

— Program Guide —

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Program Guide



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SECTION I: Introduction

What is the Kansas Early Head Start Program Guide?

The Kansas Department for Children and Families (DCF) has prepared this Kansas Early Head Start (KEHS) guide to provide direction to KEHS grantees regarding financial and administrative management of DCF-funded grant awards. This document is intended to:

- Serve as a starting point to assist KEHS grantees in implementing their DCF-funded grant award
- Give KEHS grantees a clearer understanding of DCF's expectations regarding the KEHS program
- Move KEHS grantees toward a more uniform program structure

History of KEHS

In order to better support infants and toddlers in Kansas, Governor Bill Graves initiated KEHS in 1998, pursuant to a recommendation by the Kansas Advisory Committee. By augmenting the Child Care Development Block Grant, Kansas became the first state in the nation to create a state-federal funding partnership through Early Head Start. DCF, formerly Social and Rehabilitative Services (SRS), was designated as the lead agency to oversee KEHS.

Funding Flow

Funding for KEHS originates with the federal government through the Child Care Development Fund (CCDF) and the Temporary Assistance for Needy Families (TANF) block grant. This funding is awarded to DCF, who serves as the Lead Agency for the funds. DCF then distributes funding to KEHS programs through a grant process. As a result of the flow of funds and the partnership between DCF and the Federal Administration for Children and Families, KEHS has a unique set of governing regulations. These include:

- Federal Head Start Program Performance Standards (HSPPS)
- Federal CCDF Regulations
- Federal TANF Regulations
- Office of Management and Budget (OMB) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR Part 200)
- Kansas Department of Health and Environment (KDHE) Child Care Licensing Regulations
- DCF Policies and Procedures as outlined in the Notice of Grant Award, the KEHS Program Guide, the DCF Grant Manual, and through ongoing instructions provided by the KEHS program manager

While this document will be shared with the Federal Administration for Children and Families, it is intended to provide guidance specifically related to the DCF grant award only.



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SECTION II: Child Care Partnerships

KEHS includes two options for providing a comprehensive service approach for at-risk families: Child Care Partnerships (CCP) or Home Visitation (HV). This section will discuss the CCP option. Through the CCP option, which is funded by CCDF, a grantee forms a partnership with a licensed community-based center or licensed home childcare facility to provide services for families receiving subsidies through the DCF Child Care Assistance (CCA) program. In some cases, the grantee may also be the operator of the center.

CCDF Federal Funding Description

CCDF, the funding source for Kansas Early Head Start – Child Care Partnerships (KEHS-CCP), was created by Congress in 1996, by the Personal Responsibility and Work Opportunity Reconciliation Act, commonly known as the "Welfare to Work" plan. This comprehensive welfare reform plan included a new consolidation of monies for child care that merged funding from the Social Security Act with funding from the Child Care and Development Block Grant of 1990. The merger became the CCDF and is administered federally by the Office of Child Care, under the Administration for Children and Families in the Department of Health and Human Services.

CCDF began with a primary goal of helping low-income mothers transition off of public assistance and into the workforce by increasing access to child care. The focus, however, has shifted over time to include improving the *quality* of child care as a complementary and interwoven purpose. The fund aims to have a true two-generational impact, with dollars helping to provide job training or educational opportunities for parents, while also supporting safe, learning-based, quality environments for the nation's most disadvantaged children.

CCDF strives to offer significant flexibility to the lead agencies of each state, territory or tribe administering the funded programs. One of the key goals is allowing these agencies the freedom to develop programs and policies reflective of the needs of their specific state's children and families. In Kansas, this is demonstrated through the creation and ongoing administration of KEHS.



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CCDF Federal Funding Regulation

Because funding for KEHS-CCP originates from CCDF, federal guidelines and regulations must be followed on all grants awarded by DCF. In this guide, the relevant CCDF federal guidelines highlighted in the Notice of Grant Award will be emphasized and briefly summarized. These guidelines include parts 98 and 99 under Title 45 of the Code of Federal Regulations (CFR). All organizations receiving funds under the CCDF, including the lead agency, grantees and sub-grantees or partners, are subject to and should be familiar with these guidelines.

45 CFR Part 98 at https://www.ecfr.gov/current/title-45/part-98

45 CFR Part 99 at https://www.ecfr.gov/current/title-45/part-99

Important CCDF Regulations for KEHS-CCP Grantees

Administrative Costs

By law, DCF cannot use more than five percent (5%) of the aggregate CCDF funds on administration each year. DCF holds grantees to an administrative cap agreed upon in the agreement.

Prohibited Uses of Funds

The law specifically states that CCDF funds cannot be used for the purchase or improvement of land, or for the purchase, construction, or permanent improvement of any building or facility.

Audits

CCDF holds DCF responsible for ensuring that KEHS grantees are audited in accordance with appropriate audit requirements.

Failure by DCF or its KEHS sub-grantees to comply with any of the CCDF requirements may jeopardize the availability of CCDF funds to the state. A copy of DCF's current CCDF State Plan can be found here: http://www.dcf.ks.gov/services/ees/Pages/Child_Care/Child-care-and-early-education.aspx

Governing Regulations

Head Start Program Performance Standards

All KEHS grantees and their partners must adhere to the Federal Head Start Program Performance Standards (HSPPS). These are specifically designed to guide programs toward effective administration of grants and the highest quality of services for families. Programs have eighteen (18) months from the start of the grant to achieve full adherence to the Federal HSPPS for new child care partners only. For current child care partners, a transition plan will need to be submitted and approved by the KEHS program manager if the program will not be fully enrolled due to transitioning children to another model or aging out.



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State of Kansas Licensing Requirements

All KEHS-CCP must be with a center or childcare home licensed by the Kansas Department of Health and Environment (KDHE). There is no grace period for achieving adherence to KDHE licensing; programs must meet licensing standards from the start of the grant period. Grantees are responsible for ensuring their partners maintain all KDHE licensing requirements, in addition to HSPPS. In the event that these two sets of requirements are in conflict, programs should always choose to follow the more stringent regulation. Licensing regulations for both centers and homes can be downloaded via KDHE:

https://www.kdhe.ks.gov/297/Child-Care-Center-Preschool-Head-Starthttps://www.kdhe.ks.gov/301/Licensed-Group-Day-Care

Partnership with DCF Programs

Child Care Assistance

All KEHS-CCP must be with a center or family childcare home which enrolls children who receive DCF Child Care Assistance (CCA) subsidies and is enrolled with DCF. The provider has to be an enrolled DCF provider before they can accept any subsidy children. The KEHS program manager can provide assistance with this process. The KEHS-CCP grantee will determine eligibility for child care assistance prior to completing the KEHS-CCP Referral form for Child Care Assistance. The KEHS-CCP Referral Form for Child Care Assistance will need to be completed and signed by the grantee and the parent. On the referral form, you will select if the family is already receiving child care subsidy or if they are new. The KEHS CCP Referral Form needs to be completed thoroughly with the family and also submitted with a DCF Child Care Assistance application. If you have only children in foster care enrolled, you will complete the foster care child care application (ES-3100FC) and turn in the KEHS CCP Referral with it. No signature needs to be obtained from the foster care case manager. You will send the paperwork via email directly to: DCFD.FosterCareCC@ks.gov. Please refer to the KEHS Child Care Referral Form for more information and instructions. Furthermore, there will be no co-pay for families enrolled in the KEHS CCP program.

For more information about Child Care Assistance, please call: 1-888-369-4777, or go to http://www.dcf.ks.gov/services/ees/Pages/Child Care/ChildCareSubsidy.aspx

The Quality Rating (or Recognition) Improvement System (QRIS) in Kansas is known as Links to Quality.

The Quality Rating (or Recognition) Improvement System (QRIS) in Kansas is known as Links to Quality. Indicators within Links to Quality include a variety of quality benchmarks to outline the elements of quality child care using national and statewide standards, feedback from providers and the All In for Kansas Kids needs assessment data. This framework helps improve the quality of early childhood programs, which leads to improved child outcomes through the creation of strong early learning environments. Kansas has chosen to focus on recognizing programs for the quality they offer. This allows Links to Quality to value Kansas providers and their work, encourage and motivate their progress, honor their accomplishments while communicating successes to their families and communities. Links to Quality is currently in the process of statewide implementation.

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Child Support Services

Parents are expected to cooperate with Child Support Services and follow established DCF processes. Lack of cooperation will result in disqualification from Child Care Assistance, as well as termination of participation in the KEHS-CCP services. If grantees are aware that families are dealing with issues that might qualify them for good cause to not cooperate with child support services, the grantee can help families gather the needed verification. See below for details on what may qualify for good cause and what verification may be needed:

KEESM 2162 Good Cause for Failure to Cooperate - In rare instances, the caretaker may be deemed to have good cause for refusing to cooperate in establishing paternity and securing support payments. Examples of such cases would be those in which it has been determined that pursuing paternity/support is against the best interest of the child or the caretaker. DCF Employment and Economic Services (EES) staff have the ultimate responsibility for determining the validity of good cause claims. Child Support Services (CSS) and Prevention and Protection Services staff may also be involved in making a recommendation for such determinations to EES. The caretaker is primarily responsible for providing documentary evidence required to substantiate a good cause claim. When necessary, the agency shall assist the client in securing any evidence that the client cannot reasonably obtain.

Good cause for failure to cooperate must relate to one of the following criteria:

- 1. The child was conceived as a result of incest or rape;
- 2. There are legal proceedings for adoption of the child pending before a court;
- 3. The caretaker is currently being assisted by a public or licensed private social agency to resolve the issue of whether to keep the child or relinquish the child for adoption;
- 4. The caretaker was a victim of domestic violence whereby compliance with program requirements would increase risk of harm for the individual or any children in the individual's case. Domestic violence includes acts on the part of perpetrators that result in:
 - 1. physical acts resulting in, or threatening to result in, physical injury;
 - 2. sexual abuse, sexual activity involving dependent children, or threats of or attempts at sexual abuse;
 - 3. mental abuse, including threats, intimidation, acts designed to induce terror, or restraints on liberty, or
 - 4. deprivation of medical care, housing, food or other necessities of life.
- 5. During a non-cooperation penalty period on a child care case, the caretaker has reestablished cooperation with Child Support Services and needs child care to participate in a TANF or Food Assistance work program.

Good cause claims must be confirmed or substantiated. Uncorroborated statements of the caretaker do not constitute documentary evidence; the mere belief that pursuing paternity or support is not in the client's or the child's best interest is not sufficient evidence. An individual's statement and one corroborating piece of evidence shall meet the burden of proof unless there is an independent reasonable basis to doubt the veracity of the statement. Evidence may include, but is not limited to:

- 1. Police or court records
- 2. Court documents which indicate that legal proceedings for adoption of the child are pending,



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- 3. Protection from abuse (PFA) orders (filed for and/or obtained),
- 4. Written statement from a public or licensed private social agency substantiating the fact that the client is involved in resolving the issue of whether to keep or relinquish the child for adoption,
- 5. Documentation from a shelter worker, attorney, clergy, medical or other professional from whom the client has sought assistance,
- 6. Other corroborating evidence such as a statement from any other individual with knowledge of the circumstances which provide the basis for the claim, or physical evidence of domestic violence or any other evidence which supports the statement.
- 7. The authorization card provided to participants with the Safe at Home mailing address, a contact phone number, the participant number, and an expiration date.

Exception: Regardless of the policy in this section regarding uncorroborated statements by caretakers, in extremely rare situations such as when an individual is in hiding and is afraid that there could be information disclosed that could reveal her whereabouts and where the worker does not doubt the veracity of the individual's statement, a written statement from the victim signed under penalty of perjury shall meet the burden of proof.

In most instances a good cause determination should be made within 60 days following the receipt of such claim. Exceptions to this would include such situations as when the evidence is extremely difficult to obtain. Website: http://content.dcf.ks.gov/EES/KEESM/Current/keesm2162.htm

KEHS-CCP Grantee-Partner Relationships

The importance of cooperation between KEHS-CCP grantees and DCF enrolled child care providers cannot be emphasized enough. The crucial underpinning of this model is forming partnerships with local high-quality infant and toddler programs, including both centers and childcare homes that provide full-day, full-year services and enroll children who receive DCF Child Care Assistance. Partnerships should be formalized in a written agreement detailing the rights and responsibilities of both the grant and the child care provider. Through these relationships, KEHS helps encourage the professional development of program staff and promotes the continuous improvement of the quality of care offered in Kansas communities.

Center-based Option

The Center-based Option occurs in early care and education settings either directly operated by the grantee agency or in other centers in the community. Services are provided in high-quality, developmentally appropriate, structured centers in the community. Because centers must adhere to both the Head Start Program Performance Standards (HSPPS) and KDHE licensing requirements, all children in the center will benefit from the high-quality care, not just those under KEHS funding. This directly addresses the idea that KEHS services support community-wide growth and development. Staff members also conduct family service visits as outlined in the HSPPS and while these may occur in the home or at the center, they are a supplemental component and should not be confused with the delivery of services offered through the Home Visitation Option.

Partnerships through the Center-based Option ensure that comprehensive services, such as physical and mental health support; curriculum, screening and ongoing assessment; nutritious snacks, meals and nutrition education; and family support and engagement extend to all children and families in the



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partner program. These services, as well as the professional development offered to staff may help a center determine whether KEHS partnership is a worthwhile endeavor. Because the HSPPS may be beyond many centers' basic requirements when developing a childcare partnership, it is important to highlight the ways in which making these improvements will advance their program and benefit all of the children, families and employees.

There are 10 Head Start Management Systems essential to a successful partnership with a childcare center. They are planning, program governance, human resources, facilities, materials and reporting, recordkeeping and recording, communication, ongoing monitoring, fiscal management, and self-assessment, as well as eligibility, recruitment, selection, enrollment and attendance (ERSEA).

Specific guidance for effective implementation of these systems can be found at https://eclkc.ohs.acf.hhs.gov/organizational-leadership/article/management-systems

Child Care Home Option

The Child Care Home Option, referred to federally as Family Child Care Homes, occurs in a licensed private home or licensed family-like group care setting with an agreement with DCF Child Care Assistance in advance. DCF Child Care Assistance enrolled family child care partnerships have some unique challenges but can be an excellent choice in small communities where larger centers are few or absent altogether. Like the Center-based Option, programs must adhere to both KDHE licensing requirements and federal HSPPS, but also have some distinct guidelines, particularly in the areas of provider qualifications and adult-to-child ratio.

Because DCF Child Care Assistance enrolled home settings have not traditionally been associated with structured or educational care, the first step in choosing this option is often to overcome these stereotypes and educate the community on the inherent value of the partnership. This option is an opportunity for KEHS to support the professional development and continuing education of providers in the community, while allowing parents the choice of having a small home or family-like environment for their children. In many communities, care options for infants and toddlers are scarce, so improving the access, quality and collaboration with home providers is crucial to effectively supporting these most vulnerable populations.

Main Performance Indicator

Percentage of high-quality early care and learning environments as determined using either the appropriate Environmental Rating Scales tool or the appropriate Classroom Assessment Scoring Scale (CLASS): Observational assessment for the classroom type in classrooms including KEHS-CCP children. This would be required to be conducted and entered into DAISEY in the last quarter of the SFY. It would be required in both the partner locations and if a grantee has their own classrooms. These assessments can only be conducted by early childhood staff members who have completed the required training and are considered reliable. Grantees must secure their own training. Classrooms will be considered high-quality if they meet the following:

If using Environmental Rating Scales: a recorded score of 5 or higher.

If using Classroom Assessment Scoring Scales:

CLASS Toddler

Emotional & Behavioral Support Domain Meets Quality Standards = domain score of 5 or higher



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Engaged Support for Learning Domain Meets Quality Standards = domain score of 3 or higher

CLASS Infant

Relational Climate Dimension = dimension score of 5 or higher Teacher Sensitivity Dimension = dimension score of 5 or higher Facilitated Exploration Dimension = dimension score of 3.5 or higher Early Language Support Dimension = dimension score of 3.5 or higher

KEHS-CCP Grantee-Partner Requirements

General Grantee Responsibilities

In the written Child Care Partnership Agreement, grantees commit to the following:

- Ensuring the provision of all comprehensive services in the Head Start Program Performance Standards for all enrolled KEHS-Child Care Partnership children;
- Ensuring all administrative and financial management requirements are met;
- Ensuring the KEHS-Child Care Partnership teachers meet minimum staff qualifications as in the Head Start Program Performance Standards;
- Providing professional development, coaching, and supervision for all teachers with emphasis
 on continuity of care and relational learning that supports children and their families and fosters
 school readiness;
- Ensuring a minimum of two annual family visits for each enrolled child;
- Supporting the inclusion and delivery of services to children with disabilities (at least 10 percent of funded enrollment);
- Ensuring physical environment and facilities meet all Head Start Performance Standards, including square footage, health and safety, appropriate crib and sleep spacing and arrangements, and facilities;
- Ensuring compliance with all applicable regulations, including state child care licensing;
- Ensure that the Family and Community Partnership requirements in the Head Start Program
 Performance Standards in 1302.50-1302.53 are met. In order to demonstrate compliance with
 the Head Start regulations, programs will be required to maintain individual child and family
 records. Programs will document individual child and family goals and progress reaching those
 goals; health records; screening and ongoing assessment records; transition plans; and parent
 volunteer hours.
- Ensure that the Additional Services for Children with Disabilities requirements in the Head Start Program Performance Standards in 1302.60-1302.63 are met.
- Ensure there is a continuous quality improvement plan.
 Continuous Quality Improvement Planning for KEHS-Child Care Partnership must:
 - o Include staff, families, children and stakeholders at all levels.
 - Consider the information from any monitoring visits as well as agency-specific strategies for documenting and reviewing a program, classroom and teacher performance.
 - Incorporate four components:

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- o Sources of Evidence: the evidence used to identify the areas of needed improvement.
- Goals, Objectives and Strategies: description of identified and measurable goals to be accomplished and how they will be achieved.
- Timeline and Person(s) Responsible: ongoing dates of review and targeted end-dates should be included, along with the person who has the primary responsibility for implementing and monitoring the goal.
- o Follow-up: the procedure for on-going review that will occur annually at a minimum.
- Include a process for annual submission to the DCF KEHS program management and be available for review at each site visit.
- KEHS-Child Care Partnership Continuous Quality Improvement Plans may be a subset of a grantee's existing strategic or ongoing plan. Self-assessments that incorporate Head Start specific goals and the four components described above are acceptable.
- Grantees are responsible for assuring child care partners' development and ongoing review of a Continuous Quality Improvement Plan.

Professional Development is a critical element of continuous quality improvement. All staff members will be required to develop individual professional development plans and participate in formal KEHS Child Care Partnerships professional development as requested by DCF KEHS program management. In addition, programs may determine the need for more individualized professional development at their local level. KEHS grantees will create a Training and Technical Assistance Plan with each Child Care Partner. In addition to program operation funding, each grantee will receive dedicated grant funds for ongoing professional development.

- Ensure that the Program Governance requirements in the Head Start Program Performance Standards in 1301-1301.6 are met.
- Ensure that the Human Resources management requirements in the Head Start Program Performance Standards in 1302.90 through 1302.94 and facilities, materials and equipment requirements in 1303.40 through 1303.56 are met.

General Partner Responsibilities

In the written Child Care Partnership Agreement, partners commit to the following:

- Maintaining enrollment with DCF as an enrolled child care assistance provider;
- Ensuring adult-child ratios and group sizes meet Head Start Program Performance and licensing standards;
- Implementing an evidence-based curriculum that is developmentally appropriate for infants and toddlers;
- Conducting ongoing assessment of children to individualize the instruction and learning for each child;
- Providing health and nutrition services, including all developmental, sensory, and behavioral screening and assistance with provision of follow-up services; and
- Engaging parents in the full range of child development and family support services.

Community Needs Assessment

All services delivered through KEHS should be guided by the grantees' most current Community Needs Assessment, which must be conducted every three years to match the 3-year Grant and Renewal periods. Most current Community Needs Assessment and/or updates are required to be



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completed and forwarded to the KEHS Program Manager on a yearly basis with your RFP and yearly renewals.

This is a comprehensive evaluation of the community and population, including demographics, geographical area, and economic distribution and existing resources for children and families in the areas of education, health, social service and early intervention for disabilities. Data should be collected from members of the general community as well as representatives from family service professions in the area and may be gathered via open forums, town meetings, individual interviews, focus groups, community surveys or other appropriate methods that capture adequate information.

The Community Needs Assessment is vital for developing the most effective plan for KEHS services, because it is the basis for understanding the environment in which programs will work. Knowing the opinions of the citizens about the strengths and weaknesses in their communities will help determine the largest areas of need and will give KEHS staff the ability to either create or adjust services accordingly. Taking this holistic approach also ensures that programs have the best impact possible and that services are not being delivered unnecessarily or ineffectively.

Comprehensive Service Delivery

Because the purpose of KEHS is multi-faceted, grantees are required to provide an extensive array of services. Child and family support must be direct, early, continuous, intensive, comprehensive, and must follow the Federal HSPPS, at all times. The program aims to improve children's development across all areas: physical, social, emotional, and cognitive, while also providing widespread resources for parents. To meet these broad goals, programs must operate in collaboration with many other agencies and organizations in their communities.

Developing strong relationships with other family resources offered in a community is a crucial first step in providing the required comprehensive services model. Programs must work to establish open communication and a framework for building a true team effort among service providers in their area if they wish to have successful and streamlined delivery. This may require many initial meetings to become familiar with the current operations but learning about the various agencies and beginning positive partnerships should be a natural byproduct of conducting the Community Needs Assessment. Once these initial bonds are formed, KEHS programs should consider it a key responsibility to maintain and cultivate them, so the children in the community are receiving every benefit available.

Direct Service Components

Child Care and Development

Follows all the requirements in the Head Start Program Performance Standards around 1302 Subpart C-Education and Child Development Program Services: 1302 Subpart C-Education and Child Development Program Services | ECLKC (hhs.gov)

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Health Services

Follows all the requirements in the Head Start Program Performance Standards around 1302 Subpart D-Health Program Services: https://eclkc.ohs.acf.hhs.gov/policy/45-cfr-chap-xiii/1302-subpart-d-health-program-services

Parent and Family Engagement

Follows all the requirements in the Head Start Program Performance Standards around 1302 Subpart E-Family and Community Engagement Program Services: https://eclkc.ohs.acf.hhs.gov/policy/45-cfr-chap-xiii/1302-subpart-e-family-community-engagement-program-services

Community Collaboration

Examples of organizations that could be collaborative partners in a community:

- Parents as Teachers
- Part B and Part C Early Intervention providers
- Healthy Families
- Job training programs
 - Including DCF TANF and Food Assistance employment services
- Unemployment assistance
- Personal finance education
- Marriage and family strengthening programs
- Child abuse prevention programs
- Women Infants and Children (WIC)/ Nutrition education
- Medical and dental professionals
- Mental health agencies
- SafeKids Worldwide or local subsidiaries
- Parks and Recreation facilities
- Services or shelters for homelessness, domestic violence, food insecurity

The level at which a KEHS program collaborates with any or all of these agencies will be determined by the Community Needs Assessment and will fluctuate over time as the needs of the particular children and families evolve. For example, in the event of a natural disaster in the area, services in the areas of housing, food, mental health trauma and medicine might become far more essential and at the forefront of the cooperative efforts. Alternatively, if a large local company shuts down, a KEHS program might increase its collaboration and communication with unemployment and financial services in the area. As with most aspects of KEHS, there is ample freedom to develop the relationships to appropriately fit the strengths and weaknesses in a specific community.

Examples of how inter-agency collaboration might function:

- Periodic meetings between leadership of each agency
- Regular communication via a child's Individual Family Service Plan (IFSP) or Individualized Education Program (IEP) team
- Serving on each other's board of directors or governing body
- Co-presenting professional development or in-service opportunities for early childhood service providers
- Co-hosting educational events for families, children or caregivers



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- Cross promoting community services via newsletters, brochures, email list-serves, support groups, online forums, etc.
- Offering transportation to and from different agencies or opportunities, such as medical or dental appointments, developmental screenings, safety events or support groups
- Combining social events or play groups for families across the community to develop relationships and support
- Reaching out to new medical professionals in the community to be sure they are aware of the existing partnerships and ways services can be complementary
- Grant writing together for alternative sources of funding for special projects

It is important to note that a common challenge with offering such a comprehensive model is avoiding duplication of services. Because funding and an available workforce are often scarce in social service, programs must take extra care not to waste time or effort developing services that are already available and functioning. Again, a thorough Community Needs Assessment should help combat this challenge, but programs should be continuously re-assessing the array of resources available in their region and adjusting accordingly. Strong communication lines between the leadership of all agencies will be vital to making sure neither competition nor redundancy is occurring and resulting in less effective assistance for the families in the area.

Self-Evaluation

To accurately assess progress toward outcomes, improve overall quality and identify appropriate goals for the future, all KEHS grantees must conduct a multi-faceted self-evaluation each year. Three formalized plans are conducted, including a Continuous Quality Improvement Plan for the overall partnership, Professional Development Plans for individual staff members, and a Training and Technical Assistance Plan for each partner.

The Continuous Quality Improvement Plan

The Continuous Quality Improvement Plan is part of an ongoing process that analyzes strengths and weaknesses, measures program effectiveness and informs goals or plans for change. The plan must:

- Include a process for submission to KEHS Program Management
- Be available for review upon site visits
- Include staff, families, children and stakeholders at all levels
- Use both monitoring visits and other agency-specific strategies to document and review program, classroom and teacher performance
- Incorporate:
 - Sources of evidence for areas needing improvement
 - Measurable goals, defined objectives and a description of strategies for accomplishment
 - Timelines for implementation of strategies and identified; persons responsible for monitoring progress toward goals
 - Follow-up procedures for review at least annually

Individual Professional Development Plans

Individual Professional Development Plans are required of all teaching staff working directly with KEHS children in a KEHS-CCP. Continuing education and training of individual employees is an



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essential element of improving overall program quality. Plans should be relevant to the staff members' job duties and should be reflective of individual goals and areas of needed improvement.

Training and Technical Assistance Plans

Training and Technical Assistance Plans are developed jointly between the grantee and partner based on the needs identified in the Individual Professional Development Plans. For example, if a number of teachers desire to learn more about social-emotional development, the training plan might include a presentation by a local mental health provider and follow-up referral guidance. Grantees receive dedicated grant funds to offer the appropriate professional development opportunities to partners.

A program must establish and implement a systematic approach to staff training and professional development designed to assist staff in acquiring or increasing the knowledge and skills needed to provide high-quality, comprehensive services within the scope of their job responsibilities and attached to academic credit as appropriate.

SECTION III: Home Visitation

KEHS includes two options for providing a comprehensive service approach for at-risk families: Child Care Partnerships (CCP) or Home Visitation (HV). This section will discuss the HV option. Through the HV option, which is funded by TANF, a grantee provides a home-based service model that does not include a child care component.

TANF Federal Funding

The Temporary Assistance for Needy Families (TANF) block grant was created by Congress in 1996, by the Personal Responsibility and Work Opportunity Reconciliation Act, commonly known as the "Welfare to Work" plan. TANF replaced Aid to Families with Dependent Children (AFDC), which had provided cash welfare to low-income families with children since 1935. Through TANF, states receive a block grant from the federal government, which they are required to supplement with state spending for low-income families. This requirement is called the Maintenance of Effort (MOE).



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The following four goals describe how states may utilize federal TANF and State MOE funding.

Provide assistance to needy families so that children may be cared for in their own homes or in the homes of relatives.

End the dependence of needy parents on government benefits by promoting job preparation, work, and marriage.

Prevent and reduce the incidence of out of wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies. Encourage the formation and maintenance of two parent families.

Because the TANF goals are quite broad, states have flexibility in developing the types of services they see most fitting for their needs. Some examples across the United States include child abuse and neglect prevention, job training and education for parents, employment counseling, transportation assistance and childcare or early education support. Due to its comprehensive service approach, KEHS-HV is uniquely situated to help address all four of the TANF goals.



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TANF Federal Funding Regulations

Because funding for KEHS-HV originates from TANF, federal guidelines and regulations must be followed on all grants awarded by DCF. In this guide, the relevant TANF federal guidelines highlighted in the Notice of Grant Award will be emphasized and briefly summarized. These guidelines include parts 260-265, under Title 45 of the Code of Federal Regulations (CFR). All organizations receiving funds under TANF, including the lead agency, grantees and sub-grantees or partners, are subject to and should be familiar with these guidelines.

45 CFR Part 260 https://www.ecfr.gov/current/title-45/subtitle-B/chapter-II/part-260?toc=1
45 CFR Part 261 https://www.ecfr.gov/current/title-45/subtitle-B/chapter-II/part-261?toc=1
45 CFR Part 263 https://www.ecfr.gov/current/title-45/subtitle-B/chapter-II/part-263?toc=1
45 CFR Part 264 https://www.ecfr.gov/current/title-45/subtitle-B/chapter-II/part-265?toc=1
45 CFR Part 265

Governing Regulations

Head Start Performance Standards

All KEHS grantees and their partners must adhere to the Federal Head Start Program Performance Standards (HSPPS). These are specifically designed to guide programs toward effective administration of grants and the highest quality of services for families.

KEHS-HV Program Requirements

Community Needs Assessment

All services delivered through KEHS should be guided by the grantees' Community Needs Assessment, which must be conducted every three years to match the 3-year Grant and Renewal period. Yearly Community Needs Assessment updates are required to be completed and forwarded to the KEHS Program Manager.

This is a comprehensive evaluation of the community and population, including demographics, geographical area, and economic distribution and existing resources for children and families in the areas of education, health, social service and early intervention for disabilities. Data should be collected from members of the general community as well as representatives from family service professions in the area and may be gathered via open forums, town meetings, individual interviews, focus groups, community surveys or other appropriate methods that capture adequate information.

The Community Needs Assessment is vital for developing the most effective plan for KEHS services, because it is the basis for understanding the environment in which programs will work. Knowing the opinions of the citizens about the strengths and weaknesses in their community will help determine the largest areas of need and will give KEHS staff the ability to either create or adjust services accordingly. Taking this holistic approach also ensures that programs have the best impact possible and that services are not being delivered unnecessarily or ineffectively.

Comprehensive Service Delivery

Because the purpose of KEHS is multi-faceted, grantees are required to provide an extensive array of services. Child and family support must be direct, early, continuous, intensive, comprehensive and must follow the federal HSPPS at all times. The program aims to improve children's development



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across all areas: physical, social, emotional, and cognitive, while also providing widespread resources for parents. To meet these broad goals, programs must operate in collaboration with many other agencies and organizations in their communities.

Direct Service Components

Services are provided through 90-minute weekly home visits to each enrolled child and family. In keeping with the goals of KEHS, even though the primary service delivery is happening in the home, this approach is still comprehensive in nature and helps parent's access resources and education for all areas of their family's development. The home visitor provides child-focused sessions that promote the parents' ability to support the child's development and encourage them to later recreate and build on the activities that are introduced. Twice per month, the Home Visitation program should offer opportunities for parents and children to come together as a group for learning, discussion and social activity. The social settings allow parents to collaborate with others in the program and share experiences, ideas and support.

The key component of the Home Visitation Option is the strength of the relationship cultivated between the home visitor and the family. There must be a solid foundation and a gradual building of trust for the relationship to most optimally benefit the child. A formal Family Partnership Agreement should be in place that will outline the agreed-upon schedule and the specific roles of both parents and staff. Home visitors will work closely with parents to ensure that goals and experiences are congruent with the family's culture and will use responsive interactions as the primary mode for assessing needs and developing future plans or curriculum. Home visitors will also assist parents who are unemployed to seek employment, return to school or enter a TANF-approved training program.

(HSPP 1302.52) A program must implement a family partnership process that includes a family partnership agreement and the activities described in this section to support family well-being, including family safety, health, and economic stability, to support child learning and development, to provide, if applicable, services and supports for children with disabilities, and to foster parental confidence and skills that promote the early learning and development of their children. The process must be initiated as early in the program year as possible and continue for as long as the family participates in the program, based on parent interest and need.

Community Collaboration

Examples of organizations that could be collaborative partners in a community:

- Parents as Teachers
- Part B and Part C Early Intervention providers
- Healthy Families
- Job training programs
- Unemployment assistance
- Personal finance education
- Marriage and family strengthening programs
- Child abuse prevention programs
- Women Infants and Children (WIC)/Nutrition education
- Medical and dental professionals
- Mental health agencies
- SafeKids Worldwide or local subsidiaries



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- Parks and Recreation facilities
- Services or shelters for homelessness, domestic violence, food insecurity

The level at which a KEHS program collaborates with any or all of these agencies will be determined by the Community Needs Assessment and will fluctuate over time as the needs of the particular children and families evolve. For example, in the event of a natural disaster in the area, services in the areas of housing, food, mental health trauma and medicine might become far more essential and at the forefront of the cooperative efforts. Alternatively, if a large local company shut down, a KEHS program might increase its collaboration and communication with unemployment and financial services in the area. As with most aspects of KEHS, there is ample freedom to develop the relationships to appropriately fit the strengths and weaknesses in a specific community.

Examples of how inter-agency collaboration might function:

- Periodic meetings between leadership of each agency
- Regular communication via a child's IFSP or IEP team
- Serving on each other's board of directors or governing body
- Co-presenting professional development or in-service opportunities for early childhood service providers
- Co-hosting educational events for families, children or caregivers
- Cross promoting community services via newsletters, brochures, email list-servs, support groups, online forums
- Offering transportation to and from different agencies or opportunities, such as medical or dental appointments, developmental screenings, safety events or support groups
- Combining social events or play groups for families across the community to develop relationships and support
- Reaching out to new medical professionals in the community to be sure they are aware of the existing partnerships and ways services can be complementary
- Grant writing together for alternative sources of funding for special projects

It is important to note that a common challenge with offering such a comprehensive model is avoiding duplication of services. Because funding and an available workforce are often scarce in social services, programs must take extra care not to waste time or effort developing services that are already available and functioning. Again, a thorough Community Needs Assessment should help combat this challenge, but programs should be continuously re-assessing the array of resources available in their region and adjusting accordingly. Strong communication lines between the leadership of all agencies will be vital to making sure neither competition nor redundancy is occurring and resulting in less effective assistance for the families in the area.



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SECTION IV: DCF Grant Management

This section of the program guide provides a brief overview of DCF-specific policies and procedures. Grantees should always contact the KEHS program manager with any questions.

Reference Document

DCF Grant Manual

With a strategic focus on strengthening families, safely reducing the number of children in care, promoting employment, exercising responsible stewardship of public resources, and building public/private partnerships, DCF issued a Grant Manual in summer 2014 to provide a summary of DCF grant procedures to ensure that grant funds are being administered judiciously. KEHS grantees are required to follow the policies and procedures set forth in the grant manual in administering their KEHS grant.

To access the entire grant manual for DC grantee agencies please visit: <u>Grant Manual Grantee</u> <u>Version (ks.gov)</u>

Notice of Grant Award

The Notice of Grant Award contains all requirements imposed on individual KEHS grantees by DCF, whether by statute or regulation. The rights and obligations of KEHS grantees and DCF are set forth in the Notice of Grant Award and its attachments. KEHS grantees are required to follow the requirements set forth in the Notice of Grant Award in administering their KEHS grant.

Relationship between DCF Grant Manual, Notice of Grant Award and KEHS Program Guide
The DCF Grant Manual, along with the KEHS Notice of Grant Award, has informed the guidance
provided in this program guide. This program guide does not replace nor supersede either the DCF
Grant Manual or the KEHS Notice of Grant Award. Rather, the program guide, in conjunction with the
DCF Grant Manual and the KEHS Notice of Grant Award, are intended to provide as clear of a picture
as possible of DCF requirements. In addition to this program guide, grantees should continue to
consult both the DCF Grant Manual and the KEHS Notice of Grant Award to guide their financial and
administrative management of their KEHS program. Grantees should always contact the KEHS
program manager with any questions.



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Payments & Purchases

Office of Management and Budget (OMB) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards

Grantees should be aware of and understand the requirements set forth in the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR Part 200).

This guidance supersedes and combines the requirements of eight existing OMB Circulars (A-21, A-50, A-87, A-89, A-102, A-110, A-122 and A-133) with the intent to streamline the federal grant-making and monitoring process, to ease the administrative burden for grant applicants and recipients and to reduce the risk of waste, fraud and abuse.

Subpart E (Cost Principles) of the Uniform Administrative Requirements provides details regarding the expenditure of funds, including which costs are allowable.

DCF will reimburse KEHS grantees for services rendered under the KEHS Grant Award on a monthly basis. Using the appropriate forms, grantees must submit a monthly status report, budget transaction report and budget itemization report to the KEHS program manager in order to receive payment.

Purchase of Equipment

All purchases of equipment must be submitted by the KEHS grantee to the KEHS program manager and subsequently approved before any purchase of equipment is made. Equipment is defined as an article of tangible personal property that has a useful life of more than one year and an acquisition cost of \$1,000 or more. KEHS grantees should use form OGC-4004 when submitting their request.

A. <u>Travel</u> - This category shall include company-owned and/or leased automobile costs (automobile insurance, fuel, taxes, maintenance and repairs, depreciation, lease and other associated costs) and staff business travel costs (mileage reimbursement, lodging and subsistence expenses, out-of-state travel costs and other staff business travel related cots). All business travel expenses shall follow all State of Kansas travel regulations and guidance.

Personnel Activity Reports

Subpart E. Cost Principles - Section 200.430 of the Uniform Administrative Requirements covers compensation for personnel services. It includes a section related to standards for documenting personnel expenses. The new circular does not specifically require personnel activity reports to be maintained. It does, however, require charges to grant awards to be based on records that accurately reflect the work done. The standards for documentation of personal services are listed in Subpart E. Cost Principles – Section 200.430. Budget estimates alone do not qualify as support.

Grantees must be able to demonstrate the charges to grant awards are accurate, allowable and properly allocated.



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Indirect Costs

Indirect costs means those costs incurred for a common or joint purpose benefitting more than one cost objective, and not readily assignable to the cost objectives specifically benefitted, without effort disproportionate to the results achieved. Often these costs are not readily identifiable with a particular award, project, program or service. Indirect costs should not exceed 10 percent of the grant budget.

DCF Acceptance of Negotiated Indirect Cost Rate

The Office of Management and Budget Super Circular does reference the allowance of a federally approved cost plan. If there is a plan, the rate may be negotiated, or the minimum approved rate of 10 percent can be used only for ADMIN cost. There is an allowance for a reduction if the amount of indirect costs is limited by law. Grantees cannot go over the percent cap on administrative costs that is in their agreement. Consider that percent administrative cost rate cap when calculating indirect cost rates.

Administrative Costs

TANF and CCDF each define Administrative Costs uniquely, so KEHS grantees should always carefully examine the requirements in their Notice of Grant Award from each agency.

For a complete definition on TANF Administrative Costs Regulations, Home Visitation grantees should see Section 263.13 of Title 45 of the Code of Federal Regulations For a complete definition of CCDF Administrative Costs Regulations, Child Care Partnerships grantees should see Section 98.52 of Title 45 of the Code of Federal Regulations.

Medical Services

A specific statutory provision exists which prohibits the spending of TANF funds on medical services. For this reason, KEHS Homes Visitation grantees must utilize other non-TANF funding if they wish to provide assistance with medical services for a current family or a pregnant mother who plans to enroll the child upon birth. Funds may be used for screenings and assessments, but not treatment.

Reporting

The required reporting forms can be found in Section V: Contact Information and Sample Forms. The KEHS program manager will instruct grantees on a routine basis regarding required reporting forms.

Federal Funding Accountability and Transparency Act

For purposes of grant submission and grant renewal, KEHS grants are subject to the Federal Funding Accountability and Transparency Act of 2006. For detailed information about these requirements, please see http://www.dcf.ks.gov/Agency/Operations/Pages/Grantee-Resources.aspx

DAISEY Reports

Data for the following are reported using Data Application and Integration Solutions for the Early Years (DAISEY), a web-based shared measurement system housed on a secure, HIPAA-compliant server at the University of Kansas: http://daiseysolution.com/. Training and Technical Assistance is available for all DAISEY users.

Each KEHS model will have different DAISEY forms. These forms are subject to change based on reporting requirements, including changes to Head Start Performance Standards.



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Performance Reports

Performance Reports are required quarterly, due on Oct. 30, Jan. 30, April 30, and July 30.

Data and Outcomes Reports

Data and Outcomes Reports are required quarterly, due on Oct. 30, Jan. 30, April 30, and July 30.

Grantees will continuously collect and enter data using the following tools:

- Ages & Stages Questionnaire (ASQ-3)
- Ages & Stages Questionnaire: Social Emotional (ASQ:SE-2)
- Parent and family outcomes indicated by parents demonstrating knowledge and skills related
 to child development, parenting practices and access to Early Head Start Services. All KEHS
 grantees must implement intake and family assessment procedures to identify family strengths
 and needs related to the family engagement outcomes as described in the Head Start Parent
 Family and Community Engagement Framework, including family well-being, parent-child
 relationships, families as lifelong educators, families as learners, family engagement in
 transitions, family connections to peers and the local community, and families as advocates
 and leaders, grantees can determine what data tool is best for them to collect the information

Financial

Monthly Status Report

Status Reports must be submitted by each KEHS grantee agency to the KEHS program manager by the 15th of each month to secure payment. KEHS grantees should use form OGC-1006.

Monthly Budget Transaction Report

KEHS grantees are reimbursed for services on a monthly basis. Budget Transaction Reports must be submitted by each KEHS grantee agency to the KEHS program manager by the 15th of each month to secure payment. KEHS grantees should use form OGC-1005. Budget Transaction Reports will not be processed without a Status Report for the reporting period on file, a Budget Itemization Report, and any other required documentation as established in the grant award. After review of the information, as necessary, additional information related to specific expenditures, such as invoices, may be requested.

Program Income

Program income cannot be listed on the Budget Transaction Report as a separate line item. Program income should be applied to a line item or line items on the Budget Itemization Report. The program income will show a description of what the program income was, and the credit applied.

Monthly Budget Itemization Reports

KEHS grantees must submit budget itemization reports to the KEHS program manager by the 15th of each month. KEHS grantees should use form OGC-4005. Budget Itemization Reports enumerate the expenses listed in the Budget Transaction Reports in greater detail, itemizing them by line item. The subtotals on the Budget Itemization Reports must match the line item figures on the Budget Transaction Reports. **The Budget Itemization Report is mandatory—agency ledgers will not be accepted.** Receipts are to be kept on file at the KEHS grantee agency.



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Final Grant Year Budget Transaction Report

The last Budget Transaction Report of the grant period shall be marked "FINAL" and submitted by the grantee promptly following completion of the work under this grant, but in no event later than sixty (60) days from the date of such completion or Aug. 30, whichever date comes first. On the Budget Transaction Report, the grantee will mark the box "Y" for final report. The KEHS program manager will confirm via email that this is their final payment for that grant year. After payment of the Final Invoice (Final Payment), no further amount shall be due or payable by DCF under this grant.

Budget Revisions or Modifications

KEHS grantees may submit a budget revision request to the KEHS program manager during their grant year if they would like to move funding from one line item to another, within the existing grant year, without changing the total expense amount of their approved grant budget. If the requested funding change is less than 10 percent of the line item where the money is coming from, no revision is required. KEHS grantees must still provide notice of the line item change(s) and justification for the change to the KEHS program manager.

KEHS grantees should use form OGC-1008 when submitting their request. Revision requests will not be accepted during the last thirty (30) days of the grant year.

DCF Compliance Oversight

Expenditures over \$750,000

Entities that spend more than \$750,000 in federal awards during the fiscal year must have a single audit which meets the following requirements:

- Be conducted in accordance with Generally Accepted Government Auditing Standards.
- Have a determination whether the financial statements of the organization are presented fairly
 in all material respects in accordance with generally accepted accounting principles. They
 must include a Schedule of Expenditures of Federal Awards (SEFA) and opine whether it is
 stated fairly in all material respects in relation the financial statements taken as a whole.
- Include Internal Control testing the auditor must perform procedures to obtain an
 understanding of internal control over Federal and State programs and determine the
 sufficiency of those controls over Federal and State programs.
 Include Compliance testing the auditor must determine whether the organization has
 complied with Federal and State statutes, regulations, and the terms and conditions of Federal
 and State awards that may have a direct and material effect on major programs.

Expenditures under \$750,000

Entities that spend less than \$750,000 in federal awards during the fiscal year must have a Financial/Compliance audit conducted in accordance with the DCF Recipient Monitoring Policy and include assurances of the following:

- Compliance with administrative requirements and cost principles contained in the Office of Management and Budget Cost Circulars
- Compliance with guidance contained in the Code of Federal Regulations for CCDF (Child Care Partnerships) or TANF (Home Visitation)
- Compliance with DCF grant award conditions and other State regulations



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Effective financial accountability and controls over grant funds

DCF Program Staff Site Visits

Currently, there is no set schedule regarding DCF program staff site visits or Desk review to KEHS grantees. DCF reserves the right to conduct a site visit and will provide grantees with reasonable advanced notice of a visit.

Quarterly Program Meetings

KEHS Program Meetings are held on a quarterly basis. The meetings are typically scheduled for the first Thursday of March, June, September and December, yet are subject to change. KEHS grantees are required to send at least one representative to each meeting. This representative should be someone who has the authority and ability to relay information back to the KEHS grantee management. These meetings are an opportunity for conversation related to the administration of the KEHS grant awards and are most effective when grantees are engaged in suggesting topics for the meetings. KEHS grantees are encouraged to contact the KEHS program manager to propose topics for discussion.

Grantee Concerns and Questions

KEHS grantees should contact the KEHS program manager with any concerns and questions as soon as they arise.

Grant Award Period and Renewal Option

Funding awards will be issued for the funding period of the state fiscal year, which begins July 1, and concludes on June 30 of the following year. Following completion of the first year of the grant award, there will be an option for renewals as spelled out in the agreement. Awards are subject to the availability of funds and any modifications or additional requirements that may be imposed by law.

On occasion, DCF may make an amendment to the Notification of Grant Award if the agency would like to extend the grant year-end date, increase/decrease the total expense amount of the approved grant budget authority, or change the scope of work, within the grant year. The KEHS grantee will be made aware of these potential adjustments and will be asked to sign off on them before they are put into place.

Termination of Grant Award

Termination by DCF for Cause.

DCF may terminate a KEHS grant award for cause. Cause for immediate termination is limited to the following: grantee's failure to perform the requirements and conditions set forth in their grant; grantee's material breach of the terms and conditions of this agreement; the willful breach, habitual neglect or other continued failure of the grantee to abide by any law, rule, procedure or policy the grantee has received notice from either DCF or the State of Kansas. In the event that DCF terminates a KEHS grant for cause, the KEHS grantee will be provided written notice of the reasons therefore.

Termination by DCF for Lack of Funding Appropriation.

If sufficient funds are not appropriated to continue the function performed in this agreement and for the payment of the charges. DCF may terminate this agreement at the end of its



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current fiscal year. DCF agrees to give written notice of termination to the grantee at least thirty (30) days prior to the end of its current fiscal year, and shall give such notice for a greater period prior to the end of such fiscal year as may be provided in this agreement, except that such notice shall not be required prior to ninety (90) days before the end of such fiscal year.

Termination by KEHS Grantee.

Should a KEHS grantee consider terminating their KEHS grant award with DCF, the grantee is strongly encouraged to contact the KEHS program manager immediately upon such consideration.

Transition Process Following Termination.

DCF will work with KEHS grantee whose award is terminated either by DCF or the grantee to establish a grant close out plan.

SECTION V: Contact Information, Links and Sample Forms

Important Contact Information

Nichelle Adams
Social Services Program Collaboration Deputy Director
Nichelle.Adams@ks.gov
785-368-8130

Leslie Hamilton Kansas Early Head Start Program Manager Leslie.Hamilton@ks.gov 785-250-6416

Kimberly Kennedy Kansas Head Start Collaboration Director Kimberly.Kennedy@ks.gov (785) 368-6354

Links

DCF Grantee Manual

https://www.dcf.ks.gov/Agency/Operations/Documents/GRANT.MANUAL-GRANTEE-Version%201.3.pdf

Federal Administration for Children and Families https://www.acf.hhs.gov/

Federal Office of Head Start http://www.acf.hhs.gov/programs/ohs



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Head Start Performance Standards
http://eclkc.ohs.acf.hhs.gov/hslc/standards/hspps

Temporary Assistance for Needy Families http://www.acf.hhs.gov/programs/ofa/programs/tanf

Federal Office of Child Care https://www.acf.hhs.gov/occ

Kansas Department of Health and Environment: Child Care Licensing http://www.kdheks.gov/bcclr/

Federal Office of Management and Budget https://www.whitehouse.gov/omb

Sample Forms

Grant Forms

Location: https://www.dcf.ks.gov/Agency/Operations/Pages/Grantee-Resources.aspx

Budget Revision Form (called Revision Request)

FFATA Form

Monthly Report Forms

Budget Transaction Report

Budget Itemization Report

Status Report

Pre-Approval Equipment Form

KEESM Form

KEHS Child Care Assistance Referral Form https://content.dcf.ks.gov/EES/KEESM/Forms/ES-1610-
KansasEarlyHeadStartChildCarePartnershipsReferralForChildCareAssistance.pdf