs within our state funded KEHS Child Care Partnership Program. Kansas has also partnered with the Federal EHS-Child Care Partnership Grantee for use of Child Care Subsidy dollars for basic child care cost. This will allow for layering of funds from multiple funding streams in an effort to expand and/or enhance comprehensive high quality care that meets the needs of children and families.
- Which funds will you combine KEHS Child Care Partnership Program- CCDF Subsidy dollars and CCDF Quality dollars; and within the EHS- Child Care Partnership Grantee- CCDF Subsidy dollars will be combined (layered) with Federal EHS-Child Care Partnership dollars.

Goal(s) of combining funds (why?) and expected outcomes, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations Objectives include the following:

- Increase comprehensive supports in high quality infant and toddler child care centers, group child care homes and family child care services in high-risk, high-need communities.
- Build protective factors for vulnerable children and families.
- Connect families to health and wellness services.
- Support families as they move toward self-sufficiency.

Objectives for Practitioners, Providers, and Communities:

- Increase the quality of child care providers through recruitment and participation.

- Build a cadre of qualified, effective infant-toddler teachers with deep infant and toddler expertise and experience.
- Gather, analyze, and offer programs access to data that will assist them in improving their practice, supports, and outcomes for infants, toddlers and their families.
- Enhance the statewide network of resources and supports by improving cross-systems professional development and systems linkages.
- Coordinate local early childhood systems to successfully link infant-toddler and preschool.
- Positively impact regional/state economy.

  - Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?) Kansas is considering the use of a system of dual eligibility for child care subsidy at the local level to serve families participating in the KEHS- Child Care Partnership and the Federal Early Head Start Child Care Partnership.
  - How are the funds tracked and method of oversight: Grant funds will be tracked through DCF monthly fiscal reporting and coordinated with subsidy expenditures.

☐ No

1.6 Public-Private Partnerships

The CCDBG Act of 2014 adds a new provision that requires States and Territories to describe in the Plan how the State/Territory encourages partnerships among State/Territory and public agencies, tribal organizations, private entities, faith based organizations and/or community-based organizations to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services for children through age 12, such as by implementing voluntary shared services alliance models (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation). (658E(c)(2)(P)) ACF expects these types of partnerships to leverage public and private resources to further the goals of reauthorization.

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

DCF is coordinating with many partners within the development of a statewide Quality Rating Improvement System (QRIS). The newly developing QRIS will provide a statewide network of quality child care resources empowering families in making informed decisions about child care. The QRIS will provide parents the tools and knowledge to assess what quality care looks like, how to select high quality care and where to access it. Goals of the QRIS will be to:

- Improve the quality of care
- Improve parents' understanding of quality care

- Improve professional development of child care providers
- Align funding and services of the state early learning system

The current QRIS Advisory Group includes representatives from the Kansas Child Care Training Opportunities, Child Care Aware of Kansas, KDHE-Part C, Head Start, Children's Cabinet, Center for Public Partnerships &Research -KU, KSDE-Early Childhood, Special Education and Title Services, Prairie Band Potawatomi Nation, a Child Care Center, a Family Child Care Provider, a parent, KDHE and DCF. DCF's goal will be to continue to grow these public and private partnerships within our QRIS network.

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

States and Territories may use funds to establish or support a system of local or regional child care resource and referral organizations (CCR&R) that is coordinated, to the extent determined by the State/Territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (also see section 7.4). If they do, the law identifies specific requirements for that entity or system receiving CCDF funds. (658E(c)(3)(B)(iii)) These include:

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

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

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

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

Describe the State/Territory's written agreement or contract with the CCR&R, what services are provided through the CCR&R, and any other activities for which the State partners with the CCR&Rs. As of the date of this plan, the Lead Agency contracts with Child Care Aware of Kansas for resource and referral services. Services provided are to include: consumer education for parents about quality child care, how to choose quality child care, and to assist parents in locating quality child care based upon their children's and family's needs. DCF also contracts with Child Care Aware of Kansas to improve access for families to quality care for infants/toddlers and to develop strategies to increase availability, affordability and/or quality of services. Strategies may include both targeted direct technical assistance and indirect technical assistance. These are both competitive bid contracts.

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

1.8 Disaster Preparedness and Response Plan

The CCDBG Act of 2014 added a requirement that States and Territories must include a Statewide Child Care Disaster Plan for coordination of activities with the State/Territory human services agency, emergency management agency, child care licensing agency, State/Territory local resource and referral agencies, and the State Advisory Council (SAC) or other state-designated cross-agency body if there is no SAC. (658E(c)(2)(U)) The Statewide Child Care Disaster Plan must include:

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

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

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

http://www.dcf.ks.gov/services/ees/Documents/Child_Care/Statewide%20CC%20Disaster%20Plan-%2012-10-15.pdf

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

- Overall Target Completion Date (no later than September 30, 2016) _____
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
    - Implementation progress to date – Identify any requirement(s) partially or substantially implemented _____
    - Unmet requirement - Identify the requirement(s) not fully implemented _____
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
    - Projected start date for each activity _____
    - Projected end date for each activity _____
    - Agency – Who is responsible for complete implementation of this activity _____
    - Partners – Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity _____

2 Promote Family Engagement through Outreach and Consumer Education

Parents are their children's most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12.

The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to "promote involvement by parents and family members in the development of their children in child care settings." States and Territories have the opportunity to consider how information can be provided to parents through the child care

assistance system, partner agencies, and child care sites that will support their role as their children's teacher and advocate. Key new provisions include:

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

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

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

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

a) How does the State/Territory identify populations and areas of potentially eligible families (e.g., using available federal, State/Territory and local needs assessments to identify potentially eligible families?) Kansas will complete an annual statewide supply and demand

report based upon identified indicators/needs assessment. The first report will be completed by June 2017. The DCF website has an online application and screening tool to assist in the identification of eligible families needing child care. Further assistance to parents looking for resources to assist with child care is offered through the Child Care Resource and Referral Agencies and Early Head Start programs across the state.

b) What partners help with outreach? For example, child care resource and referral agencies, home visitors, pediatricians, faith-based services, State/Territory or local agencies and organizations or other familiar and safe access points serving vulnerable or low-income populations. Child Care Aware of Kansas, Kansas Early Head Start programs, and some school districts provide consumer education to families.

c) What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach? In addition to making CCDF funds available for Consumer Education, applications for services are made available through the 38 DCF office locations across the state and through website resources.

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

X Electronically via online application, mobile app or email. Provide link https://kscapportalp.dcf.ks.gov/client/start.swe?SWECmd=Start&SWEHo=kscapportalp.dcf.ks.gov
X In-person interview or orientation. Describe agencies where these may occur: DCF local offices.
☐ Phone
X Mail
☐ At the child care site
☐ At a child care resource and referral agency
☐ Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations. Describe _____
X Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time). Describe Families may apply for TANF and food assistance within the same application (see link above).
☐ Other strategies. Describe _____

2.2 Consumer and Provider Education Information

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

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

- Information about the availability of the full diversity of child care services that will promote informed child care choices,

- Availability of child care assistance,
- Quality of child care providers (if available),
- Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify,
- Individuals with Disabilities Education Act (IDEA) programs and services,
- Research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement,
- State/Territory policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (children from birth to five for purposes of this requirement)) in early childhood programs receiving CCDF.

___Yes. The State/Territory certifies that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.8 below.

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

- Overall Target Completion Date (no later than September 30, 2016) September 1, 2016
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other: substantially implemented.
    - Implementation progress to date – Identify any requirement(s) partially or substantially implemented. 1) Kansas plans to contract out for these services and has begun the procurement process with an award date of July 1, 2016. 2) KDHE and DCF are also working to enhance current agency webpage information and links to be user friendly.
    - Unmet requirement - Identify the requirement(s) not fully implemented In order to ensure specific information required to be disseminated

within this requirement, language will be incorporated within our Consumer Education/Resource and Referral Contract for services and a review of the agencies websites and the DCF Child Care Provider Handbook is planned.

- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Tasks will include the completion of a new Consumer Education/Resource and Referral Contract for the state ensure services are inclusive of all items outlined within the new CCDF requirements, website review and child care materials review. The incorporation of a policy on expulsion and positive behavioral intervention is planned.
    - Projected start date for each activity Current Activity
    - Projected end date for each activity September 1, 2016
    - Agency – Who is responsible for complete implementation of this activity DCF- Lead Agency; KDHE
    - Partners – Who is the responsible agency partnering with to complete implementation of this activity: 1) DCF will use the state procurement process to identify the partner. 2) KDHE

2.2.2 Describe how the State/Territory makes information available about the full diversity of child care services that will promote informed child care choices, including consumer-friendly strategies such as materials that are culturally responsive and in multiple languages as needed that reflect the literacy levels of consumers, and are easy to access.

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

Lead Agency contracts with Child Care Aware of Kansas to promote informed child care choices by providing consumer education materials that describe the full range of exempt from KDHE license regulations and licensed child care providers, including child care centers, day care homes, group day care homes, preschools, school-age programs, and drop-in programs for school age children and youth.

DCF provides this information to all parents applying for child care assistance through the Parent Provider Partnership Handbook and through the DCF website at dcf.ks.gov. The handbook is available in both English and Spanish.

KDHE shares provider-specific information about licensed providers on its public website. Parents may access online information concerning child care across the state at http://www.kdheks.gov/bcclr/index.html. This website includes child care provider and parent resources.

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

The Parent Provider Partnership Handbook is available to the public upon request and on the agency website. Parents are provided a copy upon approval of child care assistance. Consumer education information is available to parents, providers and the public online, by phone referral or face-to-face through both the resource and referral agency and DCF.

KDHE shares provider-specific information about licensed providers on its public website. Parents may access online information concerning child care across the state at http://www.kdheks.gov/bcclr/index.html. This website includes child care provider and parent resources.

c) Describe who you partner with to make information about the full diversity of child care choices available Lead agency contracts for resource and referral services and partners with KDHE child care licensing.

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

a) Describe how the State/Territory makes information about child care quality available to parents of eligible children, providers and the general public
Lead Agency contracts with Child Care Aware of Kansas to promote informed child care choices by providing consumer education materials that describe the full range of exempt from KDHE license regulations and licensed child care providers, including child care centers, day care homes, group day care homes, preschools, school-age programs, and drop-in programs for school age children and youth.

KDHE shares provider-specific information about licensed providers on its public website. Parents may access online information concerning child care across the state at http://www.kdheks.gov/bcclr/index.html. This website includes child care provider and parent resources.

Our overarching goal for quality improvement is to develop and implement a statewide QRIS. The goals of our QRIS will be to improve the quality of care so children have a safe place to learn and grow, offer consumer education to parents so they can know how to choose quality child care for their children, and build a system to recognize providers as professionals and the quality within their programs. As we build our system we will recognize the early learning work already occurring. Through our strategic planning efforts we have identified our goals as:

- Increase the availability of quality care for all children in child care and early education.
- Increase parents' understanding and demand for quality care
- Increase professional development opportunities for child care and early education providers
- Align funding and services to increase support to child care and early education providers.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) Consumer education information is available to parents, providers and

the public online, by phone referral or face-to-face through both the resource and referral agency and DCF.

c) Describe who you partner with to make information about child care quality available Child Care Aware of Kansas, our Resource and Referral Agency in Kansas and KDHE. The current QRIS Advisory Group includes representatives from the Kansas Child Care Training Opportunities, Child Care Aware of Kansas, KDHE-Part C, Head Start, Children's Cabinet, Center for Public Partnerships &Research -KU, KSDE-Early Childhood, Special Education and Title Services, Prairie Band Potawatomi Nation, a Child Care Center, a Family Child Care Provider, a parent, KDHE and DCF.

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

a) Temporary Assistance for Needy Families (TANF) Within the same Application and Agency. Materials provided in writing and through agency Website, front line DCF staff, and KEHS.

b) Head Start and Early Head Start Programs Materials provided through the agency website, child care resource and referral services, and KEHS grantees.

c) Low Income Home Energy Assistance Program (LIHEAP) Within the same Application and Agency. Applications available through agency Website, front line DCF staff and KEHS.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps Within the same Application and Agency. Applications available through agency website, and front line DCF staff.

e) Women, Infants, and Children Program (WIC) Information available through KDHE website, county health departments, KEHS, and the Kansas Resource Guide Website http://www.ksresourceguide.org/

f) Child and Adult Care Food Program(CACFP) Materials provided through state KSDE website, child care resource and referral services, KEHS, and the Kansas Resource Guide Website http://www.ksresourceguide.org/

g) Medicaid Applications and/or information available through agency website, KEHS, and the Kansas Resource Guide Website http://www.ksresourceguide.org/

h) Children's Health Insurance Program (CHIP) Applications and/or information available through agency website, KEHS, and the Kansas Resource Guide Website http://www.ksresourceguide.org/

i) Individuals with Disabilities Education Act (IDEA) KDHE Kansas Resource Guide Website http://www.ksresourceguide.org/

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten) Materials provided through state KSDE website and the KDHE Kansas Resource Guide Website. http://www.ksresourceguide.org/

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program) KDHE Kansas Resource Guide Website http://www.ksresourceguide.org/

2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs. For example, does the State/Territory provide information to providers through CCR&R outreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc.?

a) Temporary Assistance for Needy Families (TANF) Within the same Application and Agency. Materials provided in writing and through agency Website, and KEHS.

b) Head Start and Early Head Start Programs Materials provided through the agency website, child care resource and referral services, and KEHS grantees.

c) Low Income Home Energy Assistance Program (LIHEAP) Within the same Application and Agency. Applications available through agency Website, front line DCF staff and KEHS.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps Within the same Application and Agency. Applications available through agency website, and front line DCF staff.

e) Women, Infants, and Children Program (WIC) Information available through KDHE website, county health departments, KEHS, and the Kansas Resource Guide Website http://www.ksresourceguide.org/

f) Child and Adult Care Food Program(CACFP) Materials provided through state KSDE website, child care resource and referral services, KEHS, and the Kansas Resource Guide Website http://www.ksresourceguide.org/

g) Medicaid Applications and/or information available through agency website, KEHS, and the Kansas Resource Guide Website http://www.ksresourceguide.org/

h) Children's Health Insurance Program (CHIP) Applications and/or information available through agency website, KEHS, and the Kansas Resource Guide Website http://www.ksresourceguide.org/

i) Individuals with Disabilities Education Act (IDEA) KDHE Kansas Resource Guide Website http://www.ksresourceguide.org/

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten) Materials provided through state KSDE website and the KDHE Kansas Resource Guide Website. http://www.ksresourceguide.org/

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program) KDHE Kansas Resource Guide Website http://www.ksresourceguide.org/

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

a) Describe how the State/Territory makes information about research and best practices in child development available to parents of eligible children, providers and the general public KDHE Kansas Resource Guide Website
b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) KDHE Kansas Resource Guide Website
c) Describe who you partner with to make information about research and best practices in child development available KDHE

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

a) Describe how the State/Territory makes information regarding social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to parents of eligible children, providers and the general public. At minimum, describe **what** you provide (e.g., early childhood mental health consultation services to child care programs) and **how** (i.e., methods such as written materials, direct communication, etc.) for each group:
    i. Parents Parents can access information and resources on these topics through KDHE's Kansas Resource Guide website (http://www.ksresourceguide.org
    ii. Providers Providers can access information and resources on these topics through KDHE's KS Resource Guide Website and through trainings provided by Child Care Aware of Kansas and KCCTO.
    iii. General public Parents can access information and resources on these topics through KDHE's Kansas Resource Guide website (http://www.ksresourceguide.org
b) Describe any partners used to make information regarding social-emotional/behavioral and early childhood mental health of young children available This requirement will be addressed within our implementation plan. (Section 2.2.1)
c) Does the State have a written policy regarding preventing expulsion of:

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

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

X No.

☐ School-age children from programs receiving child care assistance?

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

X No.

2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

The State/Territory must develop and describe procedures for providing information on and referring families to existing developmental screening resources and services. (658E(c)(2)E(ii)) At a minimum, the State/Territory must establish procedures to provide information to families and child care providers on: (1) Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and (2) a description of how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children receiving CCDF who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays. Describe the status of the State/Territory's procedures for providing information on and referring families to existing developmental screening services.

☐ Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency policy citation(s) and: _____

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

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

X Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and

paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) July 1, 2016
- Current Status – Describe the State/Territory's status toward completion implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) partially implemented.
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented:
    The Kansas Initiative for Developmental Ongoing Screening (KIDOS) seeks to expand upon existing efforts and infrastructure in order to effectively coordinate, improve, and track developmental screenings and referrals for infants and toddlers across a variety of early childhood support systems in Kansas, including: home visiting, child care and early education settings, pediatric health care providers, early intervention services, and families. The KIDOS project is funded by a federal Early Childhood Comprehensive Systems (ECCS) grant awarded to the State of Kansas - KDHE in July 2013. When the ECCS funding opportunity was announced, a diverse group of state early childhood leaders made the determination to submit a project proposal to coordinate the expansion of developmental and social emotional screenings of children birth to age three. The KIDOS project works with communities to build and strengthen their systems and coordination for developmental screenings and referrals across sectors in ways that meet the needs of both families and programs. Staff of the Lead Agency and other state early learning programs participate in the project's work group. Currently this information is available to parents, providers and the general public through the KDHE Kansas Resource Guide Website.
  - Unmet requirement - Identify the requirement(s) not fully implemented
    In order to ensure specific information required to be disseminated within this requirement is shared, language will be incorporated within our Consumer Education/Resource and Referral Contract for services.
- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Task will include the completion of a new Consumer Education/Resource and Referral Contract for the state to ensure services are inclusive of all items outlined within the new CCDF requirements.

  - Projected start date for each activity Current Activity
  - Projected end date for each activity July 1, 2016
  - Agency – Who is responsible for complete implementation of this activity DCF- Lead Agency
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity DCF will utilize the state procurement process.

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

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 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. There is no cost to the public for electronic delivery of the record. 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/

a) How does the State/Territory define substantiated parental complaint

A substantiated parental complaint is one that is supported by proof or evidence.

b) How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format)

Records are maintained in the System of Record for licensed providers. If the facility is an open facility then the record is maintained. If it is closed and there is not a history of substantial non-compliance the (paper) record is maintained for seven years. The system record continues to be maintained. If the record is found to have serious non-compliance the closed (paper) record is maintained for seventy years. Licensed exempt providers are governed by their regulatory entity.

c) How does the State/Territory make substantiated parental complaints available to the public on request This information is made available to the public on written request, and is made available in accordance with the Kansas Open Records Act. As of December 14, 2015 complaint findings are accessible to the public on the state agency website.

d) Describe how the State/Territory defines and maintains complaints from others about providers Process is the same for all complaints.

2.2.10 How will the Lead Agency or partners provide outreach and services to eligible families for whom English is not their first language?

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

X Application in other languages (application document, brochures, provider notices)

X Informational materials in non-English languages

☐ Training and technical assistance in non-English languages

X Website in non-English languages

☐ Lead Agency accepts applications at local community-based locations

X Bilingual caseworkers or translators available

☐ Bilingual outreach workers

☐ Partnerships with community-based organizations

☐ Other _____

☐ None

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

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing the State/Territory processes for licensing and monitoring child care providers, processes for conducting criminal background checks as required by law (see section 5.3), and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse in child care settings.

The State/Territory also must make public certain information about the results of such monitoring as required by law for both licensed and unlicensed providers receiving CCDF (see section 5.2) on a website in a way that is consumer-friendly and in an easily accessible format. (658E(c)(2)(D)) In order for a website to be a useful tool for parents, it should be easy to navigate, with a minimum number of clicks, and in plain language. States and Territories must post the results of the monitoring and inspection reports on the website no later than November 19, 2017. All other components of the website must be completed no later than September 30, 2016.

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

☐ Fully implemented and meeting all Federal requirements outlined above. Provide the link to the website _____ and describe how the consumer education website meets the requirements to:

a) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations). Describe _____
b) Include a description of health and safety requirements and licensing or regulatory requirements for child care providers _____
c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers _____
d) Provide annual aggregate information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings
e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request, differentiating between violations based on risk to children, and easy to locate and navigate _____

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

- Overall Target Completion Date (no later than September 30, 2016 for all components of the website except posting the results of the monitoring on the website which is November 19, 2017) June 30, 2016.
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) Substantially completed.
    - Implementation progress to date – Identify any requirement(s) partially or substantially implemented The Kansas Department of Health and Environment (KDHE), Child Care Licensing link is available on the DCF webpage.
    - DCF webpage provides information including, yet not limited to: child care assistance; TANF; Resource and Referral; forms for enrolling as a DCF child care provider; DCF Enrollment Procedures including the: The DCF Child Care Provider Handbook; The Parent Provider Partnership Handbook; and KDHE child care licensing; CCDF State Plan.

- The Kansas Resource Guide (KRG) link is available on the KDHE Child Care Licensing webpage. The KRG is a collaborative effort to connect consumers and service providers with resources and services for women, infants, children, youth and people with disabilities in Kansas. Through the website there is a central point of entry for resources, reducing time spent in searching for resources. Resources can be found for: Advocacy, Adult & Aging Services, Disabilities Services, Education, Employment, Health Care Services, Independent and Community Living, Insurance/Benefits Services, Nutrition and Wellness, Women and Children's Services and Youth Services (ages 14-25).
- The KDHE Child Care Licensing webpage includes:
    - The processes for licensing and monitoring child care providers, processes for conducting criminal background checks and offenses that prevent an individual from being a licensed child care provider or prevents a person from residing, working, or volunteering in a licensed child care facility.
    - The results of inspections for initial, annual and compliance inspections for licensed child care facilities can be found on the Child Care Licensing webpage for all licensed program types, (Licensed Day Care Home, Group Day Care Home, Child Care Center, Preschool, School Age Program, and Drop in Program).
    - Notification of a complaint and/or enforcement is posted to the Child Care Licensing webpage and can also be obtained through Kansas Open Records Act K.S.A. 45-215 et seq.
    - All license program regulation books, provider application and forms, and Resource and Referral information
    - Links are made available to multiple federal, state, regional and local resources, including but not limited to: Office of Child Care; Kansas Department for Children and Families – child care subsidy, TANF; Kansas In-Service Training Network; Kansas State Fire Marshal Fire Facts; Lexie's Law, Effective July 1, 2010; National Playground Safety; National Resource Center for Health and Safety in Child Care & Early Education

- Unmet Requirement(s) – Identify the requirement(s) that is not fully implemented
- KDHE and DCF are working to enhance current agency webpage information and links to be user friendly.
- KDHE is currently completing programming for a complaint based survey and include necessary required data (number of deaths, serious injuries and child abuse in child care settings) to its webpage.

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

  - DCF will design a webpage on the agency's website to promote and support the newly designed quality rating system (QRIS) work and provide user-friendly quick-links to resources.
    - Activity start date – January 1, 2016
    - Activity end date – June 30, 2016
  - DCF will launch user-friendly QRIS web page with quick links to resources
    - Activity start date – January 1, 2016
    - Activity end date September 30, 2016
  - KDHE will pilot the web-based complaint based survey
    - Activity start date – January 1, 2016
    - Activity end date- March 31, 2016
    - KDHE will implement the complaint based survey state wide
  - Projected start date for each activity: January 1, 2016
  - Projected end date for each activity June 30, 2016
  - Agency – Who is responsible for complete implementation of this activity: DCF and KDHE
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity DCF and KDHE

3 Provide Stable Child Care Financial Assistance to Families

The expanded purposes of CCDBG highlight the opportunities States and Territories have to "deliver high-quality, coordinated early childhood care and education services to maximize parents' options and support parents trying to achieve independence from public assistance"; and "to improve child care and development of participating children." (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements – and the opportunity for children to form trusting relationships with teachers – are often interrupted and unstable. Child care financial assistance

policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).

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

3.1 Eligible Children and Families

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

3.1.1 Eligibility Criteria Based upon Child's Age

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

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

X Yes, and the upper age is 18 (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity – The child must have one or more of the following conditions:

- Developmental age lower than chronological age and requires assistance via special supervision
- Movement impairment: Requires special assistance or unable to move
- Sensory impairment: Requires special environment modifications or assistance
- Hygiene, toileting and feeding: Requires assistance or special equipment unusual to the child's age

- Emotional impairment including challenging behavior: Requires special equipment or assistance/special supervision
- A chronic medical condition requiring close supervision, monitoring and/or administration of medications

☐ 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))

X Yes, and the upper age is 18 (may not equal or exceed age 19)

☐ No.

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

a) 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.)

b) in loco parentis – Caretaker - Any person with the legal right and responsibility to act as a parent, "in the place of a parent", assuming the duties and responsibilities of a parent.

3.1.3 Eligibility Criteria Based on Reason for Care

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

- working -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 and earning at least the federal minimum wage per hour.
  Other allowed activities are:
  1) participation in TANF work programs
  2) participation in the Food Assistance Education and Training Program
  3) participation in an agency approved post-secondary education plan. Post-secondary students must be employed a minimum of 15 hours per week and earning at least the federal minimum wage per hour.
- attending job training– attending job training or educational program – participating in an agency approved post-secondary education plan
- attending education – attending job training or educational program – participating in an agency approved post-secondary education plan

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

☐ Yes.

X No. If no, describe additional requirements Post-secondary students must be employed a minimum of 15 hours per week and earning at least the federal minimum wage per hour worked.

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

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

1) Definition of protective services –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) works toward rehabilitation or when the child is at risk of a health or social condition which may adversely affect the child.

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

X Yes.

☐ No.

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

☐ No

3.1.4 Eligibility Criteria Based on Family Income

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

- Definition of income – 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 income deductions used in determining eligibility for child care services.

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

Complete columns (e) and (f) with the maximum "exit" eligibility level if applicable and below the federal limit of 85% of current SMI. Note – If the income eligibility limits are not statewide, check here ☐. Describe how many jurisdictions set their own income eligibility limits _____. Fill in the chart based on the most populous area of the state.

Family Size	(a) 100% of State Median Income (SMI) ($/month)	(b) 85% of State Median Income (SMI) ($/month) [Multiply (a) by 0.85]	(c) (IF APPLICABLE) $/month Maximum "Entry" Income Level if lower than 85% Current SMI	(d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI	(e) (IF APPLICABLE) $/month Maximum "Exit" Income Level if lower than 85% Current SMI	(f) (IF APPLICABLE) % of SMI [Divide (e) by (a), multiply by 100] Income Level if lower than 85% Current SMI
1	$3,275	$2,784	N/A	N/A	N/A	N/A
2	$4,273	$3,641	$2,457	57%	N/A	N/A
3	$5,291	$4,497	$3,097	59%	N/A	N/A
4	$6,299	$5,354	$3,739	59%	N/A	N/A
5	$7,307	$6,211	$4,381	60%	N/A	N/A

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

c) SMI Source and year https://www.federalregister.gov/articles/2014/07/21/2014-17063/notice-of-liheap-state-median-income-estimates-for-ffy-2015 2015

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

e) Provide the link to the income eligibility limits

http://content.dcf.ks.gov/EES/KEESM/Appendix/Appendix_10-15.html#F

3.1.5 Graduated Phase-Out of Assistance

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

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

☐ Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s) and describe the policies and procedures for graduated phase-out _____

X Not implemented. The State must provide a State-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than

September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) July 1, 2016
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) substantially implemented- Policy developed-implementation date set for July 1, 2016.
    - Implementation progress to date – Identify any requirement(s) partially or substantially implemented –Implementation date set for July 1, 2016.
    - Unmet requirement - Identify the requirement(s) not fully implemented-The state will need to revise policy to provide for a graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income.
    - Tasks/Activities – What steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) DCF policy will be changed to allow a 3 month transition period at eligibility review (redetermination) if income exceeds 185% of the FPL, but is less than 85% of the SMI. Implementation start date is July 1, 2016.
    - Projected start date for each activity Current Activity
    - Projected end date for each activity June 30, 2016
    - Agency – Who is responsible for complete implementation of this activity DCF- Lead Agency
    - Partners – Who is the responsible agency partnering with to complete implementation of this activity n/a

3.1.6 Fluctuation in Earnings

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

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

income verification to be more reflective of annual income rather than tied to a limited time frame that may have seasonal irregularities.

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

X Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement Kansas uses a prospective (income estimate or conversion) or income average method of budgeting to determine eligibility and the amount of assistance. Budgeting rules are dependent upon the frequency and regularity of income. Prospective budgeting is based on an estimate reflecting the income received and/or expected to be received in the calendar month. For earned income, if the past 30 days is reflective of the future, that information is used. If not reflective, more paystubs are obtained to project future income, or a statement from the employer may be used. For intermittent income and income from self-employment, income is averaged. If an individual experiences a substantial change, anticipated income is counted until a new average can be established.

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

- Overall Target Completion Date (no later than September 30, 2016) _____
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented _____
  - Unmet requirement - Identify the requirement(s) not fully implemented _____
- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
  - Projected start date for each activity _____
  - Projected end date for each activity _____
  - Agency – Who is responsible for complete implementation of this activity _____
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information. Check the information that the Lead Agency documents. There are no federal requirements for specific documentation or verification procedures.

X Applicant identity. Describe: This information is documented on the application form and attested to by the applicant through the application and signature process. Applicants must provide verification of identity.

X Applicant's relationship to the child. Describe In Kansas, the child must be residing with and under the care and control of the person filing the application. This is documented on the application form and attested to by the applicant through the application and signature process.

X Child's information for determining eligibility (e.g., identity, age, etc.). Describe This is documented on the application form. Hours of care needed based on caretaker's work or training schedule and the child's school schedule. Documentation of date of birth must be provided for each child for whom child care assistance is requested.

X Work. Describe Check stubs or employer statements are used to document hours worked. Work/school schedule is needed to write child care plan and determine benefits. It must be documented that adults included in the child care case are employed a minimum of 28 hours per week.

X Job training or Educational program. Describe Clients participating in job training or educational programs are required to complete a form that includes their occupational goal and estimated date of completion of their program. That form is maintained in the case file.

X Family income. Describe 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.

X Household composition. Describe 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 the household members that may be required to be included in the child care case.

X Applicant residence. Describe This information is documented on the application form and attested to by the applicant through the application and signature process.

X Other. Describe Citizenship. Documentation of U.S. citizenship is required for each individual for whom child care is requested.

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

citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start – Child Care Partnerships, or public educational standards which may include pre-k settings (http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01).

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

X Time limit for making eligibility determinations. Describe length of time: Thirty days from the date the completed application is received.

X Track and monitor the eligibility determination process

X Other. Describe The application process is tracked and monitored by field supervisors through the business process model and use of various tracking tools.

☐ None

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

Per CCDF regulations, Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization, however Lead Agencies may wish to re-examine those definitions in light of new purposes articulated in Reauthorization and to promote alignment across programs. 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/Territory TANF agency in accordance with section 407(e)(2) of the Social Security Act.

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

a) Identify the TANF agency that established these criteria or definitions:

State/Territory TANF Agency Kansas Department for Children and Families, Lead Agency

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 agency would not enter into a Provider Agreement (such as a relative unwilling to care for a child; 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?

X In writing

X Verbally

☐ Other. Describe _____

X List the citation to this TANF policy KEESM 3512

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

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

3.2 Increasing Access for Vulnerable Children and Families

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

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

a. Provide definition of "Children with special needs" a child with developmental disabilities, intellectual disabilities, social emotional impairment, sensory or motor impairment, or significant chronic illness who requires special health surveillance or specialized programs, interventions, technologies or facilities and describe how services are prioritized An enhanced rate is paid for qualified providers caring for children with special needs requiring additional care.

b. Provide definition of "Families with very low incomes" Income below 70% of the current year's federal poverty level and describe how services are prioritized Copayments are waived for families with incomes below 70% of the current year's federal poverty level.

c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act) Copayments are waived for all TANF families, and for two months for families who lose TANF eligibility and earned income is a factor, and for cases in which the only child receiving assistance is an SSI recipient.

3.2.2 Improving Access for Homeless Children and Families.

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

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

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

☐ Fully implemented and meeting all Federal requirements outlined above. Describe the following:

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

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

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

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

- Overall Target Completion Date (no later than September 30, 2016) September 01, 2016
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) partially implemented
    - Implementation progress to date – Identify any requirement(s) partially or substantially implemented

      State child care licensing policy allows for a grace period for up to 90 days to comply with immunizations and health and safety requirements. The state foster care contractors handle child care needs for children in foster care.

    - Unmet requirement - Identify the requirement(s) not fully implemented
      Requirements that are not yet fully implemented include: providing training and technical assistance to child care providers on identifying and serving homeless children and families and procedures to conduct outreach to homeless families to improve access to child care services. Discussions have started with the state McKinney Vento Liaison to develop a MOU that supports coordination of services, outreach to families who are homeless and training and technical assistance for child care providers. Additional state efforts include the Early Learning Standards (ELS) Toolkit which will include a section that addresses outreach for at-risk populations, which includes children and families experiencing homelessness. The ELS Toolkit project is expected to be completed by March 31, 2016.
- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

  DCF will conduct an environmental scan that will identify where the homeless shelters are in the state and what services are currently being provided for children and families experiencing homelessness. In addition this environmental scan will include what training and technical assistance on identifying and serving homeless children and families is available for child care providers. This information will be used to drive the MOU that will be developed with the Kansas State Department of Education (KSDE), McKinney Vento Liaison.
  Projected Start and End Dates: January 1, 2016 to March 31, 2016

MOU to be developed with KSDE McKinney Vento to support coordination of services, outreach to families who are homeless and training and technical assistance for child care providers.
Projected Start and End Dates: April 1, 2016 to September 1, 2016
DCF will provide resource information to child care providers about on-line training through Early Educator Central and McKinney Vento that focus on identifying and serving homeless children.
Projected Start and End Dates: January 1, 2016 to September 1, 2016
DCF will address services to homeless children/families in the SFY 2017 Statewide Infant-Toddler Specialist Network and Resource & Referral requests for proposals and contracts in regards to outreach, training and technical assistance.
Projected Start: January 1, 2016 to July 1, 2016

Informational brochures about child care services and support programs such as; Early Head Start, Head Start, and Part C & B Special Education Services, will be provided to homeless shelters and soup kitchens.
Projected Start and End Dates: April 1, 2016 to September 1, 2016
DCF policy will be changed to waive birth verification for up to 90 days for homeless families and to add homeless families to our priority list.
Projected start date: July 1, 2016

- Projected start date for each activity Current Activity
- Projected end date for each activity September 1, 2016
- Agency – Who is responsible for complete implementation of this activity DCF
- Partners – Who is the responsible agency partnering with to complete implementation of this activity Partners will be identified through the agency procurement process.

3.3 Protection for Working Parents

3.3.1 Twelve-Month Eligibility

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

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

In addition, this change means the State/Territory may not terminate assistance prior to the end of the 12-month period if family experiences a temporary job loss or temporary change in participation in a

training or education activity. Examples of temporary changes include but are not limited to: absence from employment due to maternity or extended medical leave, changes in seasonal work schedule, or if a parent enrolled in training or educational program is temporarily not attending class between semesters.

Describe the status of the State/Territory's establishment of 12-month eligibility and redetermination periods for CCDF families.

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

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

- Overall Target Completion Date (no later than September 30, 2016) July 1, 2106
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) partially implemented
    - Implementation progress to date – Identify any requirement(s) partially or substantially implemented Kansas currently uses a 12 month eligibility period in most instances, but 12 months is currently our maximum eligibility period.
    - Unmet requirement - Identify the requirement(s) not fully implemented Kansas does not currently have a policy to allow continuation of assistance when a family experiences a temporary job loss or change in participation in a training or education activity.

Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Kansas has developed policy to require all child care reviews be set at 12 months and eligibility will continue for three months after a temporary job loss or discontinuance of an education plan to allow for job search or resuming the approved education plan. Implementation is set for July 1, 2016

- Projected start date for each activity July 1, 2016
- Projected end date for each activity June 30, 2016
- Agency – Who is responsible for complete implementation of this activity DCF-Lead Agency
- Partners – Who is the responsible agency partnering with to complete implementation of this activity n/a

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

The CCDBG Act of 2014 provides States and Territories the option – but does not require them – to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible. (658E(c)(2)(N)(iii)) Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and redetermination period if families are eligible at the end of their job search, training or education attendance period.

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

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

X Yes, the State/Territory terminates assistance prior to 12 months due to parent's loss of work or cessation of attendance at a job training or education program ONLY. List the Lead Agency's policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs

Effective July 1, 2106 the following circumstances will be considered non-temporary job, education or training losses and DCF will allow time for job search and/or resuming attendance in training or education programs These cases will be continued for three months following the month of the change, and will be closed at the end of that three month period unless the parent/caretaker reports they have resumed qualifying employment or attendance in an approved job training or education program.

- Parents/caretakers losing employment or whose employment hours fall below the required number of hours. In these cases, assistance will be continued for 3 months following the month the change occurs.
- Parents/caretakers who are self-employed and are no longer earning a minimum of the federal minimum wage per hour.
- Parents/caretakers who stop attending an approved job training or education program, including TANF or FA work program assignments.

Closure of Child Care Plans will occur under the following circumstances:

- Recipients who fail to cooperate with program eligibility requirements such as Child Support Services. These cases will be closed allowing for timely and adequate notice.
- Recipients who lose employment, whose employment drops below the minimum hours requirement, or who stop attending an approved education or training program **and** indicate that they do not intend to look for employment, increase hours of employment or resume attendance in an approved job training or education program. These cases will be closed allowing for timely and adequate notice.
- Recipients moving out of state. These cases will be closed allowing for timely and adequate notice.
- Recipients requesting in writing their case be closed or a plan for a particular child be terminated. These cases or plans will be closed allowing for adequate notice.
- Recipients who are admitted to an institution. These cases will be closed allowing for adequate notice only.
- Recipients whose whereabouts are unknown and agency mail directed to them have been returned by the post office indicating no known forwarding address or an out of state address. These cases will be closed allowing for adequate notice only.
- The agency has factual information confirming the death of a client. These cases will be closed allowing for adequate notice only.
- Recipients who have accepted assistance in another jurisdiction and that fact has been established by the jurisdiction previously providing assistance. These cases will be closed allowing for adequate notice only.
- Recipients who are no longer using a DCF approved child care provider. These cases will be closed allowing for adequate notice only.
- Recipients who stop using child care benefits. These cases will be closed automatically by the system after two months of inactivity, allowing for timely and adequate notice.
- Families for whom verification was delayed at initial eligibility and the family subsequently failed to provide the required verification.

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

3.3.3 Prevent Disruption of Work

The CCDBG Act of 2014 added a requirement that States and Territories must describe in the Plan the procedures and policies in place to ensure that parents (especially parents in families receiving assistance under TANF) are not required to unduly disrupt their employment, education or job training activities in order to comply with the State/Territory's or designated

local entity's requirements for redetermination of eligibility for assistance. (658E(c)(2)(N)(ii)) Examples include implementing re-determination strategies to verify income and employment electronically as opposed to more onerous practices such as asking parents and families to come to the subsidy office for an in-person visit, or aligning eligibility with other early care and education or public benefits programs to collect information centrally. The process by which States and Territories collect eligibility documentation represents a potential barrier to services, particularly when documentation can only be provided in-person during standard work hours. States and Territories can offer a variety of family-friendly mechanisms for submitting documentation for eligibility determinations and/or re-determination.

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

X Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment: Kansas' process for redetermination of eligibility is family friendly and does not require applicants to visit the subsidy office in person. Applications may be delivered in person to the subsidy offices if the applicant chooses to do so, but they may also be mailed to the office, or the applicant may complete and submit their application online at the agency's website, which is available 24 hours a day. No interview is required. Agency staff verify income electronically when possible, and if it is necessary to request verification from the applicant, the applicant can provide that documentation either in person or by mail, whichever is more convenient for them.

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

- Overall Target Completion Date (no later than September 30, 2016) _____
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented _____
  - Unmet requirement - Identify the requirement(s) not fully implemented _____

- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
  - Projected start date for each activity _____
  - Projected end date for each activity _____
  - Agency – Who is responsible for complete implementation of this activity _____
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

3.4 Family Contribution to Payment

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

3.4.1 Provide the CCDF copayments in the chart below according to family size for one child in care. Note – If the sliding fee scale is not statewide, check here X Describe how many jurisdictions set their own sliding fee scale Zero (0). Fill in the chart based on the most populous area of the State.

Family Size	(a) Minimum "Entry" Income Level	(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(c) What is the percent of income for (b)?	(d) Maximum "Entry" Income Level	(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(f) What is the percent of income for (e)?
1	N/A	N/A	N/A	N/A	N/A	N/A
2	N/A	0	0	$2,457	$197	8%
3	N/A	0	0	$3,097	$243	7.8%
4	N/A	0	0	$3,739	$293	7.8%
5	N/A	0	0	$4,381	$343	7.8%

a) What is the effective date of the sliding fee scale(s)? 05-01-15

b) Provide the link to the sliding fee scale http://content.dcf.ks.gov/EES/KEESM/Current/Home.htm

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

X 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

X 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

☐ Fee is per child up to a maximum per family

☐ No additional percentage applied charged after certain number of children

☐ Fee is per family

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

☐ Other. Describe _____

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

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

☐ Number of hours the child is in care

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

X Other. Describe other factors No copayment is assigned to families in which there is a child receiving TANF, families receiving child care for a temporary emergency need (social services), or families who are participating in the Food Assistance E&T work program when participants are not employed.

☐ No.

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.42(c)). Will the Lead Agency waive family contributions/co-payments for families whose incomes are at or below the poverty level?

X Yes, the Lead Agency waives family contributions/co-payments for families with income at or below the poverty level for families of the same size. The poverty level used by the Lead Agency for a family size of 3 is $1,172 per month (70% of the federal poverty level).

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

3.4.5 How will the Lead Agency ensure the family contribution/co-payment, based on a sliding fee scale, is affordable and not a barrier to families receiving CCDF? Check all that apply.

X Limits the maximum co-payment per family. Describe Families pay one co-payment amount per family, based on family size and household income, regardless of how many children are receiving child care assistance.

☐ Limits combined amount of copayment for all children to a percentage of family income. List the percentage of the copayment limit and describe _____

X Minimizes the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5. Describe: The Lead Agency's Income and Family Share Schedule has 11 levels. This assures families a gradual increase in their family share deduction for child care as their income increases.

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 assigned family share ranges from $0 to $243 per month for a family of 3 based on their monthly gross income. The family share deduction gradually increases as the household's income increases.

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

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

☐ Other. Describe _____

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

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

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

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

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

4.1 Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A)) This did not change under the CCDBG Act of 2014.

4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2)) Information about child care options is provided in the handbook "The Parent Provider Partnership", which is provided to all applicants for child care assistance. Although it is not required for applicants to come to the office, if they do, that information may also be communicated verbally at the time of application. If the applicant has not already selected their child care provider, a referral is made to the child care resource and referral agency, which would also provide that information. The information is also available on the agency website, www.dcf.ks.gov. Families eligible for KEHS may also be eligible for child care through KEHS child care partnerships.

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

- ☐ Certificate form provides information about the choice of providers, including high quality providers
- ☐ Certificate is not linked to a specific provider so parents can choose provider of choice
- X Consumer education materials on choosing child care
- X Referral to child care resource and referral agencies

- ☐ Co-located resource and referral in eligibility offices
- X Verbal communication at the time of application
- ☐ Community outreach, workshops or other in-person activities
- X Other. Describe Agency website: www.dcf.ks.gov

4.1.3 Child Care Services Available through Grants or Contracts

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

X Yes. If yes, **describe:** Grant funds are available to KEHS programs for child care partnerships.

- the type(s) of child care services available through grants or contracts the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.) KEHS programs for child care partnerships.
- the process for accessing grants or contracts KEHS Enrollment
- the range of providers available through grants or contracts Licensed Center Care and Family Day Care
- how rates for contracted slots are set through grants and contracts Rates are currently set by individual grantees based upon community need.
- how the State/Territory determines which entities to contract with for increasing supply and/or improving quality State Procurement Process
- if contracts are offered statewide and/or locally Services are available currently based upon KEHS service areas.

____No. If no, skip to 4.1.4.

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

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

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

☐ Urban

☐ Rural

☐ Other. Describe _____

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

X Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs

X Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-k programs that meet higher quality standards

X Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased education requirements to higher compensation

X Programs to serve children with disabilities or special needs

X Programs to serve infants and toddlers

☐ Programs to serve school-age children

X Programs to serve children needing non-traditional hour care

X Programs to serve homeless children

X Programs to serve children in underserved areas

X Programs that serve children with diverse linguistic or cultural backgrounds

☐ Programs that serve specific geographic areas

☐ Urban

☐ Rural

☐ Other. Describe _____

4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access this requirement is satisfied for regulated providers by the Kansas Department of Health and Environment (KDHE), Early Care and Youth Programs Section, Child Care Licensing Program. 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 of a child enrolled in a day care facility or preschool as defined in 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 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.

ALL CCDF Providers are informed in the DCF Child Care Provider Handbook that they must allow parents to have access to their children at any time while in care. ALL CCDF Providers sign an acknowledgment that they understand that the terms listed in the DCF provider handbook and child care provider agreement are incorporated into their provider agreement with DCF and are legally binding. Their signature on the application certifies that they have read and understand those terms and agree to them.

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

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

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

X Restricted based on provider meeting a minimum age requirement. Describe Provider must be at least 18 years of age.

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

X Restricted to care by relatives. Describe Provider must be aunt, uncle, grandparent, great-grandparent or adult sibling to child. Relationship may be established by blood, marriage or court decree.

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

X Restricted to in-home providers that meet some basic health and safety requirements. Describe A "Health and Safety Standards Home Checklist" must be completed and signed by the parent/guardian and provider to certify that a walk through inspection has been conducted by both parties.

X Other. Describe Relative in-home providers must enroll as a provider for DCF and an agency (DCF) background check is completed.

☐ No

4.2 Assessing Market Rates and Child Care Costs

The new law revises the provisions for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the price to parents of child care services by geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market

rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in advance of the Plan submittal in order to avoid delays with Plan approval.

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

The State must consult with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State/Territory must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Internet in an easily interpretable and understandable form.

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

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

- X MRS
- ☐ Alternative Methodology. Describe _____
- ☐ Both. Describe _____
- ☐ Other. Describe _____

4.2.2 Describe how the State consulted with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology. The most recent market analysis completed for Kansas was nearing completion when the requirement to consult with the State Advisory Council and others in developing and conducting the analysis became law. Plans will be made for such consultation regarding the next analysis to be completed in 2017.

4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable. To be considered valid and reliable, the MRS or alternative methodology must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variation, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data such as child care resource and referral data if they are representative of the market. If an alternative methodology such as cost modeling is used, demonstrate that the methodology used reliable models that estimated the cost of delivering services in center- and home-based settings at each level of quality defined by the State/Territory. The study is based on an analysis of data maintained and supplied by Child Care Aware of Kansas (CCAKS) database. This database contains information on all regulated child care facilities in Kansas, including child care rates and hours of operation by provider type and age of child. The database also contains information on provider accreditation and professional development requirements, which were used as part of the analysis.

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

a) Geographic area (e.g., statewide or local markets) Data used reflects rates charged by providers over the entire state. Counties are grouped together based on similarities in rates charged by providers within and in surrounding counties.

b) Type of provider Data reflects rates charged by licensed child care centers and family child care homes. Kansas does not include relative and in-home providers in the analysis, as they are not open to the public.

c) Age of child Data reflects rates charged by providers for specific age groups for the type of provider.

d) Describe any other key variations examined by the market rate survey, such as quality level The latest MRS examined the relationship between rates charged and professional development completed by providers.

4.2.5 Describe the process used by the State/Territory to prepare a detailed report containing the results and make the report widely available to the public.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016) November 25, 2014

b) Date report containing results was made widely available, no later than 30 days after the completion of the report March 10, 2015

c) How the report containing results was made widely available and provide the link where the report is posted if available The report was posted on the lead agency's website at http://www.dcf.ks.gov/services/ees/pages/child_care/child-care-and-early-education.aspx

4.3 Setting Payment Rates

4.3.1 Provide the base payment rates and percentiles (based on current MRS) for the following categories. The ages and types of care listed below are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory or reflective of the terms that your State/Territory may use for particular ages. Please use the most populous geographic region (serving highest number of children). Note – If the payment rates are not set by the State/Territory, check here ☐. Describe how many jurisdictions set their own payment rates. Based on data from the November 2014 market analysis, counties were divided into three groups of counties with similar characteristics. Although the percentile for individual counties is varied, rates were set for each group as a whole at the 40th percentile of the market rate. This includes a most recent rate adjustment that became effective January 1, 2016.

a) Infant (6 months), full-time licensed center care in most populous geographic region
   - Rate $3.56 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 15th
b) Infant (6 months), full-time licensed FCC care in most populous geographic region
   - Rate $2.40 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 50th
c) Toddler (18 months), full-time licensed center care in most populous geographic region
   - Rate $3.35 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 15th
d) Toddler (18 months), full-time licensed FCC care in most populous geographic region
   - Rate $2.40 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 50th
e) Preschooler (4 years), full-time licensed center care in most populous geographic region
   - Rate $2.70 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 37th
f) Preschooler (4 years), full-time licensed FCC care in most populous geographic region
   - Rate $2.21 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 55th
g) School-age child (6 years), full-time licensed center care in most populous geographic region
   - Rate $2.27 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 37th
h) School-age child (6 years), full-time licensed FCC care in most populous geographic region
   - Rate $2.21 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)

- Percentile 55th

i) Describe the calculation/definition of full-time care Providers who meet all of the following criteria were classified as full-time providers for purposes of the market analysis:
   - Reported either full-time weekly or full-time monthly rates.
   - Had care available Monday through Friday.
   - Rendered services between 50-55 hours per week.

j) Provide the effective date of the payment rates 01-01-16

k) Provide the link to the payment rates http://content.dcf.ks.gov/EES/KEESM/Appendix/C-18_ProviderRateCht.pdf

4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care. In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

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

X Tiered rate/rate add-on for non-traditional hours. Describe Base payment rates are set based on the following factors: 1) geographic location (by county and based on current Market Rate analysis), 2) age of child, and 3) type of care (Licensed Center, Licensed Family Child Care, Out of home relative care, and in home relative care.)

X Tiered rate/rate add-on for children with special needs as defined by the State/Territory. Describe The lead agency provides an enhanced benefit rate to purchase child 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.

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

X Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory. Describe Child care providers who serve children who access child care through the comprehensive services offered through the KEHS program are required to meet higher quality standards and are reimbursed at a higher rate. These services are slated to continue through the new KEHS Child Care Partnership Grants effective July 1, 2016.

X Tiered rate/rate add-on for programs serving homeless children. Describe KEHS programs prioritize homeless children for services. Child care providers who serve children who access child care through the comprehensive services offered through the KEHS program are required to meet higher quality standards and are reimbursed at a higher rate. These services are slated to continue through the new KEHS Child Care Partnership Grants effective July 1, 2016.

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

☐ None.

4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology Effective January 1, 2016 DCF implemented a rate adjustment based upon the most current Market Rate Analysis, dated November 25, 2014.

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014. For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary. In addition to the recently implemented rate adjustment, the state of Kansas is in the development phase of a statewide QRIS system. A system of supports and financial incentives linked to identified quality indicators will be developed. A field test date is targeted for Fall 2016.

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

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

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

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

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

- ☐ Rates based on data on the cost to the provider of providing care meeting certain standards. Describe _____
- ☐ Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile. Describe _____
- ☐ Data on the proportion of children receiving subsidy being served by high-quality providers. Describe _____
- ☐ Data on where children are being served showing access to the full range of providers. Describe _____
- ☐ Feedback from parents, including parent survey or parent complaints. Describe

X Other. Describe The Lead Agency trains its field staff about the full range of child care choices available to parents who 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.

The Lead Agency, through a contractor, completed its most recent market rate analysis in November 2014. 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 NACCRRA-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.

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

X Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access. Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access

The Kansas Child Care Assistance program provider base rates are set based upon the most current Market Rate Analysis and based on the following factors: 1) geographic location (by county), 2) age of child, and 3) type of care (Licensed Center, Licensed Family Child Care, Out of home relative care, and in home relative care.) Provider base rates are used in the calculation of benefits issued to parents. Benefits are designed to assist families in the cost of their 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. Child Care 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. The Lead Agency will also initiate the enrollment process with any eligible provider who is not currently enrolled but is chosen by the parent.

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

- Overall Target Completion Date (no later than September 30, 2016) _____
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented _____
  - Unmet requirement - Identify the requirement(s) not fully implemented _____
- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
  - Projected start date for each activity _____
  - Projected end date for each activity _____
  - Agency – Who is responsible for complete implementation of this activity _____
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

4.5 Payment Practices and Timeliness of Payments

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

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

X Fully implemented and meeting all Federal requirements outlined above. Describe using 4.5.2 through 4.5.3 below.

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

- Overall Target Completion Date (no later than September 30, 2016) _____
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented _____
  - Unmet requirement - Identify the requirement(s) not fully implemented _____
- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
  - Projected start date for each activity _____
  - Projected end date for each activity _____
  - Agency – Who is responsible for complete implementation of this activity _____
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

4.5.2 Describe how the payment practices to child care providers who serve CCDF-assisted children reflect generally accepted payment practices of other child care providers in the State/Territory to ensure stability of funding to encourage more child care providers to serve children who receive CCDF assistance. The Lead Agency …

X Pays prospectively prior to the delivery of services. Describe Benefits for a month are issued to the parent's Electronic Benefit Transfer (EBT) child care account on the first day of each month to assist the parent in paying for child care services purchased. The payment schedule and other terms of payment are determined by the parent and the provider and established within the parent-provider contract.

- ☐ Pays within no more than 21 days of billing for services. Describe _____
- ☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance. Describe including the State/Territory's definition of occasional absences _____
- ☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe _____

X Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month. Specify the number of absence days allowed and paid for and describe Benefits issued to the parent's EBT child care account are for the hours of care the child is expected to need, based on the parent's work schedule, the child's school schedule (if applicable), the age of the child, and the type of provider selected.

- ☐ Pays on a full-time or part-time basis (rather than smaller increments such as hourly) _____
- ☐ Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.) _____
- ☐ Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment _____
- ☐ Has a timely appeal and resolution process for payment inaccuracies and disputes. Describe _____
- ☐ Other. Describe _____

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

- ☐ Policy on length of time for making payments. Describe length of time _____
- ☐ Track and monitor the payment process _____
- ☐ Use of electronic tools (e.g., automated billing, direct deposit, etc.) Describe _____

X Other. Describe Benefits are available at the first of the month for parents to pay their provider. Regulated Child Care providers enrolled with DCF are required to have their payment polices included within their parent provider contract.

4.6 Supply Building Strategies to Meet the Needs of Certain Populations

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

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

X Yes. Describe data sources: Fifty (50) high need counties have been identified based on high poverty, unemployment and out of home placement data. The data collected for the high priority counties includes high poverty- 18.8%-36.7% (Census Bureau, 2013 American Community Survey produced by: Data Advocacy, Casey Family Programs). Unemployment 2% or above-(Kansas Labor Force Estimates, provided by the Kansas Department of Labor, September 2015). Out of Home Placement (OOHP) over 1% (Department for Children and Families- Prevention and Protection Services, September 2015).

☐ No. If no, how does the State/Territory determine most critical supply needs? _____

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

a) Infants and toddlers

X Grants and contracts (as discussed in 4.1.3)

☐ Family child care networks

☐ Start-up funding

☐ Technical assistance support

☐ Recruitment of providers

X Tiered payment rates (as discussed in 4.4.1)

☐ Other. Describe

b) Children with disabilities

X Grants and contracts (as discussed in 4.1.3)

☐ Family child care networks

☐ Start-up funding

☐ Technical assistance support

☐ Recruitment of providers

☐ Tiered payment rates (as discussed in 4.4.1)

X Other. Describe An enhanced rate is available.

c) Children who receive care during non-traditional hours

X Grants and contracts (as discussed in 4.1.3)

☐ Family child care networks

☐ Start-up funding

☐ Technical assistance support

☐ Recruitment of providers

☐ Tiered payment rates (as discussed in 4.4.1)

X Other. Describe Parental Choice allows for the use of regulated, license exempt, relative or in-home care.

d) Homeless children

X Grants and contracts (as discussed in 4.1.3)

☐ Family child care networks

☐ Start-up funding

☐ Technical assistance support

☐ Recruitment of providers

☐ Tiered payment rates (as discussed in 4.4.1)

☐ Other. Describe _____

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

☐ Fully implemented and meeting all Federal requirements outlined above. Describe_____

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

- Overall Target Completion Date (no later than September 30, 2016) July 1, 2016
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) partially implemented
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented. Services to be implemented through a competitive procurement grant process to KEHS programs.
  - Unmet requirement - Identify the requirement(s) not fully implemented Increase access for infant and toddlers to programs providing high

quality child care and development services in areas having significant concentrations of poverty and unemployment.

- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Complete procurement process and award grant.
  - Projected start date for each activity Current Activity
  - Projected end date for each activity July 1. 2016
  - Agency – Who is responsible for complete implementation of this activity DCF- Lead Agency
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity Procurement of services process will be used.

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

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

Pre-licensure and annual unannounced inspections of licensed CCDF providers and annual inspections of license-exempt CCDF providers are now required. The CCDBG Act of 2014 requires States and Territories to establish qualifications and training for licensing inspectors and appropriate inspector-to-provider ratios. It also requires States and Territories to conduct criminal background checks for all child care staff members, including staff members who don't care directly for children but have unsupervised access to children and lists specific disqualifying crimes. States and Territories must certify that all child care providers comply with child abuse reporting requirements of Child Abuse Prevention and Treatment Act (CAPTA), mandatory reporting of known and suspected instances of child abuse and neglect).

5.1 Licensing Requirements and Standards

Each State/Territory is required to certify it has in effect licensing requirements applicable to all child care services provided within the State/Territory (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(F) Nothing in the statute prohibits the State/Territory from exempting child care providers from licensing requirements. But, if the State/Territory exempts any child care providers from State/Territory licensing requirements, the CCDBG Act of 2014 requires States and Territories to describe how such licensing exemptions do not endanger the

health, safety, and development of children receiving CCDF who are cared for by the license-exempt providers. (658E(c)(2)(F)(ii))

5.1.1 The State/Territory certifies that it has licensing requirements applicable to all child care services provided within the State. (658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

Drop-In Programs for School Age Children and Youth - a child care facility that is not located in an individual's residence, that serves exclusively school-age children and youth, and in which the operator permits children and youth to arrive at and depart from the program at their own volition and at unscheduled times.

School-age program – a child care facility that serves exclusively school-age children and youth that is not a Drop-In Program

Day Care Home – the premises on which care is provided for a maximum of 10 children under 16 years of age, with a limited number of children under 5 years of age.

Group Day Care Home – the premises on which care is provided for a maximum of 12 children under 16 years of age, with a limited number of children under 5 years of age.

Child Care Center – a facility:

- Which provides care and educational activities for 13 or more children 2 weeks to 16 years of age for more than 3 hours and less than 24 hours per day including day time, evening, and nighttime care; or
- Which provides before and after school care for school-age children. A facility may have fewer than 13 children and be licensed as a center if the program and building meet child care center regulations.

Preschool – a facility:

- Which provides learning experiences for children who have not attained the age of eligibility to enter kindergarten and who are 30 months of age or older;
- Which conducts sessions not exceeding 3 hours;
- Which does not enroll any child more than 1 session per day; and
- Which does not serve a meal.

Day Care Referral Agency – an association, organization, individual, or corporation receiving, caring for, and finding homes for children needing day care who are under 16 years of age.

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

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

- License exempt Before and After School programs currently operated by School Districts. Please refer to 5.1.3 for the implementation plan for these programs that wish to receive subsidy and will no longer be exempt as of 09-01-16.
- Out of Home and In Home Relative providers. These providers are related to the children they provide care for. They are authorized to provide care for up to 6 children under 16 years old (this includes the provider's own children). Providers must be at least 18 years old and a grandparent, great grandparent, sibling, or aunt/uncle of the child.

- Centers run by the Federal Government such as Job Corps and Military settings must meet stringent standards. The Federal Government performs routine inspections and monitoring of these programs.
- Facilities owned and run by Tribes must meet CCDF Tribal guidelines.
- Licensed Facilities that are operated outside the state lines are monitored by the state where the facility is located.

☐ No

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

☐ Fully implemented and meeting all Federal requirements outlined above. Describe using 5.1.4 and 5.1.5 below.

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

- Overall Target Completion Date (no later than September 30, 2016) September 1, 2016
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) partially implemented
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented All categories of care meet this requirement with the exception of Drop in Center licensed facilities and license exempt after school programs operated by a school district.
  - Unmet requirement - Identify the requirement(s) not fully implemented The Drop In Center License requires an annual inspection and background checks it does not include an Adult/Child ratio or Health and Safety Training for staff. The After School Programs run by individual school districts are not licensed and do not have annual health and safety inspections.

Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) DCF policies are being modified to require all Drop-In Centers and After School Programs to be licensed as School Age Programs in

order to enroll as a DCF Child Care Provider and accept Child Care Subsidy as payment.

- Projected start date for each activity Current Activity
- Projected end date for each activity September 1, 2016
- Agency – Who is responsible for complete implementation of this activity DCF- Lead Agency
- Partners – Who is the responsible agency partnering with to complete implementation of this activity n/a

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

a) Licensed Center-Based Care

1. Infant
   - State/Territory age definition: 0 to 12 mos
   - Ratio: 1 to 3
   - Group size: 9
2. Toddler
   - State/Territory age definition: 12 to 30 mos
   - Ratio: 1 to 5
   - Group size: 10
3. Preschool
   - State/Territory age definition: 31 mos to 6 years
   - Ratio: 1 to 12
   - Group size: 24
4. School-Age
   - State/Territory age definition: 6 years of age and older
   - Ratio: 1 to 16
   - Group size: 32
5. If any of the responses above are different for exempt child care centers, describe Licensed exempt providers who will continue to be eligible to enroll to receive Child Care Subsidy include: Child Care Providers regulated by the federal government (Job Corps and Military Providers), Tribes, or a surrounding state. These entities set their own definitions, ratios and group size.

6. Describe, if applicable, ratios and group sizes for centers with mixed age groups The minimum staff/child ratio is shown above. The ratio between staff and children shall be determined by the age of children and type of service provided. The required staff/child ratio shall not fall below the minimum level at any time and no child shall be left unsupervised.

b) Licensed Group Child Care Homes:

1. Infant
   - State/Territory age definition: 0 to 18 mos
   - Ratio: 1 to 3 or 2 to 4
   - Group size: The age mix of the children and the number of adults present determines the total capacity.

2. Toddler
   - State/Territory age definition: 18 mos to 5 years
   - Ratio: 1 to 7 or 2 to 9
   - Group size: The age mix of the children and the number of adults present determines the total capacity.

3. Preschool
   - State/Territory age definition: n/a for Licensed Group Homes
   - Ratio:
   - Group size:

4. School-Age
   - State/Territory age definition: 5 to 11 years old
   - Ratio: 1 to 10 or 2 to 12
   - Group size: The age mix of the children and the number of adults present determines the total capacity

5. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day Care is provided for a maximum of 12 children under 16 years of age, with a limited number of children under 5 years of age. The provider's children are included in the group size if at home while care is provided.

6. If any of the responses above are different for exempt group child care homes, describe Exempt group child care homes located outside the state will be governed by the state's ratio and group size where the provider resides.

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

c) Licensed Family Child Care:

1. Describe the ratios 1-10, group size 10, the threshold for when licensing is required none, maximum number of children that are allowed in the home at any one time 10, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size 10, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day Not more than 2 additional children 2 ½ years of age

or older who attend part-day preschool or part-day kindergarten may be present at any time between the hours of 11am and 1 pm for the noon meal on days that school is in session. Not more than 2 additional children at least 5 years of age but under 11 years of age may be present between the hours of 6am and 6pm. The additional children may be present as follows:

1. During the academic school year before and after school, in-service days, school holidays, scheduled or emergency closures, and school breaks not to exceed 2 consecutive weeks; and

2. During the 2 consecutive weeks before the opening of the academic school year in August or September and following the end of the academic school year in May or June.

2. If any of the responses above are different for exempt family child care home providers, describe Family child care homes located outside the state are subject to that state's ratio and group size requirements where they reside. Facilities located on military bases are governed by the ratio and group size set by the Department of Defense.

d) Any other eligible CCDF provider categories:

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

Relatives (defined as the Great grandparent, the grandparent, the aunt/uncle or sibling of the child) are allowed to care for up to 6 children in their home without being licensed. The relative's own children are counted in the group size if in the home during the hours of care.

In-Home Relative Providers (defined as the Great grandparent, the grandparent, the aunt/uncle or sibling of the child) are allowed to care for up to 6 children in the child's home. There are no state licensing requirements for in-home providers.

School-Age Programs must have a qualified group leader for each 30 children or youth attending the program. In addition, additional qualified staff shall be maintained to ensure that the supervisory ratio of 1 staff member for each 15 children is not exceeded.

5.1.5 Describe how the State/Territory child care standards address required qualifications for providers appropriate to each type of setting, including the minimum age allowed, minimum education level, any specific content required related to the age of children. (658E(c)(2)(H))

a) Licensed Center-Based Care:

All Center-Base Care employees must attend an Orientation within 7 calendar days of employment and prior to sole responsibility for the care of supervision of children. The orientation includes the following: licensing regulations; the policies and practices of the preschool or child care center; including emergency procedures, behavior management, and discipline; the schedule of daily activities; care and supervision of children in care; health and

safety practices; and confidentiality. The orientation can be taught by the Center Director or other qualified employee.

1. Infant lead teacher _____ and assistant teacher qualifications _____

   Each unit shall have 1 staff person who is at least 18 years of age and who has a high school diploma or its equivalent. Units enrolling fewer than 13 children shall have a staff person who meets the same training requirement as a Program Director for facilities with fewer than 13 children. Units enrolling 13 to 24 children shall have a staff person who meets the same training requirements as a Program Director for a facility of the same size. Unites enrolling more than 24 school-age children shall have a staff person who meets the requirements of a facility licensed for the same size.

   In addition, each licensee shall ensure that at least 1 staff member who meets one of the following staff requirements is present for each unit of infants and each unit of toddlers:

   Option 1: At least 3 months experience caring for infants and toddlers and one of the following:

   - Six months' teaching experience in licensed facilities with children of the same age as enrolled in present facility; or
   - Five sessions of observation for not less than 2 ½ consecutive hours per observation in licensed facilities with children of the same age as enrolled in present facility; and 10 clock hours of workshops approved by the state licensing staff; or
   - A minimum of 3 semester hours of academic credit or equivalent training in child development, early childhood education, and curriculum resources; and supervised observation in high school or college or 3 months' work experience with children of the same age as enrolled in present facility.

   Option 2: A child development associate credential and has at least 3 months' experience caring for infants and toddlers; or

   Option 3: A licensed LPN or RN with 3 months' experience in pediatrics or in a licensed child care center enrolling infants and toddlers.

   Assistant teachers shall be at least 16 years of age and shall have attended a staff orientation at the time of employment.

2. Toddler lead teacher _____ and assistant teacher qualifications _____

   Same as above

3. Preschool lead teacher _____ and assistant teacher qualifications _____

   Each unit shall have 1 staff person who is at least 18 years of age and who has a high school diploma or its equivalent. Units enrolling fewer than 13 children shall have a staff person who meets the same training requirement as a Program Director for facilities with fewer than 13 children. Units enrolling 13 to 24 children shall have a staff person who meets the same training requirements as a Program Director for a facility of the same size. Unites enrolling more than 24 school-age children shall

have a staff person who meets the requirements of a facility licensed for the same size.
In addition, each unit shall have 1 staff person the following training requirements;
Option 1: Six months' teaching experience in licensed facilities with children of the same age as enrolled in present facility.
Option 2: Five sessions of observation for not less than 2 ½ consecutive hours per observation in licensed facilities with children of the same age as enrolled in present facility; and 10 clock hours of workshops approved by the state licensing staff.
Option 3: A minimum of 3 semester hours of academic credit or equivalent training in child development, early childhood education, and curriculum resources; and supervised observation in high school or college or 3 months' work experience with children of the same age as enrolled in present facility; or
Option 4: A child development associate credential.
Assistant teachers shall be at least 16 years of age and shall participate in staff orientation at time of employment.

4. School-Age lead teacher _____ and assistant teacher qualifications _____

Teaching staff must have a BA or BS degree in elementary education, physical education, child development or a related academic discipline, and 3 months' experience with school-age children.
Assistant teachers shall be at least 16 years of age and shall participate in staff orientation at time of employment.
In addition, Units enrolling fewer than 13 children shall have a staff person who meets the same training requirement as a Program Director for facilities with fewer than 13 children. Units enrolling 13 to 24 children shall have a staff person who meets the same training requirements as a Program Director for a facility of the same size. Unites enrolling more than 24 school-age children shall have a staff person who meets the requirements of a facility licensed for the same size.

5. Director qualifications _____

Program directors shall be 18 years of age or older and shall meet the training requirements for the license capacity of the facility.
Facilities with fewer than 13 children shall have a program director who meets the training requirements by one of the following options:
Option 1: 6 months' teaching experience in licensed facilities with children of the same age as enrolled in present facility;
Option 2: 5 sessions of observation for not less than 2 ½ consecutive hours per observation in licensed facilities with children of the same age as enrolled in the present facility; and 10 clock hours of workshops approved by the state licensing staff.
Option 3: A minimum of 3 semester hours of academic credit or equivalent training in child development, early childhood education, and curriculum resources; and supervised observation in high school or college or 3 months' work experience with children of the same age as enrolled in present facility; or
Option 4: A child development associate credential.
Facilities licensed for not less than 13 and not more than 24 children shall have a program director who meets the training requirements by one of the following options:
Option 1: Five sessions of observation for not less than 2 ½ consecutive hours per observation in licensed preschools or child care centers; and one year of teaching

experience in licensed centers or preschools, or one year of supervised practicum in a licensed center or preschool.
Option 2: Seven to nine semester hours of academic credit or equivalent training in child development or early childhood education; and 3 months teaching experience in licensed centers or preschools, or 1 year of supervised practicum in a licensed center or preschool.
Facilities licensed for more than 24 children shall have a program director who meets the training requirements by one of the following options:
Option 1: 12 semester hours of academic study or equivalent training in child development, early childhood education, curriculum resources, nutrition, child guidance, parent education, supervised practicum, and administration of early childhood programs; and 6 months teaching experience in licensed centers or preschools.
Option 2: A child development associate credential and 1 year of teaching experience in licensed centers or preschools, or supervised practicum in licensed centers or preschools;
Option 3: An associate of arts degree or a 2 year certificate in child development and 1 year of teaching experience in licensed centers or preschools, or a supervised practicum in licensed centers or preschools;
Option 4: An AB or BS degree in child development or early childhood education, including supervised practicum; and 3 months teaching experience in a licensed center or preschool
Option 5: An AB or BS degree in a related academic discipline, and 12 hours of academic study or equivalent training in child development, early childhood education, curriculum resources, nutrition, child guidance, parent education, supervised practicum, and administration of early childhood programs; and 6 months of teaching experience in licensed centers or preschools.
Facilities licensed for more than 100 children shall have a program director who meets the following requirements:
A degree in child development or early childhood education; or an AB or BS degree in a related academic discipline and 12 hours of academic study or equivalent training in child development, early childhood education, curriculum resources, nutrition, child guidance, parent education, supervised practicum, and administration of early childhood programs; and 1 year of experience as a program director in a center licensed for more than 24 children, or 1 year of experience as an assistant program director in a center licensed for more than 100 children.
Facilities licensed for more than 100 children shall have an assistant program director who meets the requirements for a program director for a facility licensed for more than 24 children.
Facilities licensed for more than 160 children shall have an assistant program director that meets the requirements for a program director for a facility licensed for more than 24 children and has no other assigned responsibilities.

b) Licensed Group Child Care Homes:

1. Infant lead teacher _____ and assistant qualifications _____
2. Toddler lead teacher _____ and assistant qualifications _____
3. Preschool lead teacher _____ and assistant qualifications _____
4. School-Age lead teacher _____ and assistant qualifications _____

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

A Group Child Care Home provider must be a high school graduate or the equivalent thereof and attend a pre-Licensing orientation session.

c) Licensed Family Child Care home provider qualifications

A Licensed Family Child Care Home provider must be a high school graduate or the equivalent there of and attend a pre -Licensing Orientation Session.

d) Other eligible CCDF provider qualifications

In-Home and Relative providers must be at least 18 years old. Providers governed by other states, the federal government and tribes have their own set of qualifications which take precedence.

5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics. (658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

a) The State/Territory certifies that it has health and safety requirements for providers receiving CCDF in the following areas:

- Prevention and control of infectious diseases (including immunization)
- Prevention of sudden infant death syndrome and use of safe sleeping practices
- Administration of medication, consistent with standards for parental consent
- Prevention of and response to emergencies due to food and allergic reactions
- Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
- Prevention of shaken baby syndrome and abusive head trauma
- Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))
- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
- First aid and cardiopulmonary resuscitation (CPR) certification

☐ Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas.

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

- Overall Target Completion Date (no later than September 30, 2016)
  September 30, 2016
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
  substantially implemented.
- Implementation progress to date – Identify any requirement(s) partially or substantially implemented

Pursuant to K.S.A. 65-504 a license may not be issued until an applicant is in full compliance. Currently Kansas has both orientation and pre-licensure/preservice requirements.

Orientation

1. Pre-application orientation:

Pursuant to K.A.R. 28-4-114a (a)(1) [licensed day care homes and group day care homes] and K.A.R.28-4-428a(a)(1)[child care centers and preschools] each person must complete an orientation provided the health department or the secretary's designee on the requirements for operating a child care facility **prior to submitting an application for a license.**

2. Orientation for individuals caring for children (providers and staff that are not the applicant/licensee) must be completed **prior to being given sole responsibility for the care and supervision of children.**

Pursuant to K.A.R. 28-4-114a (a)(2) and K.A.R. 28-4-428a(a)(2)(3) (4) orientation must be provided by the licensee and must include the policies and practices of the facility and licensing regulations.

Pre-licensure

Pre-licensure training includes Health and Safety training (currently 2 clock hours each in child abuse and neglect, including abusive head trauma; basic child development; and safe sleep practices and SIDS) and certification in CPR and First Aid.

1. Pursuant to K.A.R. 28-4-114a(b)(1) applicants must complete health and safety training within 30 days of submitting an application for a license.
2. Pursuant to K.A.R. 28-4-114a(b)(2) and K.A.R. 28-4-428a(b)(1) each provider, program director and each staff member counted in child/staff ratios must complete health and safety training before employment or not later than 30 calendar days after the date of employment.

3. Pursuant to K.A.R. 28-4-114a(c) and K.A.R. 28-4-428a(c) certification in CPR and First Aid is requirement with 30 calendar days of submitting an application, or beginning employment. Certifications must be maintained current.

Additional pre-licensure/preservice requirements

1. Pursuant to K.A.R. 28-4-28-114a(d) each applicant and primary care provider in a day care homes/group day care home must meet one of the following professional development requirements within 30 days following an initial application:
   - Have a CDA;
   - Complete at least 15 clock hours of professional development training (may include the required health and safety training and CPR/First Aid);
   - Have 3 months previous experience in a licensed facility; or
   - Meet the requirements for program director in center/preschool

2. Program directors and staff in a center or preschool in addition to the required health/safety training and CPR/FA must be qualified by education/training based on the capacity of the facility/classroom {K.A.R. 28-4-429]

Annual professional development requirements

1. Currently licensed day care home and group day care home providers are required to obtain at least 5 clock hours of professional development training annually[K.A.R. 28-4-114a(e)].
2. Child care center and preschool staff are required to obtain 10 clock hours of annual training; program directors must have at least 5 clock hours of training away from the facility[K.A.R. 28-4-428(e)].

   - Unmet requirement - Identify the requirement(s) not fully implemented Orientation does not include Medication Administration, Handling and Storage of bio-hazards; and Emergency Preparedness for all types of licensed facilities.

Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Kansas is planning on amending pre-licensure/preservice requirements to include the additional topic areas specified in the CCDBG Act of 2014.

- Projected start date for each activity Current Activity
- Projected end date for each activity September 1, 2016
- Agency – Who is responsible for complete implementation of this activity KDHE
- Partners – Who is the responsible agency partnering with to complete implementation of this activity n/a

b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above. ACF expects these trainings will be part of a broader

systematic approach and progression of professional development (as described in Section 6) within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education. The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children* for best practices and recommended time needed to address these training requirements.

X Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above. Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements

Orientation Definition:

1. Pre-application orientation:

Pursuant to K.A.R. 28-4-114a (a)(1) [licensed day care homes and group day care homes] and K.A.R.28-4-428a(a)(1)[child care centers and preschools] each person must complete an orientation provided the health department or the secretary's designee on the requirements for operating a child care facility prior to submitting an application for a license.

2. Orientation for individuals caring for children (providers and staff that are not the applicant/licensee) must be completed prior to being given sole responsibility for the care and supervision of children.

Pursuant to K.A.R. 28-4-114a (a)(2) and K.A.R. 28-4-428a(a)(2)(3) (4) orientation must be provided by the licensee and must include the policies and practices of the facility and licensing regulations.

Preservice Definition:

Pre-licensure training includes Health and Safety training (currently 2 clock hours each in child abuse and neglect, including abusive head trauma; basic child development; and safe sleep practices and SIDS) and certification in CPR and First Aid.

1. Pursuant to K.A.R. 28-4-114a(b)(1) applicants must complete health and safety training within 30 days of submitting an application for a license.
2. Pursuant to K.A.R. 28-4-114a(b)(2) and K.A.R. 28-4-428a(b)(1) each provider, program director and each staff member counted in child/staff ratios must complete health and safety training before employment or not later than 30 calendar days after the date of employment.
3. Pursuant to K.A.R. 28-4-114a(c) and K.A.R. 28-4-428a(c) certification in CPR and First Aid is requirement with 30 calendar days of submitting an application, or beginning employment. Certifications must be maintained current.

Additional pre-licensure/preservice requirements

1. Pursuant to K.A.R. 28-4-28-114a(d) each applicant and primary care provider in a day care homes/group day care home must meet one of the following professional development requirements within 30 days following an initial application:
   - Have a CDA;
   - Complete at least 15 clock hours of professional development training (may include the required health and safety training and CPR/First Aid);
   - Have 3 months previous experience in a licensed facility; or
   - Meet the requirements for program director in center/preschool
2. Program directors and staff in a center or preschool in addition to the required health/safety training and CPR/FA must be qualified by education/training based on the capacity of the facility/classroom {K.A.R. 28-4-429]

Minimum number of annual ongoing training and education hours:

KDHE currently requires 5 clock hours a year of ongoing training. These hours can include CPR recertification or Pediatric First Aid. These hours can also include directed training such topics as Sleep Safety or Appropriate discipline.

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

- Overall Target Completion Date (no later than September 30, 2016) _____
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented _____
  - Unmet requirement - Identify the requirement(s) not fully implemented _____
- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
  - Projected start date for each activity _____
  - Projected end date for each activity _____

- Agency – Who is responsible for complete implementation of this activity _____
- Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

5.1.7 Does the State/Territory have health and safety requirements for any of the following optional areas?

X Nutrition. Describe Each Licensee shall develop and implement menu plans for meals and snacks that contain a variety of healthful food, including fresh fruits, fresh vegetables, whole gains, lean meats and low-fat dairy products. Centers will employ a person who has knowledge of nutritional needs of children; understands quantity food preparation and service; practices sanitary methods of food handling and storage; is sensitive to individual and cultural food tastes of children; and is willing to work with the program director in planning learning experiences for children relative to nutrition.

X Access to physical activity. Describe Each child shall be given the opportunity for at least 1 hour of physical activity daily, either outdoors (unless prohibited by the child's medical condition or extreme weather conditions) or indoors.

X Screen time. Describe K.A.R 28-4-116 (a)
(5) Each applicant with a temporary permit and each licensee shall ensure that the following requirements are met if the daily activities include any media viewing:

(A) Each program shall be age-appropriate and, if rated, shall have a rating appropriate for the ages and developmental levels of the children who view the program.
(B) No child shall be required to participate in media viewing. Each child not engaged in media viewing shall be offered a choice of at least one other activity for that time period.

X Caring for children with special needs. Describe Definition: "Child with handicaps" means a child in care who does not function according to age-appropriate expectations to such an extent that the child requires special help, program adjustment, and support services on a regular basis. Child Care Centers serving children with handicapping conditions shall have written parental permission on file for the evaluation and placement of the child. Programs which include non-ambulatory children shall be conducted on the ground floor. All exits and steps shall have ramps approved by a fire inspector. Facilities enrolling children who use walkers or wheelchairs shall have 50 square feet of space for each physically handicapped child. When physically handicapped children are enrolled, toilets and washbasins shall be designed to accommodate them. If a handicapped child is enrolled, the facility must have a staff person in that room that has a minimum of 6 hours of academic credits in understanding the needs of handicapped children and in developing individual program plans. A written individual program plan shall be on file for each handicapped child enrolled and in consultation with the parent, shall be reviewed and revised annually.

X Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety. Describe

General environmental requirements are that each License home will have 25 square feet of available play space per child while each Center and School Age program will have 35 square

feet; Centers and School Age programs must also have 75 square feet of outdoor place space for each child; walls must be in good condition; fire extinguisher; working smoke detector; visibly clean and free from any evidence of vermin infestation.

5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from CCDF health and safety training requirements. Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics? Note this exception applies if the individual cares ONLY for relative children.

X Yes, all relatives are exempt from all health and safety training requirements. If the State/Territory exempts all relatives from the CCDF health and safety training requirements, describe how the State ensures the health and safety of children in relative care. The Relative provider and the parent/guardian complete a Health and Safety Checklist of the facility where the care will be provided.

☐ Yes, some relatives are exempt from health and safety training requirements. If the State/Territory exempts some relatives from the CCDF health and safety training requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.

_____

☐ No, relatives are not exempt from CCDF health and safety training requirements.

5.2 Monitoring and Enforcement Policies and Practices

5.2.1 The State/Territory certifies that the State/Territory has in effect policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements. (658E(c)(2)(J))

_ Yes. The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities. List the policy citation:

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

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

- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Substantially implemented
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented Kansas has policies and practices in place to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities. Policy citation: Kansas Economic and Employment Services Manual Section 10034 #5 a – c.
  - Unmet requirement - Identify the requirement(s) not fully implemented As per (658E(c)(2)(I)(i) current orientation does not include Medication Administration, Handling and Storage of bio-hazards; and Emergency Preparedness for all types of licensed facilities.
- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) As per the implementation plan found in Section 5.1.6 of this plan.
  - Projected start date for each activity Current Activity
  - Projected end date for each activity September 1, 2016
  - Agency – Who is responsible for complete implementation of this activity KDHE
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity KDHE

5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives).

a) **Licensing Inspectors** - It will have policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. (658E(c)(2)(K)(i)(I))

X Yes. The State/Territory certifies that it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting:

Specific requirements are provided for within the MOU between DCF, the lead agency and KDHE, the child care licensing agency in Kansas. The MOU states:

KDHE shall monitor statewide activities to ensure:

- Initial training of new surveyors
- Joint surveys and investigations to observe and assess surveyor skills
- Update skill training for additional training opportunities to expand professional development
- Review quarterly program activity and expenditure reports
- Surveys and investigation for compliance with agency policies, procedures and contractual requirements and for appropriate citation of regulatory findings

Surveyor qualifications are an application requirement under the KDHE Aid to Local contract and will be added to the updated MOU between agencies. The contract states that surveyors must complete 5 hours of professional development annually and attend 3 of 4 quarterly KDHE Regional Meetings. The total number of surveyor completed professional development hours and the regional meeting information is reported in the KDHE quarterly report submitted to the Lead Agency.

Surveyor Qualifications: RN or 4 year degree in nursing, early childhood or elementary education, child development, human development, social work or a related field. Surveyors receive face-to-face training upon hiring and ongoing technical assistance as need. KDHE Child Care Coordinator/District Specialists conduct 4 regional meetings annually and provide ongoing training related to regulation and procedure. Surveyors are also required to attend at minimum 3 of the 4 KDHE regional meetings which are focused on training.

__No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016)
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
- Implementation progress to date – Identify any requirement(s) partially or substantially implemented
- Unmet requirement - Identify the requirement(s) not fully implemented
  - Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

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

b) **Inspections for Licensed CCDF Providers** - It will require licensing inspectors to perform inspections, with not less than one prelicensure inspection, for compliance with health, safety, and fire standards, of each such child care provider and facility in the State/Territory. It will require licensing inspectors to perform not less than annually, one unannounced inspection of licensed CCDF providers for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time. (658E(c)(2)(K)(i)(II))

X Yes. The State/Territory certifies that it has policies and practices regarding inspections for licensed CCDF providers. List the policy citation and describe the inspection requirements including the frequency of announced and unannounced visits

K.S.A. 65-504 requires licensed facilities to be in full compliance with requirements before a license may be issued.

Pursuant to K.S.A. 65-512:

- New facilities are inspected prior to the issuance of a license.
- Existing facilities are inspected at least once every 12 months.
- Facilities are inspected upon receipt of a complaint of regulatory noncompliance.

Additionally, facilities may be inspected to verify ongoing compliance with requirements. With the exception of the initial licensing inspection all inspections are unannounced.

___ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016)
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented

- Unmet requirement - Identify the requirement(s) not fully implemented

- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
  - Projected start date for each activity _____
  - Projected end date for each activity _____
  - Agency – Who is responsible for complete implementation of this activity _____
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

c) **Inspections for License-Exempt CCDF Providers (except those serving relatives)** – It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))

☐ Yes. The State/Territory certifies that it has policies and practices regarding inspections for license-exempt CCDF providers. List the policy citation and describe the annual monitoring visit requirements :_____

X No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016) September 1, 2016
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) partially implemented
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented Policy revisions are being made to ensure requirement is met. Refer to 5.1.3

  - Unmet requirement - Identify the requirement(s) not fully implemented Inspections for License-Exempt CCDF Providers (except those serving relatives) – It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an

annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV)) The After School Programs run by individual school districts are not licensed nor have regular monitoring visits.

Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) DCF policies are being modified to require all Drop-In Centers and After School Programs to be licensed as School Age Programs if the facility desires to be a DCF Child Care Provider and accept Child Care Subsidy as payment. This will ensure monitoring requirements are met.

- Projected start date for each activity September 1, 2016
- Projected end date for each activity August 31, 2016
- Agency – Who is responsible for complete implementation of this activity DCF- Lead Agency
- Partners – Who is the responsible agency partnering with to complete implementation of this activity n/a

d) Ratio of Licensing Inspectors – It will have policies and practices that require the ratio of licensing inspectors to such child care providers and facilities in the State/Territory to be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal, State, and local law. (658E(c)(2)(K)(i)(III))

____ Yes. The State/Territory certifies that it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory ratio of licensing inspectors:

X No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016) July 1, 2016
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) substantially completed.

- Implementation progress to date – Identify any requirement(s) partially or substantially implemented Current ratio based on facility count is 63:1. KDHE has 91 field positions; 82 contracted surveyors, 5 KDHE surveyor positions and 4 child care coordinator positions. Child Care Coordinators survey in addition to providing surveyor training and guidance.

- Unmet requirement - Identify the requirement(s) not fully implemented. Current aid to local contract requires 90% timeliness. Contract language will be changed to include adequate staff to meet the timeliness requirement.

- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
  - Projected start date for each activity January 2, 2016
  - Projected end date for each activity July 1, 2016
  - Agency – Who is responsible for complete implementation of this activity KDHE
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity n/a

e) **Child Abuse and Neglect Reporting –** That child abuse reporting requirements are in place and comply with section of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)) (658E(c)(2)(L))

X Yes. Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s)

DCF Citations:
The Kansas Economic and Employment Services Manual (KEESM) Section 10034
Child Care Provider Handbook (ES-1655) – KEESM Appendix #C-10

KDHE Citations:
K.S.A. 38-2223 requires child care providers and staff to report child abuse & neglect
K.A.R. 28-4 118 is the appropriate regulation for licensed day care homes and group day care homes. Note: 28-4-118 will be amended to update medication administration and CAN reporting requirements.
K.A.R. 28-4-430 is the regulation for centers and preschools
K.A.R. 28-4-592 is the regulation for school age programs

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief

text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016) _____
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented _____
  - Unmet requirement - Identify the requirement(s) not fully implemented _____
- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
  - Projected start date for each activity _____
  - Projected end date for each activity _____
  - Agency – Who is responsible for complete implementation of this activity _____
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from inspection requirements. Note this exception only applies if the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?

X Yes, all relatives are exempt from all inspection requirements. If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care. A self-assessment of the home is completed. The Relative provider and the parent/guardian complete a Health and Safety Checklist of the facility where the care will be provided.

☐ Yes, some relatives are exempt from inspection requirements. If the State/Territory exempts some relatives from the inspection requirements, describe which relatives are exempt and include how the State/Territory ensures the health and safety of children in relative care. _____

☐ No, relatives are not exempt from inspection requirements.

5.3 Criminal Background Checks

The CCDBG Act of 2014 added new requirements for States and Territories receiving CCDF funds to conduct criminal background checks on child care staff members and prospective staff members of child care providers. States and Territories are required to have requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as any other individuals in the household that may have unsupervised access to children. These provisions must be in place no later than September 30, 2017.

The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years. A criminal background check must include a search of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification; and National Sex Offender Registry.

Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.

Timeliness of background checks - The State/Territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The State**/**Territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the State/Territory will provide information about each disqualifying crime to the staff member.

Fees for background checks – Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.

Transparency – The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory's consumer education website (also see section 2.3) or other publicly available venue.

Appeals process – The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness.

Privacy considerations - Lead Agency may not publicly release the results of individual background checks. They may release aggregated data by crime as long as the data does not include personally identifiable information.

5.3.1 Describe the status of the State/Territory's requirements, policies, and procedures for criminal background checks for child care staff members and child care providers.

☐ Fully implemented and meeting all Federal requirements outlined above. List the policy citation within the Lead Agency's rules _____ and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.

X Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2017). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2017) September 1, 2017
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) partially implemented
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented Kansas criminal back ground checks and abuse and neglect checks are conducted for all person working, residing, or volunteering in a licensed day care facility.
  - Unmet requirement - Identify the requirement(s) not fully implemented Kansas currently does not have a system in place to meet this requirement.
  - Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

1) Draft statute revisions and/or regulation revision for licensed child care facilities by 12-2-2015.
2) Revisions adopted, published and effective by 9/30/2016.
3) Implementation for initial and renewal applicants by 9/30/2016.
4) Implementation completion for renewal applicants by 9/1/2017.

- Projected start date for each activity Current activity
- Projected end date for each activity September 1, 2017
- Agency – Who is responsible for complete implementation of this activity KDHE
- Partners – Who is the responsible agency partnering with to complete implementation of this activity n/a

5.3.2 Describe the process and procedures for conducting background checks in a timely manner, including which agency/entity is responsible and how the Lead Agency ensures that background checks performed by a 3rd party meet the requirements, protecting the privacy of child care staff members, and appealing the results of background checks. See above.

5.3.3 Describe how the State/Territory is helping other States process background checks, including any agencies/entities responsible for responding to requests from other states KDHE currently processes other state's background checks through the Open Record Act. Current processes will be updated within the implementation of our background check plan. Economic and Employment Services (Child Care) will collaborate with the Child Welfare Division (Prevention and Protection Services) within DCF to assist other states with Child Abuse and Neglect Registry Checks to ensure this requirement is met.

5.3.4 Does the State/Territory have a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment?

X Yes. Describe. Persons found to be prohibited due to a criminal offense are referred back to KBI.

__ No

5.3.5 Does the State/Territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 5.3?

X Yes. Describe. Kansas Licensing prohibitions fall under the listing in 5.3. But DCF policy prohibits provider agreements being established with any child care provider or staff person who has a felony conviction of any kind. This includes relative providers.

☐ No

5.3.6 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from background check requirements. Note this exception only applies if the individual cares ONLY for relative children. Does your State State/Territory exempt relatives from background checks?

___ Yes, all relatives are exempt from all background check requirements.

X Yes, some relatives are exempt from the background check requirements. Describe which relatives are exempt. All relative providers are exempt from the comprehensive background check requirements of (98.41(A)(ii)(A)), which includes a FBI fingerprint check using Next Generation Identification. DCF will however continue to complete a background check on relative providers and persons residing in the Out-Of-Home provider's household that will include checking:

KASPER – Kansas Adult Supervised Population Electronic Repository – for felony convictions
Kansas Registered Offender website
National Registered Offender website
Kansas Child Abuse Neglect Registry

No, relatives are not exempt from background checks.

5.3.7 Describe how the State/Territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether conducted by the State/Territory or a 3rd party vendor or contractor, Lead Agencies can report that no fees are charged if applicable. Policies and procedures regarding fees charged will be in accordance with this requirement and part of our background check implementation plan.

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue Policies and procedures will be updated in accordance with our background check implementation plan.

5.3.9 Does the Lead Agency release aggregated data by crime?

☐ Yes. List types of crime included in the aggregated data _____

X No

6 Recruit and Retain a Qualified and Effective Child Care Workforce

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key components of high quality child care. These require a competent, skilled, and stable workforce. Research has shown that specialized training and education, positive and well-organized work environments and adequate compensation promote teacher recruitment, stability, diversity of the early childhood workforce, and effectiveness with young children in child care. In addition, professional development strategies that emphasize on-site mentoring and coaching of teachers have emerged as promising to change practices with children and families. Professional development, whether training, on-site coaching and mentoring,

registered apprenticeship, or higher education coursework, should reflect the research and best practices of child development in all domains and cultural competence.

The CCDBG Act of 2014 requires States and Territories to establish professional development and training requirements in key areas such as health and safety, early learning guidelines, responding to challenging behavior and engaging families. States and Territories are required to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. (658E(c)(2)(G)) An example of how a State/Territory might address this is to establish a system or framework of professional development that includes professional standards, a "career ladder" that allows an individual to build knowledge and skills in a cumulative manner from introductory training to advance level education, including obtaining credentials and post-secondary degrees. Professional development should be designed in a manner that aligns to competencies and qualifications that reflect working with children of different ages, English language learners, children with disabilities and the differentiated roles in all settings, such as teachers, teacher assistants, and directors. Training and education supporting professional development is also one of the options States and Territories have for investing their CCDF quality funds. (658G(b)(1)) ACF encourages States and Territories to collaborate and coordinate with other early childhood educator professional development resources, such as Race to the Top Early Learning Challenge grants, quality funds available through the Preschool Development grants, and funds available through Head Start and Early Head Start, to the extent practicable. Responsive, well-qualified adult caregivers are one of the most important factors in children's development and learning in child care settings. ACF strongly encourages States and Territories to link CCDF health and safety trainings (see Section 5) and child development trainings and education to this broader professional development framework as the foundation for building a knowledgeable early childhood education workforce. Questions related to requirements for recruiting and retaining a qualified and effective child care workforce have been consolidated into Section 6.

6.1 Training and Professional Development Requirements

The CCDBG Act of 2014 added a requirement that the State/Territory develop training and professional development requirements designed to enable child care providers to promote the social, emotional, physical and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF across the entire age span from birth through age 12. (658E(c)(2)(G)) Training and professional development should be accessible and appropriate across settings and types of providers, including family child care home providers and child care center staff.

The State/Territory also must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))

For purposes of this section, the term professional development is inclusive of credit bearing coursework, postsecondary degree programs, and technical assistance (targeted assistance such as mentoring, coaching or consultation) activities. Health and safety topics that require renewal of a credential or certification should be considered continuing education unit trainings.

6.1.1 Describe the status of the State/Territory's professional development system or framework, including training and professional development requirements to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce.

The Lead Agency assures that the State/Territory's training and professional development requirements:

a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and mid-level training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the child care program).

b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.

c) Incorporate knowledge and application of the State/Territory's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)

d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF

e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

☐ Fully implemented and meeting all Federal requirements outlined above. Describe using 6.1.2 through 6.1.6 below.

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

responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) September 30, 2016
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) substantially implemented.
- Implementation progress to date – Identify any requirement(s) partially or substantially implemented substantially implemented.
  - 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. This document is currently under review.
    CCDF supports the Early Childhood Associate Apprenticeship Program administered by the Kansas Department of Commerce. ECAAP combines Related Technical Instruction with planned, day-by-day training on the job under the supervision of a skilled worker. ECAAP is a training model that gives the employer the opportunity to train workers in child care centers, preschoolers or group homes.

  - Unmet requirement - Identify the requirement(s) not fully implemented

    The current status of unmet requirements as specified above is "in progress". A system that will incorporate ongoing training with a progression of professional development will be incorporated into our Quality Rating Improvement System currently under development.

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

  Tasks/activities include designation of a professional development workgroup for our developing QRIS. Activities include development of career pathways; review of all training opportunities currently available including online, community-based, technical assistance, coaching and mentoring programs and community college and university coursework and other training approved training.

  - Projected start date for each activity Current Activity
  - Projected end date for each activity September 30, 2016
  - Agency – Who is responsible for complete implementation of this activity DCF

Partners – Who is the responsible agency partnering with to complete implementation of this activity Discuss and determine needs for a professional development team for QRIS will be completed in coordination with KDHE.
Development of Career Pathways will be completed in coordination with KDHE, KSDE, CCAK, KCCTO, 4 year universities, and community colleges.
Collect and review all training opportunities currently available in the state; including online training, community-based training, technical assistance, coaching and mentoring programs, community college and university coursework, and other funded by KSDE and KDHE approved in coordination with KSDE, KDHE, CCAK, and KCCTO.
A reach out to the tribal community regarding training needs will be completed in coordination with tribal organizations. Tribal representation currently serves on our DCF QRIS Advisory Group.

6.1.2 Describe how the State/Territory provides ongoing training and professional development that is accessible for the diversity of providers in the State/Territory, provides for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities) and improves the quality and stability of the child care workforce. Use the checkboxes below to identify and describe the elements of the progression of professional development. Check all that apply.

X State/Territory professional standards and competencies. Describe

- KS-MO Core Competencies for Early Childhood and Youth Development serves as the foundation for professional development systems for early childhood professionals.
- Early Learning Guidelines were developed for use by childcare providers, early childhood teachers, administrators, families and others who provide care to young children. The purpose of this document is to provide a general overview of the skills, knowledge, and abilities young children have and can learn with the help of caring and knowledgeable adults that lead them toward success in a Kindergarten setting. Each section of the document presents information that can be used by adults to create the opportunities and learning experiences young children need in order to grow, develop, and learn.
- Kansas Preschool Program's (KPP) focus is to use research-based and intentional practices to improve the quality of the early learning experiences provided to children participating in the Kansas Preschool Program, resulting in increased readiness for success as they enter kindergarten and the elementary school years. The Model has four components, each of which is

based upon research and evidence and has been shown to support quality in early learning and promote later success in school.

X Career ladder or lattice. Describe Careers in Early Childhood Education Guide for Kansas was published in September, 2011. Lead Agency is working with KDHE, KSDE, CCAK, KCCTO, 4 year universities and community colleges to update the current career lattice to be utilized in QRIS. The career ladder will be used to informally assess staff education levels and provide child care professionals a foundation for planning their professional development progression.

X Articulation agreements between two- and four-year postsecondary early childhood education or degree programs. Describe Agreements are individually negotiated between two-year and four-year postsecondary programs

X Community-based training approved by a state regulatory body to meet licensing or regulatory requirements. Describe DCF, the Lead Agency contracts for child care and early education work force services, including community based training. The current contracted provider is KCCTO.

X Workforce data, including recruitment, retention, registries or other documentation, and compensation information. Describe DCF contracted for the completion of a workforce study completed in 2010. The Lead Agency contracts for data collection for the Market Rate survey which includes compensation, limited professional development in relation to rates, and retention. CCAK, the current contractor will release a 2015 update of the cost of 2010 Workforce Study. Further plans for data collection will be developed within the QRIS workforce development workgroup.

X Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework. Describe A QRIS advisory board and workforce development workgroup will devise the plan for ongoing training and professional development. The newly established QRIS Advisory Group was established in December 2015.

X Continuing education unit trainings and credit-bearing professional development. Describe The Lead Agency contracts with Kansas Child Care Training Opportunities, Inc. (KCCTO) to deliver continuing education opportunities. KCCTO is a state-wide training office dedicated to professional development opportunities to family child care providers, child care center staff, and other early education professionals throughout Kansas. Through the Kansas State Agency Early Childhood Education work, the lead agency collaborates with the KDHE Infant-Toddler program. KDHE Infant-Toddler supports professional development thru the Kansas In-service Training System. KITS is a program of the University of Kansas Life Span Institute designed to provide a training and resource system for early intervention networks and early childhood special education program staff through collaborative training and technical assistance activities on a comprehensive statewide basis.

X State-approved trainings. Describe KDHE requires pre-service and ongoing training for all licensed child care providers. Trainings are aligned with state and

federal health and safety requirements. Training opportunities are available through multiple resources including the Lead Agency's workforce development contractor.

☐ Inclusion in state and/or regional workforce and economic development plans. Describe_____

X Other. Describe

The Bi-State Early Childhood Director Credential (Credential) provides directors with a pathway to develop the knowledge, skills and abilities they need to be successful in the early learning industry. The credential will also provide a system to recognize and document these achievements. The Credential is voluntary and exceeds what is required by state licensing regulations. Selected competencies for directors are identified from the *Kansas and Missouri Core Competencies for Early Care and Education Professionals* and provide the basis for the Credential's criteria. The Credential is issued by the **Kansas Association for the Education of Young Children (KAEYC).** Any applicant who receives the Kansas Director Credential has the opportunity to apply for a reciprocal Credential in Missouri.

The Kansas Association for Infant & Early Childhood Mental Health offers an endorsement process that supports and recognizes the development of professionals who work with or on behalf of infants, toddlers, and their families. The KAIMH Endorsement (IMH-E) is to recognize and document professional development. The endorsement verifies level of education attained; participation in specialized in-service trainings, work completed with guidance from mentors or supervisors, and acquired knowledge to promote the delivery of high quality, culturally sensitive, relationship-focused services to infants, toddlers, parents, other caregivers and families.

6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC Training and Professional Development requirements identified within the QRIS will be completed through the QRIS structure. Representation from the Kansas Children's Cabinet and Trust Fund Office currently identified as the State Advisory Council is our QRIS Advisory Group. Other state and local agencies also serve on the QRIS Advisory Group. The Lead Agency will consult with CCAK, Children's Cabinet, KCCTO, KDHE, KSDE, KHSA, EQIP, and ECHO in development of training and a professional development system within QRIS.

6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements

Thru work with the KSDE and the Kansas State Agencies Early Childhood team, the Lead Agency has collaborated with the Kansas In-service Training System (KITS) to develop a toolkit and develop training coursework regarding the newly updated Kansas Early Learning Standards.

KCCTO, a statewide training entity contracted thru the Lead Agency provides the FLIP IT course. The course is a strategy that offers a simple, kind, strength-based, common sense and effective four step process to address children's day to day challenging behaviors. KCCTO also has Behavior Guidance courses. In addition, KCCTO worked with KITS to develop and provide professional development training utilizing the Early Learning Standards toolkit.

The Kansas Association for Infant & Early Childhood Mental Health offers an endorsement process that supports and recognizes the development of professionals who work with or on behalf of infants, toddlers, and their families. The KAIMH Endorsement (IMH-E) is to recognize and document professional development. The endorsement verifies level of education attained, participation in specialized in-service trainings, work with guidance from mentors or supervisors, and acquired knowledge to promote the delivery of high quality, culturally sensitive, relationship-focused services to infants, toddlers, parents, other caregivers and families.

For Health and Safety requirements, please see section 6.2.2. Additional review of this requirement will be part of the QRIS professional development work.

6.1.5 Describe how the State's training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable) KCCTO courses are available to all providers throughout the state. Tribal professional development is KDHE approved. Tribal representation serves within the QRIS Advisory Group membership.

6.1.6 Describe how the State/Territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children), English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

There are a variety of trainings available to providers based on their needs. These include on line training, face to face and classroom settings. KDHE requires pre-service and annual training of all licensed-providers. Kansas Early Learning Standards include dual language learners in the Communications and Literacy Standards. Additional review of this requirement will be part of the QRIS professional development work.

6.1.7 Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. Check all that apply and describe.

X Financial assistance for attaining credentials and post-secondary degrees. Describe 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.

__ Financial incentives linked to education attainment and retention. Describe

X Registered apprenticeship programs. Describe 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, preschools or group homes.

☐ Outreach to high school (including career and technical) students. Describe _____
☐ Policies for paid sick leave. Describe _____
☐ Policies for paid annual leave. Describe _____
☐ Policies for health care benefits. Describe _____
☐ Policies for retirement benefits. Describe _____
☐ Support for providers' mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services). Describe _____

X Other. Describe Recruitment is addressed within the state's current licensing surveyor contracts. Health Departments/contract holders are required to:

- Provide public awareness of the need for quality child care,
- Increase available regulated child care, and
- Actively recruit child care providers.

6.1.8 Describe how the State/Territory will recruit providers for whom English is not their first language, or who will serve and be available for families for whom English is not their first language. Paper provider applications and handbooks are available in English and Spanish. Strategies to recruit and retain providers are part of the services provided within the Resource and Referral and Infant and Toddler Contracts. Additional review of this requirement will be part of the QRIS professional development work.

6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.

X Informational materials in non-English languages

☐ Training and technical assistance in non-English languages

X CCDF health and safety requirements in non-English languages

☐ Provider contracts or agreements in non-English languages

X Website in non-English languages

X Bilingual caseworkers or translators available

☐ Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce

X Other Translators are available based on need.

☐ None

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

6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

☐ Yes. The State certifies that no later than September 30, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families. Describe that training and technical assistance for providers _____

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

- Overall Target Completion Date (no later than September 30, 2016) September 30, 2016
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) substantially implemented
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented DCF met with Kansas Department of Education's (KSDE) McKinney Vento Homeless Assistance Act liaison. Online training courses for child care providers will be developed and available by September 30, 2016 using shared resources from this meeting. Serving homeless families will also be part of the tool kit being developed for providers on the Kansas Early Learning Standards.
  - Unmet requirement - Identify the requirement(s) not fully implemented Technical assistance to providers on identifying and serving homeless children and families is an unmet requirement.

- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) DCF will review ECLKC training modules and guidelines for teachers and determine needs for further professional development courses and technical assistance. Technical assistance to providers on identifying and serving homeless children and families is an unmet requirement that will be addressed both through the KELS training toolkit and a contract for services.
    - Projected start date for each activity Current activity
    - Projected end date for each activity September 30, 2016
    - Agency – Who is responsible for complete implementation of this activity DCF
    - Partners – Who is the responsible agency partnering with to complete implementation of this activity KELS tool kit- KITS; technical assistance contract will be competitive bid.

6.2 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

States and Territories may use the quality set-aside discussed in detail in section 7 to support the training and professional development of the child care workforce.

6.2.1 Does the State/Territory fund the training and professional development of the child care workforce?

X Yes. If yes,

a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory. Current funding is provided to KDHE, KEHS, KCCTO, Child Care Aware, and ECAAP. Quality Data collected is based upon data requested within the Federal QPR report. Quality Indicators are currently under development within the QRIS framework. DCF- the Lead Agency will develop quality measures in collaboration with the QRIS Advisory Group.

b) Indicate which funds will be used for this activity (check all that apply)

X CCDF funds. Describe Currently CCDF Quality funds are provided to KDHE, KEHS, KCCTO, Child Care Aware, and ECAAP. Quality Data collected is based upon data requested within the Federal QPR report. Quality Indicators are currently under development within the QRIS framework.

X Other funds. Describe Multiple entities in Kansas provide professional development through various funding sources. For example, CCAK; EHS; KITS; Families Together; The Lead Agency does not track outcomes for these

activities. DCF's goal is to include these resources in the QRIS network made available to providers in the future.

c) Check which content is included in training and professional development activities. Check all that apply.

X Promoting the social, emotional, physical and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c. Describe KELS's provide developmentally appropriate guidance as a starting point for individual adaptations and modifications to be created to meet the special needs of any child. The KELS's are used in the development of coursework and technical assistance offered to providers.

X Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social - emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2). Describe KCCTO – FLIP IT; ELGs challenging behaviors

X Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. Describe Cultural and linguistic indicators are embedded in Early Learning Standards and Core Competencies. Professional development trainings are designed within the guidelines of standards and competencies. Cultural and linguistic activities are embedded within the courses.

X Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards. Describe Cultural and linguistic indicators are embedded in Early Learning Standards and Core Competencies. Professional development trainings are designed within the guidelines of standards and competencies. Cultural and linguistic activities are embedded within the courses.

X On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development. Describe Comprehensive services are offered to families through the KEHS Child Care partnerships.

X Using data to guide program evaluation to ensure continuous improvement. Describe Additional review and development of a continuous improvement plan will be part of the QRIS professional development work.

X Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe Comprehensive services are offered to families through the KEHS Child Care partnerships with plans to target services in areas with significant concentrations of poverty, unemployment and high out of home placements (foster care).

X Caring for and supporting the development of children with disabilities and developmental delays. Describe KDHE Infant-Toddler supports a professional development thru the Kansas In-service Training System. KITS is a program of the University of Kansas Life Span Institute designed to provide a training and resource system for early intervention networks and early childhood special education program staff through collaborative training and technical assistance activities on a comprehensive statewide basis.

X Supporting positive development of school-age children. Describe Kansas Enrichment Network (KEN) provides the means to strengthen the infrastructure of afterschool 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 afterschool programs.

☐ Other. Describe _____

- Check how the State/Territory connects child care providers with available Federal and State/Territory financial aid, or other resources for pursuing postsecondary education relevant for the early childhood and school-age workforce. Check all that apply.

  ☐ Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling

  ☐ State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities

  ☐ Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education

  X Other. Describe Currently funding supports the Childhood Associate Apprenticeship Program (ECAAP) which explores funding resources for participants pursing postsecondary education.

☐ No

6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular content areas? States and Territories are encouraged to consult with *Caring for our Children* for best practices and recommended time needed to address training hour requirements.

X Yes. If yes, describe:

a) Licensed Center-Based Care

1) Number of pre-service or orientation hours and any required areas/content

Orientation is required, but no hour requirement.
Each licensee shall ensure that the orientation for each program director, staff member, and volunteer is related to work duties and responsibilities and includes the following:

(A) Licensing regulations;
(B) the policies and practices of the preschool or child care center, including emergency procedures, behavior management, and discipline;
(C) the schedule of daily activities;
(D) care and supervision of children in care;
(E) health and safety practices; and
(F) confidentiality.

Health and safety training.

(1) Each staff member who is counted in the staff-child ratio, each volunteer who is counted in the staff-child ratio, and each program director shall complete health and safety training either before employment or volunteering or not later than 30 calendar days after the date of employment or volunteering.

(2) The training shall be approved by the secretary and shall include the following:

(A) At least two clock-hours of training in recognizing the signs of child abuse or neglect, including prevention of abusive head trauma, and the reporting of suspected child abuse and neglect;
(B) at least two clock-hours of training in basic child development; and
(C) at least two clock-hours of training on safe sleep practices and sudden infant death syndrome if the individual will be caring for children under 12 months of age.

(3) Each individual who is required to complete this training and who was employed in the preschool or child care center before the effective date of this regulation shall complete the training within one calendar year after the effective date of this regulation.

(c) Pediatric first aid and cardiopulmonary resuscitation (CPR) certifications.

(1) Each staff member counted in the staff-child ratio, each volunteer counted in the staff-child ratio, and each program director shall obtain certification in pediatric first aid and in pediatric CPR as specified in this subsection either before the date of employment or volunteering or not later than 30 calendar days after the date of employment or volunteering.

(2) Each individual who is required to obtain the certifications and who was employed in the preschool or child care center before the effective date of this regulation shall obtain the certifications within one calendar year after the effective date of this regulation.

(3) Each individual who is required to obtain the certifications shall maintain current certifications.

(4) Each licensee shall ensure that, for each unit in a preschool or child care center, at least one staff member or volunteer counted in the staff-child ratio who has 52 current certification in pediatric first aid and current certification in pediatric CPR is in attendance at all times.

2) Number of on-going hours and any required areas/content
The program director shall receive at least five clock-hours of approved in-service training annually.
Teaching staff shall receive at least 10 clock-hours of approved in-service training annually.

b) Licensed Group Child Care Homes

1) Number of pre-service or orientation hours and any required areas/content
Orientation is required, but no hour requirement. Required content is a review of regulations and best child care practices.
2) Number of on-going hours and any required areas/content 5 hours annually with no content requirements.

c) Licensed Family Child Care Provider

1) Number of pre-service or orientation hours and any required areas/content
Orientation is required, but no hour requirement. Required content is a review of regulations and best child care practices.
2) Number of on-going hours and any required areas/content 5 hours annually with no content requirements.

d) Any other eligible CCDF provider

1) Number of pre-service or orientation hours and any required areas/content
License exempt- as required by their regulatory entity. No requirement for relative providers.
2) Number of on-going hours and any required areas/content License exempt as required by their regulatory entity. No requirement for relative providers.

☐ No

6.2.3 Describe the status of the State/Territory's policies and practices to strengthen provider's business practices.

X Fully implemented. Describe the State strategies including training, education, and technical assistance to strengthen provider's business practices. This may include, but is not limited to, such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance Kansas Child Care Training Opportunities (KCCTO) currently provides coursework to assist provider's in strengthening their business practices. KCCTO course, Program Management offers 4 KDHE credit hours for providers. Course description states: "Whether you are a seasoned early childhood professional or just starting your career, this course offers information on the importance of contracts, procedures and policies for your child care program. You will learn about family-friendly ways to create

and implement contracts and polices that are easy to understand, fair and comprehensive. Information will also be included to provide that your program's contracts and policies meet state licensing, legal and the Department for Children and Families requirements." Other non-CCDF funded opportunities are also available within the state. Strategies to increase training and technical assistance opportunities for providers will be considered within the developing QRIS. Additional review of how the state can better meet this requirement will be part of the QRIS professional development work.

- ☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
  - Overall Target Completion Date (no later than September 30, 2016) _____
  - Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
    - Implementation progress to date – Identify any requirement(s) partially or substantially implemented _____
    - Unmet requirement - Identify the requirement(s) not fully implemented _____
  - Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
    - Projected start date for each activity _____
    - Projected end date for each activity _____
    - Agency – Who is responsible for complete implementation of this activity _____
    - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as

discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

6.3.1 Describe the status of the State/Territory's early learning and development guidelines appropriate for children from birth to kindergarten entry.

X The State/Territory assures that the early learning and development guidelines are:

- Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
- Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
- Updated as determined by the State. List the date or frequency October 2014

X Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s) and describe using 6.3.2 through 6.3.4 below

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

- Overall Target Completion Date (no later than September 30, 2016) _____
- Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented _____
  - Unmet requirement - Identify the requirement(s) not fully implemented _____
- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
  - Projected start date for each activity _____
  - Projected end date for each activity _____
  - Agency – Who is responsible for complete implementation of this activity _____

- Partners – Who is the responsible agency partnering with to complete implement this activity _____

6.3.2 Check for which age group(s) the State/Territory has established early learning and development guidelines:

X Birth-to-three. Provide a link
http://www.ksde.org/Portals/0/Early%20Childhood/Early%20Learning%20Standards/KsEarlyLearningStandards.pdf

X Three-to-Five. Provide a link
http://www.ksde.org/Portals/0/Early%20Childhood/Early%20Learning%20Standards/KsEarlyLearningStandards.pdf

X Birth-to-Five. Provide a link
http://www.ksde.org/Portals/0/Early%20Childhood/Early%20Learning%20Standards/KsEarlyLearningStandards.pdf

X Five and older (check if State/Territory has standards for five and older that complement but cover child development areas not covered by k-12 academic standards). Describe and provide a link
http://www.ksde.org/Portals/0/Early%20Childhood/Early%20Learning%20Standards/KsEarlyLearningStandards.pdf

☐ Other. Describe _____

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children's cognitive, physical, social and emotional development and support children's overall well-being?

☐ Yes, the State/Territory has a system of technical assistance operating State/Territory-wide

☐ Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities but not State/Territory-wide

X No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to the technical assistance and describe.

☐ Child care providers are supported in developing and implementing curriculum/learning activities based on the State's/Territory's early learning and development guidelines. Describe_____

☐ The technical assistance is linked to the State's/Territory's quality rating and improvement system. Describe _____

- ☐ Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines. Describe _____
- ☐ Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines. Describe _____
- ☐ Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines. Describe _____

b) Indicate which funds are used for this activity (check all that apply)

- ☐ CCDF funds. Describe _____
- ☐ Other funds. Describe _____

6.3.4 Check here X to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will

describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

1) Supporting the training and professional development of the child care workforce (as described in Section 6)
2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)
3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services
4) Improving the supply and quality of child care programs and services for infants and toddlers
5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)
6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)
7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children
8) Supporting providers in the voluntary pursuit of accreditation
9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
10) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible.

Throughout this Plan, States and Territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

7.1 Activities to Improve the Quality of Child Care Services

7.1.1 What are your overarching goals for quality improvement? Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services

Our overarching goal for quality improvement is to develop and implement a statewide QRIS. The goals of our QRIS will be to improve the quality of care so children have a safe place to learn and grow, offer consumer education to parents so they can know how to choose quality child care for their children, and build a system to recognize providers as professionals and the quality within their programs. As we build our system we will recognize the early learning work already occurring. Through our strategic planning efforts we have identified our goals as:

- Increase the availability of quality care for all children in child care and early education.
- Increase parents' understanding and demand for quality care
- Increase professional development opportunities for child care and early education providers
- Align funding and services to increase support to child care and early education providers.

7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:

X Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2.

X Indicate which funds will be used for this activity (check all that apply)

X CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) CCDF quality set-aside, infant toddler set aside

☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

X Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3.

X Indicate which funds will be used for this activity (check all that apply)

X CCDF funds. Describe CCDF funds (e.g., quality set-aside, including whether designated infant- and toddler set aside, etc.)funds are being used along with other CCDF funds quality set-aside

☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

X Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4.

X Indicate which funds will be used for this activity (check all that apply)

X CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) quality set-aside

☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

X Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5.

X Indicate which funds will be used for this activity (check all that apply)

X CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) quality set-aside

☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

X Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6.

X Indicate which funds will be used for this activity (check all that apply)

X CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) quality set-aside

☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

☐ Supporting accreditation. If checked, respond to 7.7.

☐ Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) _____

☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

☐ Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.8.

☐ Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) _____

☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

X Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9.

X Indicate which funds will be used for this activity (check all that apply)

X CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) quality set-aside; infant toddler network;

☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

7.2 Quality Rating and Improvement System

7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?

☐ Yes, the State/Territory has a QRIS operating State/Territory-wide. Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available _____

☐ Yes, the State/Territory has a QRIS operating as a pilot, in a few localities, or only a few levels but not fully operating State/Territory-wide. Provide a link, if available _____

X No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to your QRIS.

☐ Participation is voluntary

☐ Participation is mandatory for providers serving children receiving subsidy. If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.) _____

☐ Participation is required for all providers

☐ Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels

☐ Supports and assesses the quality of child care providers in the State/Territory

☐ Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers

☐ Embeds licensing into the QRIS. Describe _____

- ☐ Designed to improve the quality of different types of child care providers and services
- ☐ Describes the safety of child care facilities
- ☐ Addresses the business practices of programs
- ☐ Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood system and the ratings of the programs in which the child is enrolled
- ☐ Provides, to the maximum extent practicable, financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services. If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality _____
- ☐ Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating

b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.

- ☐ Licensed child care centers
- ☐ Licensed family child care homes
- ☐ License-exempt providers
- ☐ Early Head Start programs
- ☐ Head Start programs
- ☐ State pre-kindergarten or preschool program
- ☐ Local district supported pre-kindergarten programs
- ☐ Programs serving infants and toddlers
- ☐ Programs serving school-age children
- ☐ Faith-based settings
- ☐ Other. Describe.

7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory. The state is in development of this activity. Measures will be linked to our overarching goals to:

- Increase the availability of quality care for all children in child care and early education.
- Increase parents' understanding and demand for quality care
- Increase professional development opportunities for child care and early education providers
- Align funding and services to increase support to child care and early education providers.

7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe.

☐ Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families. Describe _____

☐ Establishing or expanding the operation of community or neighborhood-based family child care networks. Describe _____

X Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe Information regarding developmentally appropriate services are included in the Kansas Early Learning Standards (KELS). Thru work with the KSDE and the Kansas State Agencies Early Childhood team, the Lead Agency has collaborated with the Kansas In-service Training System (KITS) to develop a toolkit and develop training coursework regarding the newly updated Kansas Early Learning Standards (KELS). KCCTO will utilize the toolkit in providing training and professional development. Child care providers who serve children who access child care through the comprehensive services offered through the KEHS program are required to meet higher quality standards and are provided additional supports. These services are slated to continue through the new KEHS Child Care Partnership Grants effective July 1, 2016.

X Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care. Describe Child care providers who serve children who access child care through the comprehensive services

offered through the KEHS program are required to meet higher quality standards and are provided supports including a higher reimbursement rate. These services are slated to continue through the new KEHS Child Care Partnership Grants effective July 1, 2016.

X Providing coaching and/or technical assistance on this age group's unique needs from Statewide networks of qualified infant-toddler specialists. Describe The lead agency will contract with a training and technical assistance entity to provide a statewide infant-toddler specialist network which will improve the quality and availability of child care and early education. A new contract is targeted for July 1, 2016.

☐ Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.) Describe _____

X Developing infant and toddler components within the State's/Territory's QRIS. Describe

DCF is in the development phase of a statewide Quality Rating Improvement System (QRIS). The newly developing QRIS will provide a statewide network of quality child care resources empowering families in making informed decisions about child care. The QRIS will provide parents the tools and knowledge to assess what quality care looks like, how to select high quality care and where to access it. Goals of the QRIS will be to:

- Improve the quality of care
- Improve parents' understanding of quality care
- Improve professional development of child care providers
- Align funding and services of the state early learning system

☐ Developing infant and toddler components within the State/Territory's child care licensing regulations. Describe _____

X Developing infant and toddler components within the early learning and development guidelines. Describe Infant and toddler components are included within the Kansas Early Learning Standards (KELS).

X Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care. Describe The newly developing QRIS will provide a statewide network of quality child care resources empowering families in making informed decisions about child care. The QRIS will provide parents the tools and knowledge to assess what quality care looks like, how to select high quality care and where to access it. Goals of the QRIS will be to:

- Improve the quality of care
- Improve parents' understanding of quality care
- Improve professional development of child care providers
- Align funding and services of the state early learning system

Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being. Describe _____

☐ Other. Describe _____

Describe the measures relevant to this activity that the State/Territory will use to evaluate the State's progress in improving the quality of child care programs and services in the State/Territory Territory The Lead Agency's contracts, for services to improve the supply and quality of infant and toddler care, will include written statements outlining goods/services to be produced by the projects, and identify the intended recipients of the goods/services. Performance Standards and Output measures will be reported quarterly and annually.

7.4 Child Care Resource & Referral

7.4.1 Describe the status of the child care resource and referral system

X State/Territory has a CCR&R system operating State/Territory-wide. Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system Resource and referral services provide consumer education for parents about quality child care, how to choose quality child care, and to assist parents in locating quality child care based upon their children's and family's needs. Four Child Care Resource and Referral Agencies (CCR&Rs) provide service to all 105 counties in Kansas. They directly serve families, child care providers/early education staff and communities in every county in Kansas. Resource and referral services are provided by Child Care Aware of Kansas under contract with DCF the lead agency.

☐ State/Territory has a CCR&R system operating in a few localities but not fully operating State/Territory-wide. Describe _____

☐ State/Territory is in the development phase

7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory _____

7.5 Facilitating Compliance with State Standards

7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards? Describe: DCF provides funding (CCDF quality set aside) through an interagency agreement with KDHE the Child Care licensing agency for the state.

The purpose of this agreement and the services described are to increase the availability, affordability and quality of child care services. KDHE is responsible for the regulatory services applicable to health and safety requirements of child care facilities and is an active partner in the enhancement of a quality child care system. In addition, KDHE works to increase the availability of regulated quality child care to all interested persons, including those with limited English proficiency. Specific deliverables include:

- Systematic record of documented and substantiated facility complaints
- Notification of KDHE enforcement actions

- Quarterly financial and program reports
- Annual program report
- Distribution of professional development materials aimed at child care providers, regulators, parents and other early care and education stakeholders
- A copy of scheduled regional meetings with facility contractors
- Timely written notice to DCF of licensing regulation policy changes
- KDHE website link with DCF

Currently the KDHE Child Care Licensing (CCL) Program establishes and enforces regulatory safeguards to approximately 5,800 licensed child care facilities, reducing the risk of predictable harm to 137,321 children receiving out-of-home care. Licensed child care facilities include child care centers, preschools, day care homes, group day care homes, school age programs, drop in programs for school age children and youth, and child care resource and referral agencies. Core functions fulfill mandatory requirements pursuant to the Child Care Act (K.S.A. 65-501 *et.seq.*) and the KDHE-DCF MOA. CCL work supports the CCDF state plan through regulatory oversight and monitoring of health and safety standards. Inspection and licensing activities include but are not limited to:

- Establishing and enforcing requirements for the operation of child care facilities;
- Increasing the state-wide availability of regulated facilities that meet or exceed standard
- Reducing predictable health and safety risks to children in child care;
- Providing consumer protection for children and families; and
- Conducting timely and accurate inspections.

All licensing applications are processed by CCL. Inspection activity is carried out by local county health department surveyors through Aid to Local contracts and by KDHE staff located in district offices across the state. The issuance of licenses and enforcement activity are carried out at the state level. KDHE currently contracts with 50 health departments to carry out the local licensing program. At the current time there are 23 counties without a local surveyor. KDHE District Specialists and KDHE surveyors are responsible for those counties not covered by a local contract.

KDHE has continued efforts to increase the knowledge and skills of regulatory staff. Activities include:

- Quarterly district meetings with local child care licensing surveyors on training topics specific to the work they do including: new and amended regulations, inspection process and complaint investigations;
- Conference calls to provide updates and re-enforce knowledge gained at Quarterly district meetings; and
- On-going and one on one mentoring and support by KDHE District Specialists (technical assistance via phone and face to face; on-site survey assistance; regulation training; new surveyor training and provider training).

7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Performance measures, contractor requirements and tools for collecting data regarding the local regulatory program have been in place for a number of years. Recent enhancements to the child

care licensing database (CLARIS) now provide additional tools to analyze program effectiveness and guide targeted surveyor training and policy decisions for the protection of children in child care settings.

One of the most important activities conducted by child care licensing surveyors is the inspection of facilities to determine compliance with health and safety regulations for the protection of children and to provide regulatory consultation and referrals as indicated. In the last year surveyors:

- **Conducted approximately 6,798 initial, annual and compliance inspections;**
- **Investigated 841 complaints;**
- **Investigated and provided technical assistance in approximately 52 incidents of communicable diseases in child care settings involving about 112 children and 20 adults;**
- **Provided orientation training (classroom setting or individual) to 1,359 potential providers (day care home, group day care home and center-based);**
- **Provided or co-sponsored approximately 475 clock hours of health and safety related training to a total of 3,258 participants; and**
- **Referred 876 families to the statewide network of licensed child care resource and referral agencies for assistance in locating child care.**

Current CCDF State Plan Goals Progress includes:

The Kansas Licensing Indicator System (KLIS)

Approximately 50% of all facilities with a pending annual inspection due for the FY15 qualified for the KLIS survey. However 24% of qualifying surveys extended to full surveys due to violations with indicator regulations, 49% of qualifying surveys completed without extending, and 27% extended by one KLIS violation, which opened the regulation section related to the non-compliance found for additional inspection. KLIS allows surveyors to spend more time providing technical assistance to support facilities with reaching and maintaining compliance; and conducting full inspections and monitoring noncompliant providers.

The CLARIS Inspection Module (CIM) Complaint Enhancement

The work on the online complaint inspection module is ongoing and expected to be implemented in December 2015. To date all inspection results are available online with the exception of a complaint inspection. This enhancement will allow the public to review all inspection findings which will result in making better informed decisions when selecting a child care provider. The complaint inspections conducted through CIM will meet the requirements of Lexie's Law and the Reauthorization Bill. The online complaint inspection will be available for all facility types including: Licensed and Group Day Care Homes, Child Care Centers, Preschools, School Age Programs and Drop-In Programs.

Online Information Dissemination System (OIDS)

The online availability of facility compliance history significantly increases the ability of Kansas families to research their child care options and make more informed child care choices. Each quarter the portal is used for frequently. During the federal fiscal year the portal averaged over 10,000 hits monthly. In addition, the KDHE website includes consumer information, current Bureau forms and regulations, and links to related websites including DCF and Child Care Aware of KS.

Client and Provider Portal (CAPP)

During the FFY15 the online child care application receive approximately 63% of initial and renewal applications through the portal. The online application features the option for providers to enroll with DCF to serve families receiving child care subsidies, eliminating the need to submit separate applications to each agency. The ability to submit an initial or renewal application online significantly reduces the length of time necessary to process an application and issue a license compared to the paper-intensive process.

Regulations

KDHE is reviewing and recommending revisions of the general regulations (K.A. R. 28-4-122 through K.A.R. 28-4-132) pertaining to day care homes, group day care homes, child care centers and preschools. These regulations address parental access and permission, background checks, health of individuals residing or working in the facility, emergency preparedness and safety, swimming/wading activities, transportation, pets, diapering and other child care practices.

7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings. Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children: CCDF currently funds the Kansas Early Head Start Program which includes child care partnerships. Kansas is in the development phase of a statewide QRIS system. A system of quality indicators is under development. A field test date is targeted for Fall 2016.

7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory Kansas Early Head Start Program-The KEHS-Child Care Partnership services will expand the continuum of early care and education services and enhance the network supports by meeting the objectives, including but not limited to: Increasing comprehensive supports in high quality infant and toddler child care centers, group child care homes and family child care services in high-risk, high-need communities; building protective factors for vulnerable children and families; increasing the quality of child care providers through recruitment and participation; enhancing the statewide network of resources and supports by improving cross-systems professional development and systems linkages; and supporting families as they move toward self-sufficiency. In addition to supporting vulnerable children and their families, the Lead Agency's goal is to increase the quality of child care environments in which these children are enrolled. Kansas is also in the development phase of a statewide QRIS system. A system of quality indicators and measurements to evaluate this system is under development. A field test date is targeted for Fall 2016.

7.7 Accreditation Support

7.7.1 Does the State/Territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

- ☐ Yes, the State/Territory has supports operating State/Territory-wide. Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation _____
- ☐ Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide. Describe _____
- ☐ No, but the State/Territory is in the development phase

X No, the State/Territory has no plans for development (none at this time)

7.7.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory n/a

7.8 Program Standards

What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development? Please describe KDHE CCL has initiatives that address best practices above the regulation requirement. Current initiatives are Oral Health, Breastfeeding and Physical Activity. Strategies to support quality indicators relating to health, mental health, nutrition, physical activity and physical development will be considered within the developing QRIS.

Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory Measures to support quality indicators relating to health, mental health, nutrition, physical activity, physical development and/or other quality indicators will be identified within the developing QRIS.

7.9 Other Quality Improvement Activities

7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten.

Lead Agency has an interagency memorandum of agreement with KSDE and KDHE to support the Kansas Coordinating Council on Early Childhood Developmental Services (CCECDS), also referred to as the State Interagency Coordinating Council (SICC). The SICC is established to ensure that a comprehensive service delivery system of integrated services is available in Kansas for all children with or at risk of developmental delays from birth through age five and their families. The SICC serves as a liaison with local interagency coordinating councils (LICCs) and advises and assists KDHE, the lead agency for Part C of the federal Individuals with Disabilities Education Act (IDEA).

Objectives include, yet are no limited to: coordination with state agencies; collaboration with leadership of the Special Education Advisory Council (SEAC); advising and assisting the lead agencies for Part B and B 619 as related to state and federal performance measures; providing an annual report to the governor; an annual Performance Report (APR) submitted to the Office of Special Education Programs (OSEP) of the US Department of Education.

The Lead Agency contracts with Kansas Enrichment Network (KEN), a division of the University of Kansas Center for Educational Research, in support of school-age activities. Objectives to be met include, yet are not limited to: developing further and implementing a statewide network and infrastructure to create, strengthen, and institutionalize support for successful after-school programs within faith-based, community-based and school-based environments; offering technical assistance and professional development to existing and new out-of-school time programs; exploring and helping develop out-of-

school programs that target low-income populations, families receiving DCF child care subsidy, or TANF (Temporary Assistance for Needy Families) clients to enhance authentic, engaging opportunities and combat dropping out of school; assisting with training providers/youth workers to integrate social and emotional learning (SEL) strategies into afterschool programming; and developing two online leadership training sessions for director level afterschool positions (i.e., sustainability, management/fiscal responsibility, or recruiting/retaining staff).

8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

8.1 Program Integrity

8.1.1 Describe how the State/Territory ensures that their definitions for violations have been modified, and program integrity procedures revised to reflect new requirements. Depending upon the nature of the misapplication, violations are classified as an agency error, client error, or fraud. As the policies and procedures change related to reauthorization, the policy may also change. Should this occurs, DCF will provide updated policy information to DCF workers involved in the administration of the program.

8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements. Check all that apply.

- X Issue policy change notices
- ☐ Issue new policy manual
- X Staff training
  - ☐ Orientations
  - X Onsite training
  - X Online training

X Regular check-ins to monitor implementation of the new policies. Describe Random case reads.

☐ Other. Describe _____

8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF. The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements. Subrecipients with the Lead Agency have written agreements in place outlining contractual roles and responsibilities. Prior to entering into written agreements the Lead Agency verifies subrecipents' tax clearance, debarment status and FFATA (Federal Funding Accountability and Transparency Act) information. Written agreements include Scope of Work; services to be provided; performance measures; deliverables and reporting requirements. In regards to reporting requirements, Subrecipients are required to submit the following reports to the designated Lead Agency program manager: monthly financial reports; quarterly Performance Goals Reports; quarterly Outcomes reports; and Annual Quality Performance Report. Contract oversight and monitoring may include, but is not limited to, site visits, desk reviews, monthly calls and email communications.

Definition: "Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93).Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as "vendors").The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified."

8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

a) Check which activities the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.

X Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))

X Run system reports that flag errors (include types). Describe Several reports are produced monthly or periodically to assist workers in preventing and identifying possible incorrect payments. Examples of reports include: child care providers who appear to have numbers of children in care in excess of licensing standards, child care cases 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 client care cases with existing overpayments that are not being recouped.

X Review of enrollment documents, attendance or billing records

X Conduct supervisory staff reviews or quality assurance reviews

X Audit provider records

X Train staff on policy and/or audits

☐ Other. Describe _____

☐ None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines _____

b) Check which activities the Lead Agency has chosen to conduct to identify administrative error.

X Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))

X Run system reports that flag errors (include types). Describe A report is run to compare reported income with other assistance programs.

X Review of enrollment documents, attendance or billing records

X Conduct supervisory staff reviews or quality assurance reviews

X Audit provider records

X Train staff on policy and/or audits

☐ Other. Describe_____

☐ None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines _____

8.1.5 Which activities (or describe under "Other") the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory? The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under "Other") the Lead Agency will use for unintentional program violations?

- ☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount _____
- ☐ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- X Recover through repayment plans
- X Reduce payments in subsequent months
- X Recover through State/Territory tax intercepts
- ☐ Recover through other means
- X Establish a unit to investigate and collect improper payments. Describe

DCF has established the Child Care Overpayment Detection and Prevention unit, composed of a supervisor and 3 Program Consultant positions. Based on reports run, they conduct a review of not only the Provider's records but also the parent's work schedule as compared to the Child Care Plan. Provider overpayments are determined and referred to the Fraud Unit for civil or criminal proceedings. Intentional client overpayments are referred to an Administrative Disqualification hearing or to the Fraud unit. After a fraud determination is adjudicated a repayment notice is sent and the case is referred to the Central Collections Unit.

Other. Describe_____

- ☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines _____

b) Check which activities the Lead Agency will use for intentional program violations or fraud?

- ☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount _____
- ☐ Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)
- X Recover through repayment plans
- X Reduce payments in subsequent months
- X Recover through State/Territory tax intercepts
- X Recover through other means

X Establish a unit to investigate and collect improper payments. Describe composition of unit below DCF has established the Child Care Overpayment Detection and Prevention unit, composed of a supervisor and 3 Program Consultant positions. Based on reports run, they conduct a review of not only the Provider's records but also the parent's work schedule as compared to the Child Care Plan. Overpayments are determined, repayment notices sent and a referral is made to the Fraud Unit and the Central Collections Unit.

☐ Other. Describe_____

☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, including action steps and completion timelines _____

c) Check which activities the Lead Agency will use for administrative error?

☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount _____

☐ Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)

X Recover through repayment plans

X Reduce payments in subsequent months

X Recover through State/Territory tax intercepts

☐ Recover through other means

X Establish a unit to investigate and collect improper payments. Describe composition of unit below DCF has established the Child Care Overpayment Detection and Prevention unit, composed of a supervisor and 3 Program Consultant positions. Based on reports run, they conduct a review of not only the Provider's records but also the parent's work schedule as compared to the Child Care Plan. Overpayments are determined, repayment notices sent and a referral is made to the Central Collections Unit.

☐ Other. Describe_____

☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines _____

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

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

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

X Prosecute criminally

X Other. Describe While some providers are prosecuted criminally, most are taken to court for a Civil Judgment. We do not disqualify providers but the state has the right to choose which provider they will do CCDF business with. The state usually does not do CCDF business with providers who have been convicted of fraud.