

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

1 Define CCDF Leadership and Coordination with Relevant Systems

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

1.1 CCDF Leadership

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

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

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

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Kansas Department for Children and Families

Street Address: 555 S. Kansas Avenue, 4th Floor

City: Topeka

State: Kansas

ZIP Code: 66603-3444

Web Address for Lead Agency: <http://www.dcf.ks.gov>

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Gina

Lead Agency Official Last Name: Meier-Hummel

Title: Secretary

Phone Number: 785-296-3274

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

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Karen

CCDF Administrator Last Name: Beckerman

Title of the CCDF Administrator: Strengthening Family Services Director

Phone Number: 785-296-4717

Email Address: Karen.Beckerman@ks.gov

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

Street Address:

City:

State:

ZIP Code:

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

CCDF Co-Administrator First Name:

CCDF Co-Administrator Last Name:

Title of the CCDF Co-Administrator:

Description of the role of the Co-Administrator:

Phone Number:

Email Address:

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

Street Address:

City:

State:

ZIP Code:

1.2 CCDF Policy Decision Authority

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

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

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

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

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

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

- Other.

Describe:

2. Sliding-fee scale is set by the:

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

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

Other.

Describe:

3. Payment rates are set by the:

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

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

Other.

Describe:

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

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

a) Who conducts eligibility determinations?

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

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

Describe

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

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

Describe

c) Who issues payments?

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

Describe

CCDF Lead Agency issues child care benefits to eligible parents. Parents pay child care providers through an Electronic Benefit Transfer (EBT) system.

1.2.3 Describe the processes the Lead Agency uses to monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.2, including written agreements, monitoring and auditing procedures, and indicators or measures to assess performance of those agencies (98.16(b)). Note : The contents of the written agreement may vary based on the role the agency is asked to assume or type of project, but must include at a minimum, tasks to be performed, schedule for completing tasks, budget which itemizes categorical expenditures in accordance with CCDF requirements, and indicators or measures to assess performance (98.11(a)(3)).

Grant and Contract award processes and reporting requirements can be found at the DCF Contractor resources website at: <http://www.dcf.ks.gov/Agency/Operations/Pages/Grantee-Resources.aspx> and <http://www.dcf.ks.gov/Agency/Operations/Pages/Contractor--Resources.aspx>. The Grantee's/Sub-Grantee's responsibilities regarding obtaining an independent audit of any grant or sub-grant awarded by DCF are found in DCF's Recipient Monitoring Policy, which can be found on DCF's Audit Services webpage at <http://www.dcf.ks.gov/Agency/GC/Pages/Audits/AuditPolicies.aspx> . Detail on the level of monitoring required is included in each specific Notice of Grant Awards (NOGA). The specific work required by the grant must be completed in accordance with the Scope of Work specified in the NOGA, or as requested by DCF. All Grantee and Sub-Grantee awards issued by DCF are also subject to federal and state audit. The Grantee Agency must submit required reports to the DCF Program Manager designated in their NOGA. Failure to submit the required reporting, regardless of the level of progress or expenditures during the reporting period, could lead to non-payment of the Budget Transaction Report requested funds, suspension of the grant, and/or termination of the grant, at the discretion of DCF. The specific work required by a contract must also be completed in accordance with the Scope of Work specified in the Contracting Agency's Agreement, or as requested by DCF. Program staff provide additional monitoring through site visits, conference calls, and program desk audits.

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

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

Systems developed using CCDF funds will be made available to other public agencies upon request. The requesting agency should forward their information to the CCDF State Administrator for further information. These systems include: Kansas Eligibility Enforcement System (KEES), Client and Provider Portal (CAPP), and CLARIS.

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

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

Kansas Statutes Annotated 39-709b describes the confidentiality requirements regarding information concerning applicants for and recipients of assistance, including child care. This information shall be confidential and only available to the secretary and officers and employees of the secretary except as described in the statute. The statute allows for disclosure for post audits, to the applicant or recipient, or outside source in limited situations. Those limited outside source situations require written consent, direct connection to administration of the program, direct connection to investigation, prosecution, or criminal or civil proceedings, is pursuant to the federal social security act, or concerns the intent to commit a crime. The Kansas Economic and Employment Services Manual, the policy manual

which incorporates policies and procedures affecting the cash, food assistance, employment services, and child care programs, has details for staff regarding the expectations around the use and disclosure of confidential and personally-identifiable information. These policies are found in KEESM 1221-1229. Information concerning applicants or recipients (present and past) is confidential and may not be disclosed to another Department for Children and Family (DCF) employee, the client, or any other nonagency personnel except as specifically detailed in the manual. Disclosure of confidential information is allowed when the purpose is directly related to the administration of the DCF program; an investigation, prosecution, or criminal or civil proceeding conducted in connection with the administration of the DCF program or the SSI program; or the administration of any federal or federally assisted program which provides assistance (in cash or in kind) or services directly to individuals on the basis of need. Information contained in applications, reports of investigations, reports of medical examinations, correspondence, and other records concerning the condition or circumstances of any person for whom or about whom information is obtained, and including all such information whether or not it is recorded must be safeguarded and kept confidential. Information entered in the case record is to be made available to the client upon request, for inspection at a time mutually agreeable to the agency and the client, except information provided by other DCF program, medical and psychiatric records, names and addresses of complainants, and investigative reports. Information is not to be disclosed to another DCF employee unless the employee has a need for the information in the performance of his official duties. The client's signature on the application form authorizes the disclosure of information concerning a TANF, Child Care, and/or Food Assistance client if the purpose of such disclosure is connected with the administration of any of the aforementioned programs, the Child Welfare or Child Support programs (under titles IV-B, IV-D, and XX), or any other federal or federally assisted program which provides assistance, in cash or in kind, or services directly to individuals on the basis of need. (Example: SSI, LIEAP.) Information is not to be disclosed to nonagency personnel such as courts, school boards, legislators, prosecuting attorneys, policemen, FBI agents, doctors, social service agencies, state employment offices, public housing authorities, landlords, creditors, relatives, etc., except as set forth below.

Information not otherwise authorized to be disclosed by this provision may only be disclosed if the client has the authority to disclose such information and the agency has a signed, written consent on file authorizing the agency to disclose the information to the specific person requesting such information, excepting that such information may be disclosed

without signed, written consent in an emergency situation such as death or other serious crises to an appropriate person if the agency deems such unauthorized disclosure to be in the best interest of the client. If such information is disclosed without signed, written consent, the client shall be notified of such disclosure as soon thereafter as possible. Since all information relative to a client is by law confidential and since clients are advised that any information they reveal is held confidential, any information received by the worker or other person connected with the agency, is by statute, in the nature of a privileged communication just as is the information received by an attorney or physician from his client, or received by a minister in the performance of his function as a spiritual advisor. When there is some question as to the disclosure of information to another DCF employee, the client or other nonagency personnel, the question is to be referred to the legal division for clearance. An DCF employee who discloses confidential information concerning an applicant or recipient (present and past) shall be subject to appropriate disciplinary action. Further, any individual who discloses confidential information concerning an applicant or recipient (present, past) shall be subject to criminal prosecution, and if convicted, may be fined up to \$1,000 and/or sentenced to the county jail for a period not to exceed six months.

Child Care Providers records such as health assessments are not retained. Licensing surveyors review facility files to determine records are on file. The information available on the portal only provides the address of the provider if the provider chooses to opt in to having this information displayed. Both staff and surveyors are trained that information cannot be shared. Kansas statute K.S.A. 38-2212 and K.S.A. 38-2213 give authority for the exchange of information to be shared, only as appropriate and necessary access; exchange of information; court ordered disclosure; and limited public information.

When child care providers enroll with DCF and provide the information necessary for the completion of the Adult Abuse, Neglect, Exploitation Central Registry check, the signed agreement assures providers that the information will be kept confidential by the DCF Child Care Provider Enrollment Unit. KEESM 1223 discusses the nature of information that must be safeguarded by DCF employees and indicates that this includes information of any person for whom or about whom information is obtained. This would include information obtained for the enrollment of providers with DCF.

1.3 Consultation in the Development of the CCDF Plan

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

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

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

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

Consultation

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

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

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

Collaboration on specific plan content (such as: proposed regulations, background checks) occurred with county health department staff thru coordination with the Kansas Department of Health and Environment and through the Child Care Licensing Systems Improvement Team membership. The final draft of the CCDF state plan was made

available for review to these entities also.

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

Kansas currently does not have a active State Advisory Council. DCF and KDHE consult with many different group within the state on CCDF programs and on plan content throughout the year. These groups include but are not limited to: the Child Care Licensing Systems Improvement Team, State Interagency Coordinating Council, State Agency Early Childhood Leadership Team, and Links to Quality (QRIS) Advisory Group and implementation workgroups. The final draft of the CCDF State Plan was made available for review and comment to these entities also.

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

DCF meets quarterly with the tribe as agenda items warrant. DCF shared the draft state plan for comment and input with the Iowa Tribe of Kansas and Nebraska, the Kickapoo Tribe and the Prairie Band of Potawatomi Nation. A member of the Prairie Band of Potawatomi Nation Early Education Team serves on the L2Q (QRIS) Advisory Board.

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

As stated earlier on-going planning and coordination occurs between DCF and statewide entities as members of the agencies staff are active participants on the Kansas State Agency Early Childhood Leadership team and other statewide groups. These groups include but are not limited to: Tribal Organizations, the Child Care Licensing Systems Improvement Team, State Interagency Coordinating Council, State Agency Early Childhood Leadership Team, and Links to Quality (QRIS) Advisory Group and implementation workgroups. The DCF child care team also actively participates and consults internally with other benefit program managers and staff within the lead agency through monthly policy planning meetings, the monthly implementation planning team, and quarterly Economic and Employment Services Program Administrator's meetings.

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

Reminder:

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

a) Date of the public hearing. 06/06/2018

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

b) Date of notice of public hearing (date for the notice of public hearing identified in (a). 05/10/2018

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

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

Electronic notice was published in the Kansas Register, provided to local resource and referral agencies, provided to local licensing surveyors, child care professional organizations, other state agencies, and Lead Agency local offices. Kansas Register link: https://www.kssos.org/pubs/register/2018/Vol_37_No_19_May_10_2018_pages-429-454.pdf 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 and posted both on the KQN & DCF website. DCF Website: <http://www.dcf.ks.gov/services/ees/Pages/Child-Care-and-Development-Fund-State-Plan-Public-Hearing.aspx>

d) Hearing site or method, including how geographic regions of the state or territory were

addressed. Hearing was held in Topeka, KS and was available via adobe connect with a teleconference option.

e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.)

The draft CCDF state plan was posted on the DCF website at http://www.dcf.ks.gov/services/eess/Pages/Child_Care/Child-care-and-early-education.aspx on May 1, 2018, the Kansas Quality Network (KQN) at <http://ksqualitynetwork.org/> and the DCF Facebook page. Paper copies were made available upon request and were available at the public hearing. KQN website information was also made available at the public hearing.

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? All comments provided were recorded, acknowledged, and reviewed for consideration.

1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found here: <https://www.acf.hhs.gov/occ/resource/pi-2009-01>)

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

Links to the plan, amendments and/or waivers are available via links on the agency website http://www.dcf.ks.gov/services/eess/Pages/Child_Care/Child-care-and-early-education.aspx and a link to this direct site can also be found at the Kansas Quality Network at <http://ksqualitynetwork.org/laws-regulations/>.

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

Working with advisory committees.

Describe:

Working with child care resource and referral agencies.

Describe:

The public hearing notice and stateplan was shared via Child Care of Aware of Kansas's website, and Facebook. <http://www.ks.childcareaware.org/kansas-ccdf-state-plan-2019-2021-for-review-and-comment/%20>

Providing translation in other languages.

Describe:

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

Describe:

Hearing notice and state plan link were shared via DCF's agency website, Facebook, Twitter and Email, in addition to sharing via the Kansas Quality Network website. http://www.dcf.ks.gov/services/ees/Pages/Child_Care/Child-care-and-early-education.aspx

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

Describe:

The Lead agency shared the public hearing notice and posting of the CCDF state plan draft notice with multiple early childhood stakeholders across Kansas, including yet not limited to: Kansas Dept. for Health and Environment - Child Care licensing, Child Care Provider Coalition, Kansas Head Start Association, MIECHV, Part C- Infant Toddler Services, Part C 619, Parents As Teachers, Healthy Families of America, Families Together, Kansas Parent Information Resource Center (KPRIC), the Children's Cabinet, Kansas Action for Children, Kansas Association for Infant Mental Health, Kansas Child Care Training Opportunities (KCCTO), Kansas Inservice Training (KITS), the State Interagency Coordinating Council (SICC) Links to Quality (L2Q) Advisory Group and participants, and Child & Adult Care Food Program (CACFP).

Other.

Describe:

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

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

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

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

Include in the descriptions the goals of this coordination, such as:

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

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

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

Describe the coordination goals and process:

Collaboration on specific plan content occurred with county health department staff through coordination with the Kansas Department for Health and Environment and

through the Child Care Licensing Systems Improvement Team membership. Goals included recommended proposed regulation changes regarding orientation and on-going training for child care provider caring for children ages infancy through school age. The final draft of the State Plan was made available to these entities also.

- (REQUIRED) State Advisory Council on Early Childhood Education and Care (or similar coordinating body) (pursuant to 642B(b)(1)(A)(i) of the Head Start Act).

Describe the coordination goals and process:

Kansas currently does not have a active State Advisory Council. DCF and KDHE consult with many different group within the state on plan content throughout the year. These groups include but are not limited to: the Child Care Licensing Systems Improvement Team, State Interagency Coordinating Council, State Agency Early Childhood Leadership Team, Kansas Enrichment Network (KEN) Executive Committee, Tribal quarterly coordination meetings and Links to Quality (QRIS) Advisory Group and implementation workgroups. The Lead Agency also coordinates internally with the monthly policy planning team, monthly implementation planning team, and at the quarterly Economic and Employment Services Program Administrator's meeting. The Lead Agency's goal is to coordinate with relevant groups regarding CCDF reauthorization and topic areas impacted by the CCDBG Act of 2014. Groups address goals for children ages infancy through school age. Policy, licensing regulations, and quality initiatives are all addressed within these groups. The final draft of the CCDF State Plan was made available for review and comment to these entities also.

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

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

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

DCF meets quarterly with the tribe as agenda items warrant. DCF shared the draft state plan for comment and input with the Iowa Tribe of Kansas and Nebraska, the Kickapoo Tribe and the Prairie Band of Potawatomi Nation. A member of the Prairie Band of Potawatomi Nation Early Education Team serves on the L2Q (QRIS) Advisory Board. Goals included increased input and coordination with Tribes around the topic areas of professional development opportunities and the Links to Quality pilot.

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

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

Describe the coordination goals and process:

On-going planning and consultation occurs between DCF and KDHE staff and representatives of this agency through the Kansas State Agencies Early Childhood Leadership Team monthly meetings and work. The final draft of the state plan was posted and made available for review and comment. Goal is to continue support and agency participation in the State Interagency Coordinating Council. The council is responsible for advising and assisting the Kansas governor and legislature on matters that impact Kansas families with children, ages birth to five who have, or are at risk for developmental delays. Goal is to continue the coordination and collaboration thru the work of the interagency team

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

Describe the coordination goals and process:

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. Goal is for HSSCO to continue to support and facilitate coordination between agency, Federal Head Start grantees, and the Kansas Head Start Association.

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

Describe the coordination goals and process:

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. Goal is continue the ongoing coordination with KDHE, and provide resources regarding immunizations thru individual consultations with child care providers as requested during licensing surveys, technical assistance visits and the KQN website.

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

Describe the coordination goals and process:

The final draft of the CCDF state plan was posted and made available for review and comment. Goal is to continue on-going coordination and resource sharing with the employment services staff located within DCF.

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

Describe the coordination goals and process:

On-going planning and consultation occurs between DCF and Kansas Department of Education (KSDE) staff and representatives of this agency through the Kansas State Agencies Early Childhood Leadership Team monthly meetings and work efforts to improve services to children and families. The final draft of the state plan was posted and made available for review and comment. Goal is to continue on-going consultation with KSDE in enhancing early childhood services thru the availability of the Kansas Early Learning Standards to child care providers, families and Kansas communities.

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

Describe the coordination goals and process:

On-going planning and consultation occurs between DCF and KDHE staff and representatives of this agency through the Kansas State Agencies Early Childhood Leadership Team monthly meetings, weekly CCDF Strengthening Families Child Care team meetings, and thru the development and completion of the CCDF state plan work. DCF is coordinating with Child Care Licensing within KDHE in the development of a statewide Quality Rating Improvement System (QRIS). Links to KDHE child care resources, including regulations, are accessible on DCF's Kansas Quality Network (KQN). The final draft of the state plan was posted and made available for review and comment. Goal is to continue the coordination and the agreement between the state agencies to provide child care licensing across the state. The final draft of the state plan was posted and made available for review and comment.

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

[Describe the coordination goals and process:](#)

The final draft of the state plan was posted and made available for review and comment. Goal is for on-going communication, to continue to provide CACFP links on the KQN website and promote participation in CACFP with child care providers.

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

[Describe the coordination goals and process:](#)

The office was consulted with specific plans for services to homeless families, training for child care providers and providing consumer education on the KQN website. The final draft of the state plan was posted and made available for review and comment. Goal to increase consumer education regarding homeless thru child care professional development opportunities. DCF met with Kansas Department of Education's (KSDE) McKinney Vento Homeless Act Liaison regarding the development of online training coursework for child care providers. Serving homeless families is included within the Kansas Early Learning Standards toolkits, created thru a collaborative effort with members of the Kansas State Agencies Early Childhood team and the Kansas Inservice Training Service (KITS) project.

- (REQUIRED) [State/territory agency responsible for the Temporary Assistance for Needy Families program.](#)

[Describe the coordination goals and process:](#)

Goal is to continue the ongoing planning and coordination with the TANF Unit and Employment Services section of the agency located within the Economic and Employment Services Section of DCF. Coordination is completed thru the weekly Economic and Employment Services weekly Leadership meetings, the monthly Policy Planning team meetings, the monthly Implementation Planning team meetings, and the quarterly Economic and Employment Services Program Administrator's meetings. The final draft of the state plan was posted and made available for review and comment.

- (REQUIRED) [Agency responsible for Medicaid and the state Children's Health Insurance Program.](#)

[Describe the coordination goals and process:](#)

The final draft of the state plan was posted and made available for review and

comment. Goal is to continue coordination with the Kansas Department for Health and Environment (KDHE) Maternal Health team and provide consumer resources on agency's Kansas Quality Network (KQN) regarding Medicaid, CHIP program, and immunization resources.

(REQUIRED) State/territory agency responsible for mental health

Describe the coordination goals and process:

The final draft of the state plan was posted and made available for review and comment. Goal is to continue planning and coordination 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 to support children and their families.

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

Describe the coordination goals and process:

The final draft of the state plan was posted and made available for review and comment. DCF contracts with Child Care Aware of Kansas for Resource and Referral and Consumer Education Services. DCF is also coordinating with Child Care Aware of Kansas in the development of a statewide quality rating improvement system (QRIS), named Links to Quality (L2Q). The newly developed L2Q will pilot a network of quality child care resources empowering families in making informed decisions about child care. The L2Q will provide parents the tools and knowledge to assess what quality child care looks like, how to select high quality care and where to access it. Goal will be to create a QRIS system that can be launched statewide

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

Describe the coordination goals and process:

The final draft of the state plan was posted and made available for review and comment. Goal is to continue planning and coordinating with the Kansas Enrichment Network, as they build and expand school based programs to enhance learning opportunities for students and provide technical assistance to new and established

programs. The State Child Care Administrator serves on the Kansas Enrichment Network Executive Committee.

(REQUIRED) Agency responsible for emergency management and response.

Describe the coordination goals and process:

The final draft of the state plan was posted and made available for review and comment. Staff with Kansas Division of Emergency Management share the goal with the Lead Agency and other agencies to address preparedness, response, and recovery efforts specific to child care services and programs through several processes. The main process used to reach this goal is the development and updating of the Kansas Response Plan, which is the framework for the coordination of emergency management plans at all levels and provides the pre-assigned responsibilities to State agencies and organizations to support local agencies. Kansas Division of Emergency Management develops this plan in coordination with representatives from various agency and organizations, including Kansas Department for Children and Families, the Lead Agency and the child care licensing agency, Kansas Department of Health and Environment. Staff with the Kansas Division of Emergency Management have agreed to aid in the development and updating of the Statewide Child Care Disaster Plan to ensure that the plan accurately reflects the division of responsibility and coordination efforts that have been agreed on throughout the state of Kansas. DCF works with KDEM staff regarding continuity of operations planning and feeding and mass care in response to emergencies and disasters that occur in Kansas. DCF is a member of the Kansas Continuation of Operation Plan Committee which is comprised of representatives of state cabinet level agencies. The committee sets standards for state agency Continuation of Operation Plan plans and provides guidance and assistance to state agencies regarding their Continuation of Operation Plan efforts. DCF is also the state agency lead for feeding and mass care during disasters. DCF representatives travel to the State Emergency Operations Center during State Emergency Operations Center trainings, exercises and activations. In response to a disaster, DCF coordinates with volunteer organizations such as the Red Cross and Salvation Army, as well as KDEM and county emergency management staff. This coordination helps ensure adequate shelters and other necessities such as food, water and clothing are available to all Kansas citizens impacted by a disaster. The citizens assisted include vulnerable populations such as children and those with functional needs.

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

- [State/territory/local agencies with Early Head Start - Child Care Partnership grants.](#)

[Describe](#)

The final draft of the state plan was posted and made available for review and comment. Agency has a Memorandum of Agreement with The Family Conservancy (TFC), the only federal EHS-CCP grantee in Kansas. Per the MOA a DCF CCDF team member is a community member on the TFC policy council, and participates in EHS/CC partnership calls, webinars and meetings. Agency CCDF staff regularly coordinate and consult with TFC regarding child care subsidy eligibility. The DCF Strengthening Families team meets regularly with TFC project management team, with the goal to meet at a minimum quarterly.

- [State/territory institutions for higher education, including community colleges](#)

[Describe](#)

The final draft of the state plan was posted and made available for review and comment. DCF coordinates with representatives of higher education and community colleges regarding state career ladder initiative, early learning guidelines, professional development opportunities and the Kansas Early Learning Guidelines toolkit.

- [Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services.](#)

[Describe](#)

The final draft of the state plan was posted and made available for review and comment. Agency staff are members of the State Interagency Coordinating Council (SICC) and agency provides funding to support SICC staffing. SICC members include state and local level early childhood special education staff, agencies, community members, governor appointments, elected officials and parents of children with special needs.

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

Describe

On-going planning and consultation occurs between DCF and KDHE staff and representatives of this agency through the Kansas State Agencies Early Childhood Leadership Team monthly meetings, and thru the development and completion of the CCDF state plan work. The final draft of the state plan was posted and made available for review and comment.

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

Describe

On-going planning and consultation occurs between DCF, KSDE - Part B 619 and KDHE- Part C staff and representatives of this agencies through the Kansas State Agencies Early Childhood Leadership Team monthly meetings, and thru the development and completion of the CCDF state plan work.

- State/territory agency responsible for child welfare.

Describe

The final draft of the CCDF state plan was posted and made available for review and comment. Child welfare staff are located within the lead agency. In addition, the lead agency, DCF, partners with Early Head Start - Child Care Partnership grantees to serve children in foster care and to assist their foster families in accessing/coordinating payment. Economic and Employment services and child welfare staff within DCF partnered to expand the state's definition of social service child care to include families providing care to children within the Kinship Care and Safe Families Programs.

[State/territory liaison for military child care programs.](#)

[Describe](#)

The final draft of the CCDF state plan was posted and made available for review and comment by the public and other entities .

[Provider groups or associations.](#)

[Describe](#)

The final draft of the CCDF state plan was posted and made available for review and comment to multiple early childhood stakeholders across the state, including yet not limited to: Kansas Head Start Association, Kansas Parents as Teachers Association, Families Together, the Child Care Provider Coalition, the Kansas State Home Visitation Work Group, the State Agencies Early Childhood Team, Child Care Aware of Kansas, the Children's Cabinet and Kansas Parent Information Resource Center. Groups and associations were notified of the posting via email, Facebook, twitter and/or in person during DCF participation/attendance in group and association meetings.

[Parent groups or organizations.](#)

[Describe](#)

The final draft of the CCDF state plan was posted and made available for review and comment. Members of the Strengthening Families Child Care Team coordinate with staff from the Kansas Parent Information Resource Center (KPIRC) . KPIRC promotes meaningful family engagement at all levels of education and resources to help parents, educators and other organizations promote the educational of every Kansas child.

[Other.](#)

[Describe](#)

The DCF Strengthening Family Services Child Care Team coordinates within the agency with the DCF employment services program, currently serving families receiving TANF and SNAP assistance. Child Care services are coordinated to ensure supports are available to families working toward the goal of self-sufficiency.

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

Optional Use of Combined Funds:

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

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

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

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

No (If no, skip to question 1.5.2)

Yes. If yes, describe at a minimum:

a) How you define "combine"

Child Care Subsidy is available to wrap around both state and federal funded early childhood programs and is provided to serve as the basic child care rate for both state and federal Early Head Start Child Care Partnerships Grantees.

b) Which funds you will combine

Child Care Subsidy and Kansas Early Head Start, Head Start and the Kansas Preschool Programs.

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

Outcomes of combining Funding includes: extending the day for services available to children in Head Start and Preschool Programs; increase services to families experiencing homelessness, increase high supply and quality services to infants and toddlers in high need areas (high unemployment, high poverty and high out of home placements); and increasing comprehensive services to children in child care.

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

Funds are combined at the program level.

e) How are the funds tracked and method of oversight

Subsidy funds utilized for Kansas Early Head Start Child Care Partnership and Federal Early Head Start Child Care Partnership Grantees are tracked by DCF. Wraparound funds for Head Start and Preschool Programs are not tracked.

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

Note:

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

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

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

N/A - The territory is not required to meet CCDF matching and MOE requirements

Public funds are used to meet the CCDF matching fund requirement. Public funds may include any general revenue funds, county or other local public funds, state/territory-specific funds (tobacco tax, lottery), or any other public funds.

-- If checked, identify the source of funds:

Matching: State General Funds; MOE: Children's Initiative Funds (tobacco settlement funds)/State General Funds.

-- If known, identify the estimated amount of public funds that the Lead Agency will receive: \$ Matching: \$8,790,514; MOE: \$6,673,024 total (\$5,033,679 CIF Funding/\$1,639,345 State General Funds).

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

-- If checked, are those funds:

donated directly to the State?

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

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

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

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

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

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

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

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

State expenditures for preK programs are used to meet the CCDF maintenance-of-effort requirements. If checked,

-- The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.55(h)(1) and 98.15(6).

No

Yes

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

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

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

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

1.6 Public-Private Partnerships

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

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

Kansas Quality Network, a website offered by DCF, the lead agency, provides child care providers tools and shared resources to support their continuous quality improvement efforts, supporting their licensing applications and DCF enrollment requirements, find a wide range of resources to support their staff and families, child development information, regulations, and professional development information all in one location. Kansas Quality Network has received feedback from providers indicating that the website has “valuable information in an organized and easy to understand” way. The Kansas Quality Network provides links to each partner organization so that they control and edit the content delivered. Kansas Quality Network serves as an entry point to connect people to the services provided by partner organizations with a shared purpose of strengthen families and improving children’s lives.

The lead agency, DCF, continues to coordinate with many partners on the development of a statewide Quality Rating Improvement System (QRIS). The QRIS Advisory Group, which

consists of 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, has the goal of providing critical input in the QRIS design. These representatives have a wide range of knowledge and expertise, as well as, specific agency goals and interest that strengthen the quality of the QRIS system. The QRIS Advisory Group meets in person quarterly. Currently, Links to Quality, the Kansas QRIS program, is in its pilot program phase. Links to Quality will be tested in five areas across Kansas chosen based on several factors including rates of poverty, unemployment, and out-of-home placements. The pilot launched in April 2018.

The lead agency, DCF, partners with Early Head Start programs within our state funded Kansas Early Head Start Child Care Partnership Program. This allows subsidy dollars to be utilized for basic child care cost and additional funds to be used to increase quality. It also allows subsidy payments to be made by parents in a timely manner. These partnerships increase the supply of high-quality child care services. DCF also has a memorandum of agreement with The Family Conservancy, an Early Head Start-Child Care Partnership Federal grantee, to improve coordination of child care services for participating children and reduce duplication of application processes. Kansas Early Head Start Child Care Partnerships work with their child care partners to complete their Child Development Associate Credential, as this is required for their teachers due to the Head Start Performance Standards.

The lead agency, DCF, has staff serving on a wide range of committees and groups. DCF staff coordinate with representatives of higher education and community colleges on the state career ladder, early learning guidelines, and professional development opportunities. DCF staff serves on, Early Childhood Higher Education Options, Early Childhood Quality Instructional Partners, Health Literacy, Kansas Association of Infant Mental Health, Kansas Early Head Start Director's meetings, Kansas Interagency Council on Homeless, Kansas Quality Improvement Advisory Council, Kansas Head Start Association Affiliate Program Member meetings, Kansas Head Start Association Board, Kansas State Agencies Early Childhood Leadership Team, Parent Leadership, Safe Kids Kansas, State Interagency Coordinating Council, Tribal Coordination meetings, Kansas Department of Health and Environment and Child and Adult Care Food Program coordination, DCF child care provider

enrollment staff meetings, Help Me Grow core leadership team meeting, State Home Visitation Team, and Region VII Head Start Association Meetings.

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

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

- If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency, provide parents in the State with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.
- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).
- Collect data and provide information on the coordination of services and supports, including services under Section 619 and Part C of the Individuals with Disabilities Education Act;
- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State;
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

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

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

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

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

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

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

Lead Agency contracts with Child Care Aware of Kansas, a non-profit organization, for consumer education and child care referral services. Services to families include providing individualized referrals and resources to parents and guardians about child care services including child development, delays in development, school-age services, and affordable options to meet their children's needs. Referral calls and resource materials include (the Parent/Community Resource Sheets) with the Kansas Infant-Toddler Services-Intervention Services contact information for each of the 105 counties in Kansas. Services to providers includes consumer education resources that encourage quality improvement and assisting families in meeting their needs.

Additionally, providers are informed of statewide initiatives and community-based services available to providers and families. Providers are part of an established referral system to link families with child care providers. Through the referral database, Child Care Aware of Kansas collects data regarding the number of providers who will care for children with disabilities, the number of family referral requests for care of children with disabilities, and the types of disabilities that are requested. There are currently 2,670 child care providers who will take children with a disability. The top five special needs categories of care provided include: food and environmental allergies, asthma, speech/language, and gross motor delays. The top five disability care requests include: autism, challenging behaviors, speech/language/ ADHD, and gross motor delays.

Through their data collection system and other resources, Child Care Aware of Kansas collects data and prepares the Annual Child Care Supply and Demand Report. This report includes data, summary and recommendations for immediate and long-term strategies for expanding the supply of high-quality care. Annual reports have included recommended strategies and an action plan for child care partners, businesses, public and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in Kansas.

http://www.dcf.ks.gov/services/ees/Documents/Child_Care/2017SupplyDemandReport_v2.pdf)

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

Child Care Resource and Referral Services are coordinated statewide through the Lead Agency's (DCF) contract with Child Care Aware of Kansas. Child Care Aware of Kansas subcontracts with four regional offices to form a statewide network that serves all 105 counties of Kansas.

1.8 Disaster Preparedness and Response Plan

Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they will address the needs of children including the need for safe child care, before, during, and after a state of emergency declared by the Governor or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122) through a Statewide Disaster Plan that, for a State, is developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to section 642B(b)(1)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i))) or similar coordinating body (98.16(aa)).

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

The State human services agency, Kansas Department for Children and Families, drafted the 2018 Kansas Child Care Disaster Plan, which is a summary of all levels of coordination and communication in the event of a disaster or emergency with the primary focus on children in child care settings. Extensive input was received and utilized from multiple staff at the State emergency management agency, Kansas Division of Emergency Management. At the suggestion of the Kansas Division of Emergency Management, the State ADA Coordinator reviewed the draft and provided input. The State ADA Coordinator is employed by the Kansas Department for Children and Families. The Kansas Department for Children and Families' Emergency Management Coordinator provided further feedback to improve the plan. Staff from the Kansas Department of Health and Environment, the State licensing agency and State health department, provided updates and comments utilized in the plan development. Staff from Child Care Aware of Kansas and Kansas Child Care Training Opportunities, Inc., representing child care resource and referral agencies, provided additional input to improve the plan. Input was also received from Kansas Children's Cabinet and Trust Fund staff. Representatives on the Child Care Licensing Systems Improvement Team have reviewed the 2018 Kansas Child Care Disaster Plan as representatives of the previously mentioned agencies.

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

All State agencies, including the Kansas Department for Children and Families (DCF), Kansas Department of Health and Environment (KDHE) and the Kansas Division of Emergency Management (KDEM), have developed agency-wide continuation of operations plans. Kansas local health departments, which provide child care licensing services, also

have continuity of operation plans developed. DCF has continuity of operations plans for the Kansas DCF Administration site, ITS and each of the four regions. Each office also has a continuity of operation plan developed. To ensure continued access to the Kansas Benefits Card, which is used by child care subsidy providers to pay providers, the agency with which DCF contracts also has a continuation of operation plan.

To help facilitate the continued care for children when their parents or caregivers are absent, KDHE has issued emergency disaster guidelines, which are provided in the 2018 Kansas Child Care Disaster Plan. KDHE's Child Care Licensing Program (KDHE-CCL) has long had a guidance policy for local health departments, child care and school-age programs and partners regarding the care of children and youth in facilities when their parents are absent, in the event of a community natural or environmental disaster. Guidelines address 1) temporary emergency facilities within the disaster area or set up outside the disaster area but not licensed at the time of the disaster, 2) regulated facilities not directly impacted by the disaster; 3) local health departments contracted to provide child care regulatory services affected by the disaster; and 4) regulated facilities that are within the disaster area or facilities temporarily closed and then re-opened following the disaster. A member of the child care licensing team serves on KDHE's Mass Care Planning Team and this individual is currently updating the existing guidance to better align with current KDHE standard operating procedures.

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

The Kansas Division of Emergency Management (KDEM) is the lead agency in coordinating emergency operations through all phases of emergency management. KDEM is organized into three program areas to fulfill this statutory responsibility. These program areas include preparedness, planning and mitigation, response and recovery. The Response and Recovery Branch contains the Communications Unit, Individual Assistance program, Public Assistance Program, Regional Emergency Management Coordinator Program and Technological Hazards section. The Incident Command System is used to direct, command and coordinate response and recovery operations at all levels of government. Kansas

Department for Children and Families, the lead agency, serves as a support agency, along with many other support agencies, for Emergency Support Function 14: Long Term Community Recovery, which looks at long-term impacts to the community and would address businesses and employment, community infrastructure and social services. Community infrastructure recovery includes child care facilities and child care needs being identified, coordinating recovery efforts and the use of resources to support this recovery. The details of the responsibilities involved in these various roles during preparedness, mitigation, response and recovery are defined in the 2017 Kansas Response Plan, which is an appendix item in the 2018 Kansas Child Care Disaster Plan. Within the 2017 Kansas Response Plan, more details exist around the role of Community Relations Team in informing disaster victims of the disaster assistance programs and registration process. A Long-Term Recovery Committee also helps identify unmet needs and possible assistance. Centers are established to provide information on available disaster assistance. Kansas Department of Health and Environment has the recovery responsibility to provide resource information and technical assistance for restoration of child care facilities and to evaluate needs and concerns relating to child care for survivors and responders including possible evacuees from other states. Kansas Department of Health and Environment has emergency disaster guidelines and specific guidance for child care facilities within a disaster area or facilities that are temporarily closed and then reopened following a disaster, which are included in the 2018 Kansas Child Care Disaster Plan.

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

All providers who receive CCDF funds are required to be licensed with the exception of a relative which Kansas has exempted from the health and safety requirements and one license exempt provider, Flint Hills Job Corps and neighboring out of state licensed providers. Flint Hills Job Corps has a memorandum of understanding with the Lead Agency and must meet or exceed all Kansas Department of Health and Environment licensing standards. Out of state licensed providers who enter into agreements with the Lead Agency

must meet the requirements as specified by their state licensing entity and must be a CCDF provider in that state. As indicated in the child care licensing program policy appendix item 5 in the 2018 Kansas Child Care Disaster Plan, all Kansas Department of Health and Environment licensed child care facilities are required to develop an emergency plan. The emergency plans address the types of emergencies likely to occur in or near the facility including a fire, weather related event, missing child, chemical release, utility failure, acts of violence/terrorism or other situations that might require evacuation, lock-down or shelter in place. The plans are required to have designated relocation sites and evaluation routes, procedures to meet the needs of individual children, including those with special health care or mobility needs and procedures for notifying parents and legal guardians of the relocation and for reunification. Child care licensing surveyors review emergency plans during the annual inspection and provide consultation and technical assistance to assist licensees in maintain compliance with the requirement. These guidelines address the regulated facilities that are within the disaster area or facilities temporarily closed and then re-opened following the disaster. All state agencies, including DCF, KDHE, and Kansas Division of Emergency Management, have developed agency wide continuation of operations plans. Kansas local Health Departments, which provide child care licensing services, also have continuity of operation plans developed. The Kansas Department for Children and Families has continuity of operations plans for Kansas DCF Administration site, ITS, and each of the four regions. Each individual DCF office also has a continuity of operation plan developed. To ensure continued access to the Kansas Benefits Card, which is used by child care subsidy providers to pay providers, the agency that KDCF contracts with also has a continuation of operation plan. KDHE's Child Care Licensing Program (KDHE-CCL) has long had a guidance policy for local health departments, child care and school-age programs and partners regarding the care of children and youth in facilities when their parents are absent, in the event of a community natural or environmental disaster.

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

Child care providers have access to resources concerning how to prepare for an emergency on the Kansas Department of Health and Environment's (KDHE) Child Care Licensing

Emergency Preparedness Planning page and the Child Care Aware of Kansas Emergency Preparedness toolkit is available on their website. These resource materials cover practice drills and training. Kansas Child Care Training Opportunities offers a course that is specifically about emergency preparations. This type of training is also available to child care providers from other entities across the state, such as Child Care Aware of Kansas. KDHE's policy states that the child care's emergency plan must be posted in a conspicuous place in the facility. The emergency plan should be shared with parents and legal guardians of each child enrolled. Each person caring for children, including each substitute, is to be informed of and shall follow the emergency plan. K.A.R. 28-4-128 Safety Procedures requires a fire drill to be conducted monthly and scheduled to allow participation by each child. Each date and time shall be recorded. It also requires a tornado drill to be conducted monthly, April through September, and scheduled to allow participation by each child. Each date and time shall be recorded. Each person regularly caring for children shall have first-aid training. Documentation of the training shall be on file at the facility. Emergency plans are monitored and addressed during Licensing surveys for licensed child care providers.

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

http://www.dcf.ks.gov/services/ees/Documents/Child_Care/StatewideCC-DisasterPlanCurrent.pdf

2 Promote Family Engagement through Outreach and Consumer Education

Lead Agencies are required to support the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A key purpose of the CCDBG Act is to 'promote involvement by parents and family members in the development of their children in child care settings' (658A(b)). Lead Agencies have the

opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care consumer education websites.

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

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

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

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

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

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

- Informational materials in non-English languages
- Website in non-English languages
- Lead Agency accepts applications at local community-based locations
- Bilingual caseworkers or translators available
- Bilingual outreach workers
- Partnerships with community-based organizations
- Other.

Describe:

The agency's workforce development contractor, Kansas Child Care Training Opportunities (KCCTO) provides coursework in Spanish, taught by a bi-lingual instructor. The agency's Kansas Early Head Start - Child Care Partnership grantees have translation services available and most have bilingual staff available. The KEHS grantees work with the Lead Agency to identify families in their service area that qualify for assistance.

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

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

Other.

Describe:

The Lead Agency's Kansas Early Head Start program works with the agency to identify families in their service areas that qualify for assistance, for program recruitment. KEHS must make 10% of their funded enrollment opportunities available for children with disabilities.

2.2 Parental Complaint Process

The Lead Agency must certify that the state/territory maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request (658E(c)(2)(C); 98.15(b)(3)). Lead Agencies must also provide a detailed description of the hotline or similar reporting process for parents to submit complaints about child care providers; the process for substantiating complaints; the manner in which the Lead Agency maintains a record of substantiated parental complaints; and ways that the Lead Agency makes information on such parental complaints available to the public on request (98.16; 98.32).

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

Complaints about licensed child care providers can be submitted to KDHE by calling 785-296-1270 or completing a complaint form on line at <http://www.kdheks.gov/bcclr/parents.htm>

Complaints of child abuse and neglect by child care providers also come in through the Protection Reporting Center (PRC) within DCF. Complaints may be provided on line or by calling 1-800-922-5330. For additional information, the PRC website can be found at:

<http://www.dcf.ks.gov/services/PPS/Pages/KIPS/KIPSWebIntake.aspx>

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

A complaint received regarding a licensed child care provider, regardless of subsidy status, is begun in 5 working days. A complaint investigation requires unannounced onsite inspections which includes a walk-through of the facility at each visit. Substantiations are specific to regulatory authority and are determined by observation, admission, recorded documentation or interviews with parents/guardians, staff or other involved or witnessing persons. Abuse neglect investigations within a child care facility are completed by the Department for Children and Families and coordinated with the Kansas Department of Health and Environment Child Care Licensing Unit.

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

Same as CCDF providers. A complaint received regarding a licensed child care provider, regardless of subsidy status, is begun in 5 working days. A complaint investigation requires unannounced onsite inspections which includes a walk-through of the facility at each visit. Substantiations are specific to regulatory authority and are determined by observation, admission, recorded documentation or interviews with parents/guardians, staff or other involved or witnessing persons. Abuse neglect investigations within a child care facility are completed by the Department for Children and Families and coordinated with the Kansas Department of Health and Environment Child Care Licensing Unit.

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

Through a Memorandum of Agreement (MOA) with KDHE, it is expected that KDHE will maintain a record of substantiated facility complaints, including parental complaints. The web-based Child Care Licensing System of Record, Childcare Licensing and Regulation System (CLARIS), includes:

The complaint module

Maintenance of records

A system which provides rebuttals or updates by providers.

A system which provides for confidentiality of the complainant

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

The information is made available to the public on written request, and is made available in accordance with the Kansas Open Records Act. Complaint findings are accessible to the public on the state agency website through the Online Information Dissemination System (OIDS). Complaint findings are kept on OIDS for three years, after those three years the information would need to be obtained through the Kansas Open Records Act.

The Provider Management System OIDS provides the public the ability to search KansasChild Care Provider information for compliance data. This information can be found on the KDHE website at <http://www.kdheks.gov/bcclr/capp.htm> and a link to this direct site can be found on the Kansas Quality Networksite at <http://ksqualitynetwork.org/provider/child-care-monitoring/>

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

<http://www.kdheks.gov/bcclr/parents.htm>(See The Complaint Inspection Process section)

2.3 Consumer Education Website

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

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

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

The Kansas Quality Network (KQN) was designed from the start to be consumer friendly for families, providers and community members. By categorizing the main site pages into these three groups, it is easy for consumers to self-select their entry point, and quickly find the resources they need. KQN is a mobile optimized website, allowing consumers to access information with mobile and desktop devices. It is a user-friendly website that is accessible to everyone including the disabled and families that speak languages other than English.

Website sections and categories were carefully planned and information presented so it will be easy for users to find. The website contractor, University of Kansas-Center for Public Partnerships and Research (KU-CPPR) worked with DCF staff to format headings, subheadings, and paragraphs to ensure well-formatted content. The website contractor

utilized a website platform that allows for effective navigation, using hoover-overs and drop-down menus, limiting site clutter and off site navigation. The websites color scheme is bright primary colors with a good contrast between background and text, which is legible and easy to read. To test the site's user friendly features, accessibility and resources provided, the QRIS Links to Quality teams reviewed the KQN, during a soft launch. L2Q team members were assigned scenarios (ex: teen mom looking for early childhood services and housing), and asked to document how effective their searches were, identifying missing links and making recommendations for improvements.

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

A Goggle Translate plugin has been added to the KQN website, which is the industry standard for language translation. With over 100 languages, Goggle Translate makes the website available to a wide variety of consumers. The Goggle Translate plugin will detect the default browser language and translate it automatically, or it will allow consumers to select their preferred language from a drop-down menu.

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

In compliance with the State of Kansas established accessibility standards (incorporating both federal Section 508 and World Wide Web consortium guidelines adopted by industry), the KQN website has been evaluated by the Accessibility Management Platform (AMP). This tool analyzes the accessibility of web services and content using state standards, identifying potential accessibility issues, which are then incorporated into a plan to ensure ongoing efforts to improve accessibility. The information has been designed to be converted to Braille, enlarged, or for synthetic speech via assistive technologies. This includes taglines for all photos for synthetic speech and the captioning of audio for the hearing impaired.

2.3.4 Lead Agency processes related to child care.

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

a) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6:

Licensing information may be found at: <http://ksqualitynetwork.org/provider/new-provider/>

Non exempt providers include the Flint Hills Job Corps which is under the direction of the US Dept of Labor. Their MOU with DCF specifies that they must have at least one unannounced inspection annually and must provide a copy of the full inspection for posting. Out of state licensed providers contracting with DCF must meet the requirements as specified by their state licensing entity and must be a CCDF provider in that state.

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

This information can be at <http://www.kdheks.gov/bcclr/regs.html> in the Day Care Homes and Group Day Care book on pages 2 and 8; Licensing Preschools and Child Care Centers book on pages 2 and 8; and Child Care Licensing Law book on pages 2 and 8. There is also a link to this same direct page at <http://ksqualitynetwork.org/laws-regulations/>

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

<http://www.kdheks.gov/bcclr/index.html>

2.3.5 List of providers

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

a) Provide the website link to the searchable list of child care providers:

<http://ksqualitynetwork.org/families/>

Child Care Aware of Kansas the Child Care Resource and Referral agency provides the public the ability to search Kansas Child Care Provider by zip code. This information can be found on the Child Care Aware of Kansas website at <https://stage.worklivesystems.com/parent/16> and a link to this direct site can be found on the Kansas Quality Network site at <http://ksqualitynetwork.org/families/>. To assist us in following up with families who utilize these services and encouraging access for only those with a true need for child care, we ask families to create an account and log-in to search for child care. As part of consumer education with the understanding that not everyone has consistent internet access or an email address we have included a toll-free phone number to allow for consumer friendly and easy access to this same information, without the requirement to set up an account or have an email.

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

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

Describe

On the Kansas Quality Networks website, there is a section where parents may

findout more about child care provider inspections. Within that section, there is an explanation that some child care programs in Kansas operate under the jurisdiction of the federal government or Native American tribes and the programs have an established memorandum of agreement with DCF that assures they meet licensing requirements. The parents may search the inspection reports for these license-exempt providers. Kansas currently has only one provider listed, but all license-exempt center-based or family child care providers that enroll with DCF will have their inspection reports listed and available to the public at <http://ksqualitynetwork.org/provider/child-care-monitoring/>

c) Identify what informational elements, if any, are available in the searchable results.
Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

Licensed Providers

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

Describe:

Whether or not they have a DCF agreement, days and times care is available. Additional information may be provided at the discretion of the program, such as a message to families, websites, email addressed, opening information, additional program information, credentials and education, rates, year schedule, and special needs experience.

License-Exempt, non-CCDF Providers

- Contact Information
- Enrollment Capacity

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

Describe:

License-Exempt CCDF Center Based Providers

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

Describe:

License-Exempt CCDF Family Child Care

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

Describe:

Relative CCDF Providers

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

Describe:

Other.

Describe:

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

Describe:

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

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

- Quality rating and improvement system
- National accreditation
- Enhanced licensing system
- Meeting Head Start/Early Head Start requirements
- Meeting prekindergarten quality requirements
- School-age standards, where applicable
- Other.

Describe

Providers have the option to put their credentials on the website.

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

- Licensed CCDF providers.

Describe the quality information:

Providers have the option to put their credentials on the website.

- Licensed non-CCDF providers.

Describe the quality information:

Providers have the option to put their credentials on the website.

- License-exempt center-based CCDF providers.

Describe the quality information:

- License-exempt FCC CCDF providers.

Describe the quality information:

- License-exempt non-CCDF providers.

Describe the quality information:

- Relative child care providers.

Describe the quality information:

Other.

Describe

Links 2 Quality, the state QRIS began with a pilot in April 2018 in 5 peer learning communities. Completed links for meeting quality indicators will not be published during the 2 year pilot.

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

Certify by responding to the questions below:

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

The documents are written in a way where the ideas are conveyed with the greatest possible clarity and the information is easily understood. There is a clear description of the violation. We consider this plain language. On the page where a person would search for the inspection results, contact information is available where they can provide feedback on the inspection report. KDHE has never received any public feedback indicating that these inspection reports are not understandable despite the large number of people who access and use the reports.

Inspection reports provided on the Kansas Quality Network (KQN) website for licensed

exempt providers with agreements with the Department for Children and Families to receive child care subsidy are also written in a way that is easy to understand. Questions and concerns on materials presented on the KQN website may be submitted by email through the KQN home page.

b) Are monitoring and inspection reports in plain language?

If yes,

include a website link to a sample monitoring report.

http://www.kdheks.gov/bccdr/download/Child_Care_Facility_Report.pdf and the licensed exempt providers with DCF agreements are located at <http://ksqualitynetwork.org/provider/child-care-monitoring/>

If no,

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

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

Date of inspection

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

Describe how these health and safety violations are prominently displayed.

Inspection reports indicate the statute and/or regulation requirement and a description of the violation cited. Reports will show an Emergency Order of Suspension enforcement but would not show the death. If revoked, the provider no longer has a valid license, and it will no longer show anything regarding the provider.

The licensed exempt providers with DCF agreements inspection reports clearly show the date of the inspection and required action if warranted. The inspection clearly indicates any health or safety violations. All critical items that are found to have issues on the inspection report require an immediate corrective action plan by the provider.

[Corrective action plans taken by the State and/or child care provider.](#)

[Describe](#)

Child Care Providers are required to correct non-compliance that was cited during an inspection within 5 days of the inspection date. Noncompliance cited during an onsite survey that is deemed low or mid-level risk of harm to children may require a statement of Notice of Survey Findings Corrections, which is an internal means to document steps taken by the licensee to obtain and maintain compliance. A Corrective Action Plan, CAP, procedure was implemented on September 30, 2019 and is a provider's statement of correction to noncompliance deemed significant and adverse. A CAP may be requested for any survey type; initial, annual, compliance or complaint, and is requested during the exit review. The provider is instructed to return the CAP to KDHE within 15 days. When the CAP is received at KDHE it is uploaded to the system of record, CLARIS, and will post on the public portal when the survey closes, and the notice of survey findings can be viewed. The public portal view will indicate that a CAP was not required, not received or will display a view link if the CAP has been uploaded. *This is a provider's statement and is not considered verification of compliance.*

Failure to obtain and/or maintain compliance may result in a request for a KDHE legal enforcement of a civil penalty, modification, suspension or revocation of the license. Administrative Orders issued and effective are viewable on the public portal within the facility page. Administrative Orders that have been appealed do not show on the portal until the appeal is resolved. A closed facility's information is not made available on the public portal but may be requested through open records.

A health and safety violation by the licensed exempt provider may result in a corrective action plan with DCF and could lead to a discontinuation of the agreement with the provider.

[d\) The process for correcting inaccuracies in reports.](#)

Licensed providers may request an administrative review of the inspection results within 15 days of the completed inspection. The results are removed from the website until the review is complete and, if necessary, corrections have been made.

Licensed exempt providers who have an agreement with DCF review the content of the inspection report and sign off that they agree with the contents and understand it at the time of the inspection. Inaccuracies and a provider's right to appeal any findings are between the licensed exempt provider and their governing body completing the inspection. A copy of the document is provided for posting as agreed upon per their Memorandum of Understanding with DCF.

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

A child care provider may request an administrative review of the findings within 15 days of the survey. When a request for review has been received, the findings are pulled off the website until the review is completed. An administrative review must be completed within 30 days.

Licensed exempt providers who have an agreement with DCF review the content of the inspection report and sign off that they agree with the contents and understand it at the time of the inspection. Inaccuracies and a provider's right to appeal any findings are between the licensed exempt provider and their governing body completing the inspection. A copy of the document is provided for posting as agreed upon per their Memorandum of Understanding with DCF.

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

Reports are posted after the survey has been closed out by KDHE staff. Surveys with substantial compliance are closed within 5 business days and post automatically through the Online Information Dissemination System, (OIDS). Surveys with substantial non-compliance are reviewed by a program consultant within 45 days of survey completion and post automatically when review has been completed.

Licensed exempt providers with a DCF agreement must agree to provide their yearly

inspection at the time of each annual renewal of the DCF agreement with any corrective action plans that resulted from the inspection.

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

Three years of inspection results are available on the provider search page through the Online Dissemination Portal. Reports are available on the portal for 5 years and then continue to be available through open records. Records are at no time removed from the electronic system of records used by KDHE Child Care Licensing.

Licensed exempt providers with DCF agreements will have reports available on the website for five years beginning with the first year of the agreement.

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

License-exempt non-CCDF providers

Relative child care providers

Other.

Describe

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

Certify by providing:

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

Child Care Providers shall report any injury or illness which results in the death of a child in care by the next working day to the county health department or the Kansas Department of Health and Environment. KDHE CCL reports to DCF the number of deaths and serious injuries by provider type. Substantiated abuse determinations are made by DCF Prevention and Protection Services (PPS). A "substantiated" finding means a reasonable person weighing the facts and circumstances would decide it is more likely than not (preponderance of the evidence) the alleged perpetrator's actions or inactions meet the abuse/ neglect definition per Kansas Statutes Annotated (K.S.A.) and Kansas Administrative Regulations (K.A.R.), and meet criteria indicating the alleged perpetrator should not be permitted to reside, work, or regularly volunteer in a child care facility regulated by KDHE or DCF Foster Care and Residential Facility Licensing.

Licensed exempt providers with a DCF agreement are required to follow the state's licensing standards based upon the MOA with DCF that requires Kansas licensing regulations and standards to be adhered to. This includes the reporting of serious injuries or deaths, therefore their numbers will be reflected with the aggregate data.

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

Substantiated abuse determinations are made by DCF PPS. A "substantiated" finding means a reasonable person weighing the facts and circumstances would decide it is more likely than not (preponderance of the evidence) the alleged perpetrator's actions or inactions meet the abuse/ neglect definition per Kansas Statutes Annotated (K.S.A.) and Kansas Administrative Regulations (K.A.R.), and meet criteria indicating the alleged perpetrator should not be permitted to reside, work, or regularly volunteer in a child care facility regulated by KDHE or DCF Foster Care and Residential Facility Licensing.

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

A serious injury is defined as an injury requiring medical attention.

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

<http://ksqualitynetwork.org/community/>

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

All applicants for child care assistance are provided with a link or a paper copy of the Parent-Provider Partnership Handbook. As of October 1, 2018 the handbook will include the web address for the Kansas Quality Network (KQN), our consumer education website. On the website, there is a section for families that directs them to the Child Care Aware of Kansas website for help in locating a child care provider. <http://ksqualitynetwork.org/resources/find-provider/#find-provider> (the Child Care Aware of Kansas Link)

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

<http://ksqualitynetwork.org/>(at bottom of page “for questions about KQN”)

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

<http://ksqualitynetwork.org/>

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

NA

2.4 Additional Consumer and Provider Education

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

In questions 2.4.1 through 2.4.5, certify by describing:

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

DCF provides information to the public in a variety of ways. DCF has a public website with services offered through the state, agency information and contact information. A wide range of early education programs are listed under the child care service page. The child care subsidy page provides information about the program, basic eligibility guidelines, types of providers available for the program, and contact information. A self-assessment is

available to screen for eligibility and online applications are available. Applications for services are made available through the 38 DCF office locations across the state. DCF also has a Facebook page, Twitter page, and shares videos on Vimeo. The Kansas Quality Network website also provides links to this information. It is the main tool DCF uses to provide child care related consumer and provider education information to parents, providers and the public. The Kansas Quality Network is designed to be user friendly and easy to follow. There are separate sections designed for families where they can find child care and support, for providers with resources to enhance care, and for the community in general. The KDHE Child Care Licensing Parent Page provides a consumer-friendly approach to answering parent's questions regarding child care. This includes a spot for search for Child Care that takes them to Child Care Aware. Consumers can search by zip code or connect to child care connection. Kansas Quality Network (KQN) links directly to the Child Care Aware search. 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. The 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 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. As of October 1, 2018, the Kansas Quality Network web address is shared with eligible parents on their approval notices. The Parent Provider Partnership Handbook is shared with all parents applying for child care assistance. The handbook is available in both English and Spanish. The phone number for the local resource and referral agency is shared with eligible families when they need assistance selecting a provider.

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

DCF partners with Child Care Aware of Kansas and KDHE to provide information about available services and/or links to information on the websites of each of the three agencies. KQN incorporates the three sites and more making a one stop family friendly website.

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

Temporary Assistance for Needy Families program:

Lead Agency developed the Kansas Quality Network (KQN) website <http://ksqualitynetwork.org/> to link and organize resources available to families, child care providers and the public across the State of Kansas. The KQN includes resource links for families under the Family Support Resources at <http://ksqualitynetwork.org/resources/family-support/#emergency>, the KQN provides a link to the Lead Agency's website <http://www.dcf.ks.gov/services/ees/Pages/Cash/TANF.aspx>. The TANF webpage includes information regarding program overview, cash assistance payments, in addition to employment services and employment. The lead agency contracts with Child Care Aware of Kansas (CCAK) for Resource and Referral and Consumer Education services. CCAK provides resources and helpful links to TANF information at <http://www.ks.childcareaware.org/for-parents-families/links/#>

Head Start and Early Head Start programs:

Lead Agency developed the Kansas Quality Network (KQN) website <http://ksqualitynetwork.org/> to link and organize resources available to families, child care providers and the public across the State of Kansas. The KQN includes resource links to Head Start and Early Head Start programs <http://ksqualitynetwork.org/resources/family-support/#cc-assistance> . The KQN provides a link the Kansas Head Start Associations searchable map for EHS/HS service providers in individual counties <http://www.ksheadstart.org/locations/>. The lead agency contracts with Child Care Aware of Kansas (CCAK) for Resource and Referral and Consumer Education services. CCAK connects with Head Start <http://www.ksheadstart.org/> information via their webpage <http://www.ks.childcareaware.org/for-parents-families/links/#> .

Low Income Home Energy Assistance Program (LIHEAP):

Lead Agency developed the Kansas Quality Network (KQN) website <http://ksqualitynetwork.org/> to link and organize resources available to families, child care providers and the public across the State of Kansas. The KQN includes resource links to LIHEAP under the Family Support Resources at <http://ksqualitynetwork.org/resources/family-support/#emergency> . The KQN provides a link to the Lead Agency's website <http://www.dcf.ks.gov/services/ees/Pages/Energy/EnergyAssistance.aspx> for families to access LIHEAP frequently asked questions, application (English and Spanish) and Income Eligibility Guidelines. As the Lead Agency for LIHEAP, the program mails applications directly to all the prior year recipients; issues a press release at the start of the season; mails supplies of applications and informational posters to helping agencies and utilities around the state; in addition to posting information on the DCF website which includes eligibility guidelines, links to on-line and paper applications. The lead agency contracts with Child Care Aware of Kansas (CCAK) for Resource and Referral and Consumer Education services. CCAK provides resources and helpful links to LIHEAP information at <http://www.ks.childcareaware.org/for-parents-families/links/#>

Supplemental Nutrition Assistance Programs (SNAP) Program:

Lead Agency developed the Kansas Quality Network (KQN) website <http://ksqualitynetwork.org/> to link and organize resources available to families, child care providers and the public across the State of Kansas. The KQN includes resource links to SNAP under the Family Support Resources at <http://ksqualitynetwork.org/resources/family-support/#emergency> . The KQN provides a link to <http://www.dcf.ks.gov/services/ees/Pages/Food/FoodAssistance.aspx> . The Lead Agency webpage includes a program overview, frequently asked questions, food assistance special provisions, food assistance brochures, Food Assistance nutrition education, and related link to other helping agencies for food assistance. The lead agency contracts with Child Care Aware of Kansas (CCAK) for Resource and Referral and Consumer Education services. CCAK provides resources and helpful links to SNAP information at <http://www.ks.childcareaware.org/for-parents-families/links/#>

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

Lead Agency developed the Kansas Quality Network (KQN) website <http://ksqualitynetwork.org/> to link and organize resources available to families, child care providers and to the public across the State of Kansas. The KQN includes resource links to WIC under the Family Support Resources at <http://ksqualitynetwork.org/resources/family-support/#emergency>. The KQN provides a link to the Kansas Department of Health and Environment's Kansas WIC Program at <http://www.kansaswic.org/>. The Kansas WIC page includes information regarding WIC services, nutrition, local WIC agencies, WIC vendors, WIC approved food, breastfeeding, rights and responsibilities (available in Spanish), and the Kansas WIC client portal. The lead agency contracts with Child Care Aware of Kansas (CCAK) for Resource and Referral and Consumer Education services. CCAK provides resources and helpful links to WIC information at <http://www.ks.childcareaware.org/for-parents-families/links/#>.

Child and Adult Care Food Program(CACFP):

Lead Agency developed the Kansas Quality Network (KQN) website <http://ksqualitynetwork.org/> to link and organize resources available to families, child care providers and to the public across the State of Kansas. The KQN includes resources links to CACFP <http://ksqualitynetwork.org/resources/>. The KQN links to the Child & Adult Care Food Program (CACFP) - Child Nutrition & Wellness program a program housed in the Kansas Department of Education (KSDE) at http://www.kn-eat.org/cacfp/cacfp_menus/cacfp_home.htm. The CACFP webpage provides a program overview, eligible meals, types of agencies eligible to participate, required participants, reimbursement determination, and additional CACFP resources. The lead agency contracts with Child Care Aware of Kansas (CCAK) for Resource and Referral and Consumer Education services. CCAK provides resources and helpful links to CACFP information at <http://www.ks.childcareaware.org/for-child-care-early-education-staff/helpful-info-resources/>.

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

Lead Agency developed the Kansas Quality Network (KQN) website <http://ksqualitynetwork.org/> to link and organize resources available to families, child care providers and to the public across the State of Kansas. The KQN includes

resource links to Kansas medical resources via <http://ksqualitynetwork.org/resources/family-support/#health-care>. The KQN links to the KanCare "Medical Consumer Self-Service Portal" webpage at <http://cssp.kees.ks.gov/apsspss/>. KanCare offers coverage for: children, pregnant women, families with children, elderly, adults with disabilities, and children with disabilities. It includes office locations, program information, frequently asked questions, and reporting requirements. Users are able to check eligibility, apply for medical assistance and access their "my KanCare" account. The lead agency contracts with Child Care Aware of Kansas (CCAK) for Resource and Referral and Consumer Education services. CCAK provides resources and helpful links to KanCare information at <http://www.ks.childcareaware.org/for-parents-families/links/#>.

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

Lead Agency developed the Kansas Quality Network (KQN) website <http://ksqualitynetwork.org/> to link and organize resources available to families, child care providers and to the public across the State of Kansas. The KQN <http://ksqualitynetwork.org/> includes resource links to various early childhood education resources via <http://ksqualitynetwork.org/resources/>. The KQN provides links to the Department for Health and Environment's (KDHE) Kansas Infant-Toddler Services <http://www.ksits.org/>, and the Kansas Department of Education - Early Childhood Special Education (Section 619 of Part B of IDEA) at <http://www.ksde.org/Agency/Division-of-Learning-Services/Early-Childhood-Special-Education-and-Title-Services/Early-Childhood/Special-Education-Early-Childhood>. Additional resources regarding children with special needs include: the Kansas Coordinating Council on Early Childhood Development Services <http://www.kansasicc.org/> - more commonly known as the State Interagency Coordinating Council which is responsible for advising and assisting the Kansas Governor and legislature on matters that impact Kansas families, with children ages birth to five who have or are at risk for developmental delays; KDHE'S Special Health Care Needs one-time diagnostic services at http://www.kansasicc.org/uploads/2/8/9/9/28999325/kdhe_shcn_brochure.pdf; and the Kansas Parent Information Resource Center at <http://ksdetasn.org/kpirc/kansas-parent-information-resource-center>. The lead agency contracts with Child Care Aware of Kansas (CCAK) for Resource and Referral and Consumer Education services. CCAK provides resources and helpful links to Infant and Toddler Services information

at <http://www.ks.childcareaware.org/for-parents-families/links/#> CCAK has additional resources at the <http://www.ks.childcareaware.org/for-parents-families/links/#> page including: Families Together Inc. <http://famielsttogetherinc.org/> ; and Kansas Initiative for Developmental Ongoing Screening (KIDOS) <http://www.kdheks.gov/c-f/kidos.htm> and <http://screenearlystartstrong.org/>.

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

Parents, providers and the community can access this information and resources on these topics through the Kansas Quality Network (KQN) website at <http://ksqualitynetwork.org/> and through the state resource and referral network Child Care Aware of Kansas, website at <http://www.ks.childcareaware.org/> . KQN has a wealth of resources for families, providers and those new to child care to access at <http://ksqualitynetwork.org/resources/> . Resources include, yet are not limited to: Kansas Enrichment Network – a collaboration of agencies and organizations in Kansas that help build and expand school-based programs to enhance learning opportunities for students, <http://kansasenrichment.net/map-of-programs-in-kansas/> , and share enrichment activities <http://kansasenrichment.net/pinterest/> ; Vroom! - Provides parents and educators with free online tools and activities that are designed to boost early learning in children 0-5, <https://www.vroom.org/> ; and the Kansas Early Learning Standards(KELS) – provides a framework for understanding and communicating a common set of developmentally appropriate guidelines for young children within a context of shared responsibility and accountability for helping children meet these guidelines, the KELS toolkit <http://kskits.org/kels-toolkit>. The Kansas Early Learning Standards and the toolkit are available to all parents on Kansas Quality Network. The Kansas Early Learning Standards contain information on the developmental sequence of learning for children from birth through Kindergarten in areas of approaches to learning, physical development, social and emotional development, communication and literacy, mathematics, science, social studies, and creative arts. Physical development does include healthy eating and physical activities.

The lead agency contracts with Child Care Aware of Kansas(CCAK) to administer the statewide Child Care Resource and Referral (CCR&R) network in Kansas. CCAK provides resources for parents/families, child care / education staff, as well as businesses and communities.

2.4.5 Describe how information on the Lead Agency's policies regarding the social-emotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include what information is provided, how the information is provided, and how information is tailored to a variety of audiences and include any partners in providing this information.

Parents, providers and the community can access this information and resources on these topics through the Kansas Quality Network (KQN) website at <http://ksqualitynetwork.org/> and through the state resource and referral network Child Care Aware of Kansas, website at <http://www.ks.childcareaware.org/>. Parents applying for CCDF benefits are also given a copy of or referred to the website for The Parent-Provider Partnership Handbook. This information is also given to Providers in the DCF Child Care Provider Handbook which all providers acknowledge they have received and reviewed when applying to be a CCDF ChildCare Provider. Both handbooks are available on the KQN. KQN has a wealth of resources for families and providers at <http://ksqualitynetwork.org/resources/> . Resources include, yet are not limited to: Kansas Enrichment Network – a collaboration of agencies and organizations in Kansas that help build and expand school-based programs to enhance learning opportunities for students, <http://kansasenrichment.net/map-of-programs-in-kansas/> , and share enrichment activities <http://kansasenrichment.net/pinterest/> ; Vroom! - Provides parents and educators with free online tools and activities that are designed to boost early learning in children 0-5, <https://www.vroom.org/> ; and the Kansas Early Learning Standards(KELS) – provides a framework for understanding and communicating a common set of developmentally appropriate guidelines for young children within a context of shared responsibility and accountability for helping children meet these guidelines, the KELS toolkit <http://kskits.org/kels-toolkit>. The Kansas Early Learning Standards and the toolkit are available to all parents on Kansas Quality Network. The Kansas Early Learning Standards

contain information on the developmental sequence of learning for children from birth through Kindergarten in areas of approaches to learning, physical development, social and emotional development, communication and literacy, mathematics, science, social studies, and creative arts. Social and emotional development includes positive interactions to help children gain competence in social skills and self-regulation. The lead agency contracts with Child Care Aware of Kansas(CCAK) to administer the statewide Child Care Resource and Referral (CCR&R) network in Kansas. CCAK provides resources for parents/families, child care / education staff, as well as business and community.

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

Child Care Providers who have an agreement with DCF to accept child care subsidy are required to have a policy to prevent the suspension and expulsion of children in their care. DCF's requirement for provider policy and resource information on Behavior Guidance Policies can be found in the DCF Provider Handbook and in The Parent-Provider Partnership Handbook. Both Handbooks can be found on the KQN website. Expulsion policies are also discussed in the DCF Provider Handbook.

http://www.dcf.ks.gov/services/ees/Pages/Child_Care/ChildCareProviders.aspx This policy states: "In a child care setting, expulsion may refer to removing a child from of a program for challenging behaviors, such as aggression, tantrums and non-compliance. Research shows that children expelled from an early learning setting are more likely to have issues later in life. Providers are expected to establish preventive, disciplinary, suspension and expulsion policies and administer those policies free of bias and discrimination. Providers should focus on positive interventions that will prevent expulsion, suspension and other negative discipline policies. Trainings are available on this topic. Contact your local CCR&R or KCCTO (see page 6) for further information."

2.5 Procedures for Providing Information on Developmental Screenings

Lead Agencies are required to provide information on developmental screenings, including information on resources and services that the State can deploy, such as the use of the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C, in conducting those developmental screenings and in providing referrals to services for children who receive subsidies. Lead Agencies must also include a description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)).

2.5.1 Certify by describing:

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

Information on existing resources and services available for conducting developmental screenings is disseminated to families, the general public and child care providers through the Kansas Quality Network (KQN) at <http://ksqualitynetwork.org/resources/child-development/#screening>. The Kansas Department for Children and Families (DCF) partnered with the University of Kansas Center for Research to design, develop and support the Kansas Quality Network work and provide for necessary resources through the continued development and maintenance of the Kansas Quality Network(KQN). DCF KQN project staff work closely with KQN partners to jointly collect current information and maintain the KQN website.

Families as they are reaching out for assistance with the child care resource and referral agency may also be looking for other resource along with child care. When a parent calls the Resource and Referral Center they receive a child care referral list and a Referral

Packet. This informational packet includes additional consumer education materials. These materials include: checklist and brochure on how to start and choose quality care; parent and community resources for their location; and also child developmental resources. The community resource information contains contact information for mental health services and developmental screening services, as well as, many other helpful resources within their local community. In addition to these consumer education materials, Resource Specialists distribute specific materials based on what a family's needs are from their conversation with them. A few examples of consumer education materials include DCF child care assistance, Head Start information, KanCare (Medicaid) information, Kindergarten Transitions and SIDS.

In the Learning and Development link of Links to Quality (QRIS) providers are asked to identify available screening resources within their communities and have a written policy and process for referring children for screenings. Some of the resources for families can be found in handouts, flyers, letters, enrollment packets, and information passed on from local Part C programs, public schools and health departments. The policy and process for health and developmental screenings should be in their staff and family handbooks. Within this link, providers are asked to communicate and provide a developmental milestones checklist with families close to milestone dates.

b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program - carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) - and developmental screening services available under Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.). Information about available resources for screenings, diagnosis and treatment is available to families and child care providers on the Kansas Quality Network website. Information about the website has been posted on agency social media accounts. The Kansas Quality Network web address is shared with eligible parent on their approval notices. A link to the Parent Provider Partnership Handbook is shared with all families applying for child care assistance, and the handbook contains the website address of the Kansas Quality Network. As of October 1, 2018 the KQN website address is included in the DCF Child Care Provider Handbook.

http://www.dcf.ks.gov/services/ees/Pages/Child_Care/ChildCareProviders.aspx

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

Families applying for child care assistance are provided with a link to the Parent Provider Partnership handbook, which as of October 1, 2018 contains a link to the Kansas Quality Network. Information about developmental screenings is included on that website.

Families referred to Child Care Aware of Kansas may also receive information from their Resource and Referral/Consumer Education Agency.

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

Families applying for child care assistance are provided with a link to the Parent Provider Partnership handbook, which contains a link to the Kansas Quality Network. Information about developmental screenings is included on that website. Families referred to Child Care Aware of Kansas may also receive information from their Resource and Referral/Consumer Education Agency.

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

DCF contracts with Kansas Child Care Training Opportunities (KCCTO) to provide trainings on a variety of topics. Several trainings are available to providers on this topic. KCCTO sends out emails and advertises the courses on-line. Child Care Aware of Kansas also offers a variety of classes for Child Care Providers. They send out emails and advertise on-line also. Licensing surveyors refer providers and applicants to their local Resource and Referral/Consumer Education Agency and the R&R contact information is made available on the KDHE webpage. This information has also been incorporated within the Links to Quality Program and will be provided to participating child care providers.

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

KEESM 1213.9 Requires the Parent Provider Partnership Handbook be provided to applicants.

2.6 Consumer Statement for Parents Receiving CCDF Funds

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

2.6.1 Certify by describing:

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

Eligible families are provided with a consumer statement by providing an electronic link to the Kansas Quality Network (KQN) website. This site links to the Online Information Dissemination System (OIDS), which contains information about the child care provider selected when they search for the provider, including health and safety requirements met by the provider, licensing requirements met by the provider, the date the provider was last inspected, history of licensing violations, complaint surveys, and any additional accreditations met by the provider. The KQN website also includes links to information about how DCF child care benefits are designed to promote equal access, how a parent can submit a complaint, and how to contact the local resource and referral agency. It also contains information about how the parent may contact child care licensing or DCF service centers to address any questions they may have.

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

Effective October 1, 2018 the statement is provided to families via an electronic link to the Kansas Quality Network website in their approval notices, and Kansas Quality Network provides the consumer with access to Online Information Dissemination System (OIDS), which contains information about the child care provider selected when they search for the provider, including health and safety requirements met by the provider, licensing requirements met by the provider, the date the provider was last inspected, history of licensing violations, complaint surveys and any additional accreditations met by the provider. The KQN website also includes links to information about how DCF child care benefits are designed to promote equal access, how a parent can submit a complaint, and how to contact the local resource and referral agency. It also contains information about how the parent may contact child care licensing or DCF service centers to address any questions they may have.

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

The Kansas Quality Network (KQN) assists families by providing consumer education information and by taking them directly to the Kansas Department of Health Environment's Online Information Dissemination System (OIDS). OIDS contains information about the child care provider selected when they search for the provider, including health and safety requirements met by the provider, licensing requirements met by the provider, the date the provider was last inspected, history of licensing violations, complaint surveys and any additional accreditations met by the provider.

http://www.kdheks.gov/bcclr/download/Child_Care_Facility_Report.pdf

3 Provide Stable Child Care Financial Assistance to Families

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

graduated phase-out of assistance. Also, procedures for the enrollment of homeless children and children in foster care, if served, pending the completion of documentation, are required.

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

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

3.1 Eligible Children and Families

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

3.1.1 Eligibility criteria based on a child's age

a) The CCDF program serves children

from 0

(weeks/months/years)

through 12

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

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

- No
 Yes,

and the upper age is 18

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity: The child must be physically or mentally incapable of caring for him or herself (as established by a qualified professional), or under court supervision.

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

- No.
 Yes

and the upper age is 18

(may not equal or exceed age 19)

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

"residing with":

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).

"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 of a parent.

3.1.2 Eligibility criteria based on reason for care

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

"Working":

- 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 when they need child care to maintain their employment and they must be earning at least the federal minimum wage per hour.

"Job training":

Job training may include:

- 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
- 4) Training necessary to maintain or enhance current employment and/or increase earning potential

"Education":

For agency approval of a education/training plan, the following criteria must be met:

- It must be expected to lead to a degree or certificate.
- The plan must be expected to be completed within 24 months, with a goal of employment in their field.
- The plan must not be for a second associate's degree or second bachelor's degree, and not for a degree higher than bachelors.
- The education/training must be skill specific and/or create greater earning potential for the client upon completion.
- The plan must not include months beyond the client's lifetime maximum of 24 month of child care allowed for educational purposes.
- The occupation being pursued must have at least an average job outlook listed in the Occupational Outlook Handbook on the website of the US Department of Labor, Bureau of Labor Statistics. Specific exceptions can be made with supervisory

approval.

Client must also be engaged in paid employment for a minimum of 15 hours per week, and must be earning the equivalent of the federal minimum wage per hour. Client must maintain a 2.0 cumulative GPA on a 4.0 scale or its equivalent in another grading system.

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

Attending job training or education is defined as participating in an agency approved post-secondary education or training plan that meets the following criteria:

- It must be expected to lead to a degree or certificate.
- The plan must be expected to be completed within 24 months, with a goal of employment in their field.
- The plan must not be for a second associate's degree or second bachelor's degree, and not for a degree higher than bachelors.
- The education/training must be skill specific and/or create greater earning potential for the client upon completion.
- The plan must not include months beyond the client's lifetime maximum of 24 months of child care allowed for educational purposes.
- The occupation being pursued must have at least an average job outlook listed in the Occupational Outlook Handbook on the website of the US Department of Labor, Bureau of Labor Statistics. Specific exceptions can be made with supervisory approval.

Client must also be engaged in paid employment for a minimum of 15 hours per week, and must be earning the equivalent of the federal minimum wage per hour. Client must maintain a 2.0 cumulative GPA on a 4.0 scale or its equivalent in another grading system.

3.1.2 Eligibility criteria based on reason for care

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

No.

If no, describe the additional work requirements:

Post-secondary students must be employed a minimum of 15 hours per week and

earning at least the federal minimum wage per hour.

Yes.

If yes, describe the policy or procedure:

3.1.2 Eligibility criteria based on reason for care

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

No.

Yes.

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

3.1.2 Eligibility criteria based on reason for care

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

No.

Yes. If yes:

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

Child Care benefits may be provided to protect children who cannot protect themselves from abuse, neglect and exploitation, to enable a child to remain in the home while the parent(s) work toward rehabilitation or when the child is at risk of a health or social condition which may adversely affect the child. The social service child care reason is used for this purpose and may include:

1. "Parents with Crisis":

a. Parent hospitalized or otherwise temporarily unable to provide adequate care for the child. This could be inpatient or outpatient, for physical health, mental health or substance abuse treatment. There is no other adult to care for the child.

b. Family in the process of DCF Intake and Assessment through Prevention and Protection Services (PPS).

c. Family receiving services through a family preservation contractor or DCF PPS

Social Worker.

2. Juvenile offenders in the custody of the Kansas Department of Corrections - Juvenile Services when the foster parent is employed and needs child care.

3. Children in Foster Care who are in the custody of the Secretary of DCF who have been placed with a relative or non-related kin not licensed for Foster Care.

This does not include foster children placed in a licensed foster home, as child care for those children is provided by the state's foster care contractors.

4. Children whose caretaker has placed them with a "Safe Families for Children" host family due to a family crisis, thereby avoiding placement of the children in Foster Care. These children are not in Foster Care. Child care for these children must be needed due to the employment or education/training of the adults in the "Safe Families for Children" host family.

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

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

No

Yes

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

No

Yes

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

No

Yes

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

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

Income includes money received from such sources as wages, self-employment, property rentals, pensions, benefits and contributions. Kansas divides income into two types: earned and unearned income. Earned income is income which is received as wages, salary, or profit resulting from the performance of services, including managerial responsibilities, by the family. Unearned income is any income that is not earned and may be derived from benefits (unemployment compensation, Social Security, VA, etc.), pensions, contributions, and settlements. There are no income deductions used in determining eligibility for child care services.

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

	(a)	(b)	(c)	(d)
Family Size	100% of SMI(\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	\$3,421	\$2,908	N/A	N/A
2	\$4,474	\$3,803	\$2,538	57%
3	\$5,527	\$4,698	\$3,204	58%
4	\$6,580	\$5,593	\$3,870	59%
5	\$7,632	\$6,487	\$4,536	59%

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

N/A

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

d) SMI source and year. 2017 Federal Register

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

Income limits are statewide.

f) What was the date (mm/dd/yyyy) that these eligibility limits in column (c) became effective? 05/01/2018

g) Provide the citation or link, if available, for the income eligibility limits. KEESM Appendix Item F-1

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

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

Families are required to list assets on the Child Care assistance application. Eligibility workers determine if countable assets exceed Kansas maximum allowable limit of \$10,000.

The equity in nonexempt resources is used to determine the value. The value is established by objective measurements. Resources are not counted or considered available unless the individual has a legal interest and the legal ability to make the resource available. Ownership of property is determined by a legal title. All non-liquid assets with a lien as the result of a business loan are excluded. The home and

surrounding property that an individual lives in or is temporarily absent is exempt without regard to its value. Income producing property and property essential to employment are exempt in full. Most burial funds, burial spaces, funeral agreements, home consumption items, home sale proceeds when expended within 3 months, household goods, IDAs, insurance, educational savings plans, pension plans, personal effects, tools are exempt as resources. One vehicle per adult in household is exempt, as well as, additional vehicles when they are used for employment, are income producing, used as the household's home, used to transport physically disabled household members, used to care fuel for heating or water or any that have a value of \$1,500 or less. Certain trust are also exempt as a resource.

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

No.

Yes.

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

KEESM 5140 states that the resource limit is waived for families in which at least one person receives TANF, families receiving Food Assistance when at least one adult is participating in the Food Assistance Education and Training program, as well as for families receiving child care for a qualified social service reason or participating in the Kansas Early Head Start/Child Care Partnership program. Families defined as receiving or in need of protective services are those receiving child care for a qualified social service reason.

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

Although priority rules exist for eligibility determination in the event of a wait list, Kansas currently provides child care for all families who apply and meet financial and non-financial eligibility criteria. Priority areas include: 1) Families participating in Work Programs who are receiving TANF or food assistance, and Tribal recipients; 2) Families receiving child care for a qualified Social Service reason; 3) Families no longer eligible for TANF transitioning to employment whose income is at or below -185%- of the federal poverty level; 4) Teen parents completing high school/GED; 5) Families who claim to be homeless (self-declaration is accepted) and need child care to maintain employment or participate in an approved educational plan; and 6) Employed families whose income is at or below 185% of the federal poverty level.

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

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

Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities

Other.

Describe:

Child care policy specifically states that child care and family plans are developed on a case-by-case basis depending on the needs of the parent and the child. The child care assistance program is partnering with Kansas Early Head Start to provide child care for families participating in the Kansas Early Head Start Child Care Partnership Program, serving families with children with multiple risk factors and accommodating the parents' work schedules as well as time needed to work on those other risk factors. To accomplish this, child care benefits for these families are authorized in blocks of time rather than specific hours of care needed. Licensed Head Start and Kansas Pre-School Programs may enter into an agreement with DCF to provide wrap around care for families eligible for child care subsidy.

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

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

- i. 85 percent of SMI for a family of the same size
- ii. An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold that:
 - (A) Takes into account the typical household budget of a low-income family
 - (B) Provides justification that the second eligibility threshold is:
 - (1) Sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family

economic stability

- (2) Reasonably allows a family to continue accessing child care services without unnecessary disruption.

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

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

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

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

Describe the policies and procedures.

For initial eligibility, families must have incomes at or below 185% of the Federal Poverty Level (FPL) for families of that size, and the family remains eligible for that 12 month eligibility period as long as incomes remains below 85% of SMI with no interim changes in the copay amounts. At the end of the initial 12 month eligibility period, a family's eligibility is reviewed, and as long as non-financial eligibility requirements are met and income remains below 85% of SMI, another 12 month eligibility period is authorized. There is no limit to the number of times a family may be approved for another 12-month eligibility period. Copay amounts may be adjusted at the 12 month review based on income eligibility. If at review the family has income in excess of 85% of SMI, eligibility would end.

Provide the citation for this policy or procedure.

Kansas Economic and Employment Service Manual (KEESM) Section 7440

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

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

Describe how the second eligibility threshold:

- i. Takes into account the typical household budget of a low-income family:
- ii. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:
- iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption:
- iv. Provide the citation for this policy or procedure:

- Other.

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

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

- No
- Yes

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

If at review, a family's income is greater than 185% of the FPL but less than 85% of

SMI, the copay amount is adjusted to the level 11 amount (the highest amount) on the Monthly Family Income and Family Share Deduction Schedule, and child care is approved for another 12 month period. If a reported change during the graduated phase out period results in a decrease in copay, this will be applied.

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

No.

Yes.

Describe:

3.1.8 Fluctuation in earnings.

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

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

Describe:

If the most recent pay stubs are not representative, on a case by case basis, a determination is made of what the appropriate period of time should be and the appropriate income to consider as representative. This may include requesting tax returns, additional pay stubs or statements from employers to use in averaging income.

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

Describe:

If the most recent pay stubs are not representative, on a case by case basis, a determination is made of what the appropriate period of time should be and the appropriate income to consider as representative. This may include requesting additional pay stubs or statements from employers.

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

Describe:

If the most recent pay stubs are not representative, on a case by case basis, a determination is made of what the appropriate period of time should be and the appropriate income to consider as representative. This may include requesting additional pay stubs or statements from employers.

- Other.**

Describe:

A prospective (income estimate or conversion) or income average method of budgeting is used to determine eligibility and amount of assistance. Earned income information is analyzed to accurately prospect income. Past information is evaluated to determine if it represents the future. Paystubs provided are evaluated to determine if any are not reflective of future earnings, such as a high check due to one-time overtime or a bonus, a low check due to illness or missed work, or a first partial check. If overtime, bonuses, or commissions are on the pay stub, these are evaluated to determine whether this income is recurring. If the person is employed where tips are paid, it is determined if tips are actual or allocated. (Certain employers must allocate tips if the percentage of tips reported by employees falls below a required minimum percentage of gross sales. To "allocate tips" means to assign an additional amount as tips to each employee whose reported tips are below the required percentage.) Pay information provided is evaluated to determine if there was a recent pay raise that will impact future earnings. If the recent past 30 days is reflective of the future, that information is used and documented to support the determination. If the past 30 days are not reflective of future earnings due to fluctuating income, more paystubs are obtained to project future income.

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

Applicant identity.

Describe:

At application, the identity of the person making application and any other adult in the assistance household verified. Identity of any new adult added to the household during the eligibility period is also verified for all adults. Identity may be verified with any number of documents, including a driver's license, voter registration, religious record, or school record - no specific document is required.

Applicant's relationship to the child.

Describe:

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

Describe:

Documentation of date of birth must be provided for each child for whom child care assistance is requested, and must only be verified one time. Date of birth may be verified by any documents which reasonably establish the child's date of birth.

Documentation of U.S. citizenship is required for each individual for whom child care is requested. US Citizenship may be verified with a birth certificate, religious records, certificates of citizenship or naturalization, U.S. passport, or receipt of medical assistance if verification of citizenship was obtained. If the above forms of documentation cannot be obtained and the individual can provide a reasonable explanation as to why documentation is not available, the agency accepts a signed statement form someone who is a U.S. citizen who declares, under penalty of perjury, that the person in question is a U.S. citizen. This verification is only required one time.

[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. When employment is the reason for child care and it is not related to cash assistance, it must be documented that adults included in the child care case are employed a minimum of 28 hours per week. This is verified at initial application, at review, and with reported changes that increase the need for child care.

[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 programs. That form is maintained in the case file. This form is only required one time of each new job training or educational program which is approved.

[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 when available. Income is verified at initial application, with reported changes and at review.

[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.

[Applicant residence.](#)

[Describe:](#)

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

Other.

Describe:

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

Time limit for making eligibility determinations

Describe length of time:

Thirty days from the date the completed application is received. Kansas Early Head Start Child Care Partnership (KEHS-CCP) application eligibility determinations are completed within 10 days. KEHS-CCP applications are accompanied by a referral form for easy identification.

Track and monitor the eligibility determination process

Other.

Describe:

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

None

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

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

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

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

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

a) Identify the TANF agency that established these criteria or definitions: Kansas Department for Children and Families

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

"Appropriate child care":

A regulated facility that meets or exceeds minimum licensing regulations. A non-regulated legally exempt provider who has completed a Health and Safety Standards Checklist and maintains a facility that meets or exceeds minimum standards.

"Reasonable distance":

Total daily transport time to and from home and to the child care provider not to exceed 2 hours. If a longer transport time is generally accepted in the community, the round trip time shall not exceed the generally accepted community standards.

"Unsuitability of informal child care":

Care for which the 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 the family has the ability to pay the cost through sufficient income or assistance through child care subsidy program. The definition of sufficient income to pay for the cost of child care is based on client self-declaration.

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

In writing

Verbally

Other.

Describe:

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

KEESM 3530(9)

3.2 Increasing Access for Vulnerable Children and Families

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

Note:

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

3.2.1 Describe how the Lead Agency defines:

a) "Children with special needs":

A child who requires special services due to developmental/intellectual or social emotional disabilities, sensory or motor impairment, or chronic illness.

Child Care benefits may be provided to protect children who cannot protect themselves from abuse, neglect and exploitation, to enable a child to remain in the home while the parent(s) work toward rehabilitation or when the child is at risk of a health or social condition which may adversely affect the child. The social service child care reason is used for this purpose and may include:

1. "Parents with Crisis":

a. Parent hospitalized or otherwise temporarily unable to provide adequate care for the child. This could be inpatient or outpatient, for physical health, mental health or

substance abuse treatment. There is no other adult to care for the child.

b. Family in the process of DCF Intake and Assessment through Prevention and Protection Services (PPS).

c. Family receiving services through a family preservation contractor or DCF PPS Social Worker.

2. Juvenile offenders in the custody of the Kansas Department of Corrections - Juvenile Services when the foster parent is employed and needs child care.

3. Children in Foster Care who are in the custody of the Secretary of DCF who have been placed with a relative or non-related kin not licensed for Foster Care. This does not include foster children placed in a licensed foster home, as child care for those children is provided by the state's foster care contractors.

4. Children whose caretaker has placed them with a "Safe Families for Children" host family due to a family crisis, thereby avoiding placement of the children in Foster Care. These children are not in Foster Care. Child care for these children must be needed due to the employment or education/training of the adults in the "Safe Families for Children" host family.

b) "Families with very low incomes":

Families participating in work programs who are receiving TANF or Food Assistance or who are Tribal TANF Work Program recipients.

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

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

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

Other.

Describe:

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

Prioritize for enrollment

Serve without placing these populations on waiting lists

Waive copayments

Pay higher rates for access to higher-quality care

Use grants or contracts to reserve slots for priority populations

Other.

Describe:

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

Prioritize for enrollment

Serve without placing these populations on waiting lists

Waive copayments

Pay higher rates for access to higher-quality care

Use grants or contracts to reserve slots for priority populations

Other.

Describe:

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

Prioritize for enrollment

Serve without placing these populations on waiting lists

Waive copayments

Pay higher rates for access to higher-quality care

Use grants or contracts to reserve slots for priority populations

Other.

Describe:

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

The priority list for Kansas also includes:

Families receiving child care for a qualified Social Service reason. This would include families with a temporary emergency need due to parents with crisis, juvenile offenders in the custody of the Kansas Department of Corrections – Juvenile Services when the foster parent is employed and needs child care, children in foster care who are in the custody of the Secretary of the Department for Children and Families who have been placed with a relative or non-related kin not licensed for foster care, and children whose caretaker has placed them with a “Safe Families for Children” host family due to a family crisis, thereby avoiding placement of the children in foster care.

Teen parents completing high school/GED

Employed families whose income is at or below 185% of the federal poverty level.

Priorities established by the lead agency for Child Care Assistance may be found at KEESM 2840.

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

Kansas currently serves all children who meet financial and non-financial eligibility criteria, but if a wait list should become necessary, families with a qualified social service reason are 2nd on our priority list. Teen parents are 4th on the priority list, and employed families whose

income are at or below 185% of the federal poverty level are 6th on the priority list.

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

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

As per KEESM 2145.1 - Citizenship Documentation Delay for TANF and Child Care Subsidy

The application shall be processed and approved granting a reasonable opportunity period to the individual to provide verification. This period shall be 3 calendar months commencing from the date the case is authorized. If the verification is not received by the end of the reasonable opportunity period, benefits shall end allowing for timely and adequate notice. The reasonable opportunity period may be extended in situations where the individual is making a bona fide effort to obtain the verification, but circumstances outside his/her control are delaying the effort. A decision to extend the period must be thoroughly documented and supported in the case file.

As per Kansas Child Care Regulation - The Kansas Department of Health and Environment grants the following allowances in Kansas Child Care Regulation to ease any barriers in community efforts to accommodate displaced families, children and youth into existing regulated child care facilities.

A. Displaced children and youth entering regulated child care facilities for temporary emergency care.

I. Not required to provide documentation of current immunizations and health assessment for up to 60 days.

II. Obtain as much information as possible about the children's/youth's health needs

including any current medications being taken and any know medication, food or other allergies.

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

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

DCF designed an Early Childhood Program Services brochure and distributed to Food Assistance Programs across the state, which included The Emergency Food Assistance Program (TEFAP), Commodity Supplemental Food Program (CSFP) sites, soup kitchens, food banks and homeless shelters. Programs were asked to post the information and share with families utilizing their programs. The brochure is emailed out annually and may be accessed on DCF's website at:

http://www.dcf.ks.gov/services/ees/Documents/Child_Care/ChildServicesFlyer.pdf.

and includes information for EC programs in Kansas such as Early Head Start, Head Start, Part C Infant-Toddler Services, Part B Special Education Services and Parents as Teachers (PAT). Another informational document that was developed and distributed to all Head Start and Early Head Start programs was the McKinney-Vento and Head Start: Ensuring Access to Early Education. This resource guide was designed to provide information on where the McKinney-Vento Programs are located and how to contact a local McKinney-Vento liaison. The purpose of this document is to promote better communication and coordination between Head Start and the local school districts. In addition, DCF has awarded funding for a Statewide Infant-Toddler Network to Kansas Child Care Training Opportunities (KCCTO) and funding for Consumer Education/Resource & Referral services awarded to Child Care Aware of Kansas (CCAK). Both contracts address homelessness education and outreach as part of these agreements.

Note: The Lead Agency shall pay any amount owed to a child care provider for services provided as a result of the initial eligibility determination, and any CCDF payment made

prior to the final eligibility determination shall not be considered an error or improper payment (98.51(a)(1)(ii)).

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

Note:

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

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

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

KDHE grants the following allowances in Kansas Child Care Regulation to ease any barriers in community efforts to accommodate displaced families, children and youth into existing regulated child care facilities: Displaced children and youth entering regulated child care facilities for temporary emergency care are not required to provide documentation of current immunizations and health assessment for up to 60 days. KDHE considers a homeless child "displaced". Providers are to obtain as much information as possible about the children's/youth's health needs including any current medications being taken and any known medication, food or other allergies.

If during enrollment for child care subsidy DCF is unable to verify citizenship, verification shall be waived and a three (3) month reasonable opportunity period for the individual to provide the information shall be applied. If otherwise eligible, the applicant may be approved for assistance. The individual shall be contacted to provide the information and notified of the reasonable opportunity period.

Provide the citation for this policy and procedure.

KEESM 2145.1

[Children who are in foster care.](#)

KDHE grants the following allowances in Kansas Child Care Regulation to ease any barriers in community efforts to accommodate displaced families, children and youth into existing regulated child care facilities: Displaced children and youth entering regulated child care facilities for temporary emergency care are not required to provide documentation of current immunizations and health assessment for up to 60 days. Providers are to obtain as much information as possible about the children's/youth's health needs including any current medications being taken and any known medication, food or other allergies.

If during enrollment for child care subsidy DCF is unable to verify citizenship, verification shall be waived and a three (3) month reasonable opportunity period for the individual to provide the information shall be applied. If otherwise eligible, the applicant may be approved for assistance. The individual shall be contacted to provide the information and notified of the reasonable opportunity period.

[Provide the citation for this policy and procedure.](#)

KEESM 2145. 1

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

Families are referred to various community resources to obtain necessary documents. Resources can be found on KQN at:

<http://ksqualitynetwork.org/resources/family-support/#cc-assistance> . KQN resources are coordinated with the Kansas Department of Health and Environment and made available to child care providers and communities in addition to families. KQN information and resources are distributed through the lead agency to the state licensing agency, community partners and early education and child care partners within the state. When identified during a licensing inspection, it is typical for the licensing inspector to inform the provider to refer families to the local health department.

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

No.

Yes.

Describe:

Children for whom Child Care Assistance is being requested whose U.S. citizenship is not questionable may be allowed a reasonable opportunity to provide verification of that citizenship . If otherwise eligible, the application shall be processed and approved granting a reasonable opportunity period to the caretaker of the child to provide the verification for the child. The reasonable opportunity period shall be three calendar months commencing from the date the case is authorized. If the verification is not received by the end of the reasonable opportunity period, benefits shall end allowing for timely and adequate notice. If verification is provided within the month after the month of case closure, eligibility may be reinstated without a new application or request. If U.S. citizenship is questionable, the child for whom Child Care Assistance is being requested would be ineligible to receive assistance until proof of U.S. citizenship is provided. Note: The reasonable opportunity period may be extended in situations where the caretaker of the child is making a bona fide effort to obtain the verification, but circumstances outside his/her control are delaying the effort. A decision to extend the period must be thoroughly documented and supported in the case file.

3.3 Protection for Working Families

3.3.1 12-Month eligibility.

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

This change means that a Lead Agency may not terminate CCDF assistance during the 12-

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

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

At initial eligibility, all child care plans are established for a 12-month eligibility period with any applicable copays established based on current income determination. If a family experiences a temporary change in activity, the family's eligibility is continued for up to three months to allow time for them to resume a eligible activity. If at the end of that three-month period, the family has resumed an eligible activity, eligibility continues for the remainder of the initial 12-month eligibility period. If the family has not resumed an eligible activity by the end of the three-month continuation, then eligibility would end the end of that three month period. At review, if family still meets non-financial eligibility criteria and income remains below 85% of SMI, a new 12-month eligibility period is established with copayment based on income determination at the time.

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

A change in a parent's eligible activity is considered temporary if the change is expected to continue for less than 3 months. A temporary change may include time limited absences due to: the need to care for a family member; student holidays and breaks; a reduction in work, training or education hours, as long as the parent is still working or attending a training or educational program; changes in residency within the state; a child turning 13 years old during the 12 month eligibility period; any other cessation of work or attendance at a training or educational program that does not exceed 3 months.

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

KEESM 7610 & 7640

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

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

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

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

No, the state/territory does not allow this option to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program.

Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:

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

When a non-temporary change is reported, DCF staff notify the parent that they have a three-month period in which to re-establish participation in an eligible activity, and they are given a deadline to report their resumption of an eligible

activity. If there is no response from the parent by the deadline given, child care assistance is ended at the end of the third month. If the parent reports that they have resumed an eligible activity, child care assistance continues through the remainder of the 12-month eligibility period.

ii. Describe what specific actions/changes trigger the job-search period.

The job search period is triggered when the parent is no longer participating in an eligible activity.

iii. How long is the job-search period (must be at least 3 months)?

3 months

iv. Provide the citation for this policy or procedure.

KEESM 7640

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

Not applicable.

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

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

If the parent stops using their child care benefits, or stops paying the provider with whom their child care plan is written, this is considered a possible indicator of excessive absences. The agency sends a notice at 60 days advising the parent that their benefits (non)usage has been noted, and that they need to either pay their provider or contact the agency to make needed changes in their plan. If the parent has not remedied the situation at 90 days, the child care plans are ended.

ii. Provide the citation for this policy or procedure:

KEESM 7640

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

Provide the citation for this policy or procedure:

KEESM 7640

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

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

The following are considered as program violations and lead to discontinued assistance:

Failure to provide requested verification needed to determine continued eligibility.

Failure to cooperate with Child Support Services

The citation for this policy is KEESM 7640.

3.3.3 Change reporting during the 12-month eligibility period.

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

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

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

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

No

Yes

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

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

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

Describe:

Beginning October 1, 2018 families must report when their earned income changes by \$100 or more, or if their unearned income changes by \$50 or more in a month. This must be reported within 10 days from the last day of the month in which the income for the month increased or decreased by those amounts. DCF will only act on these reported changes when the family's income exceeds 85% of SMI, or if the change results in a in decrease in family share deduction/increase in benefits. DCF policy for determining countable income is rather complex. This will remove the burden for families to calculate income over 85% of SMI and any undue over issuance of benefits which may result in an overpayment. There are general guidelines DCF uses to determine when income is counted and there are over 50 types of income that DCF exempts. Assistance planning rules determine whose income is counted for child care assistance and these rules have some exceptions. There are budgeting rules used to determine how income is counted and different rules for self-employment. To correctly report when their income is over 85% of SMI, families would need to understand and use these eligibility rules and DCF has determined that this is not a reasonable expectation of families. These reporting requirements further align with TANF change reporting requirements for Kansas. Families may report these changes in many different ways, including by telephone, in person, in writing, the change report form, or the online application. This reporting does not require a visit to the office during DCF business hours.

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

Describe:

Families must report changes in residence.

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

Describe:

Families must report if they change child care providers and/or hours of care needed/ used. They must also report when child care is no longer being used for any or all children receiving child care assistance.

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

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

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

Describe:

d) Families must have the option to voluntarily report changes on an ongoing basis during the 12-month eligibility period. Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

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

Beginning October 1, 2018 families are allowed to report any change that would positively impact their benefit amount and/or copayment amount.

ii. Provide the citation for this policy or procedure.

KEESM 9120

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

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

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

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

- Advance notice to parents of pending redetermination
- Advance notice to providers of pending redetermination
- Pre-populated subsidy renewal form
- Online documentation submission
- Cross-program redeterminations

Extended office hours (evenings and/or weekends)

Other.

Describe:

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

Postal Mail

Email

Online forms

FAX

In-person submission

Extended submission hours

Other.

Describe:

3.4 Family Contribution to Payments

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

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

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

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

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?	The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?	Highest Initial or First Tier Income Level Before a Family Is No Longer Eligible	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?	The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?
1	N/A	N/A	N/A	N/A	N/A	N/A
2	\$960.01	\$18	1.9%	\$2,538	\$197	7.8%
3	\$1212.01	\$22	1.8%	\$3,204	\$243	7.6%
4	\$1464.01	\$27	1.8%	\$3,870	\$293	7.6%
5	\$1716.01	\$31	1.8%	\$4,536	\$343	7.6%

b) What is the effective date of the sliding-fee scale(s)? 05/01/2018

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

N/A - Income eligibility levels are statewide

d) Provide the link to the sliding-fee scale:

http://content.dcf.ks.gov/EES/KEESM/Appendix/F-1%20Monthly%20Family%20Income%20and%20Family%20Share%20Deduction%20Schedule05_18.xlsx

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

N/A

3.4.2 How will the family's contribution be calculated, and to whom will it be applied?

Check all that apply.

The fee is a dollar amount and:

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

Describe:

Other.

Describe:

The fee applies to most household's whose income is 70% or higher of the Federal Poverty Level and is referred to in Kansas as the "family share deduction". It is based on family size and income, and is a set dollar amount that is deducted from the total child care benefit to the family. For families assigned a family share deduction (FSD), the FSD's range from 1.5% to 7.9% of a family's income, averaging 5.8% overall. The family share deduction does not apply to:

- 1) families whose income falls below 70% of the federal poverty level
- 2) families in which at least one person receives TANF
- 3) families receiving child care for a qualifying social service reason
- 4) two parent families in which one parent is employed and the second parent is participating in Food Assistance Education and Training work programs
- 5) families participating in the Kansas Early Head Start/Child Care Partnership program.

The fee is a percent of income and:

- The fee is per child, with the same percentage applied for each child.
- The fee is per child, and a discounted percentage is applied for two or more children.
- The fee is per child up to a maximum per family.
- No additional percentage is charged after certain number of children.

The fee is per family.

The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

Other.

Describe:

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

No.

Yes, check and describe those additional factors below.

Number of hours the child is in care.

Describe:

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

Describe:

Other.

Describe:

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

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

Describe the policy and provide the policy citation.

Kansas waives co-payments for families approved for Social Services child care due to a temporary emergency need. KEESM 2835

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

Describe the policy and provide the policy citation.

No co-payment is assigned to families in which there is a child receiving TANF, families who are participating in the Food Assistance E&T work program when participants are not employed or families participating in the KEHS-CCP program.

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

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

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

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling his or her child with a provider that has a grant or contract for providing child care services (658E(c)(2)(A); 98.30(a)). Even if a parent chooses to enroll his or her child with a provider who has a grant or contract, the parent will select the provider, to the extent practicable. If a parent chooses to use a certificate, the Lead Agency shall provide information to the parent on the range of provider options, including care by sectarian providers and relatives. Lead Agencies must require providers chosen by families to meet health and safety standards and has the option to require higher standards of quality. Lead agencies are reminded that any policies and procedures should not restrict parental access to any type of care or provider (e.g. center care, home care, in-home care, for-profit provider, non-profit provider or faith-based provider, etc.) (98.15 (a)(5)).

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

The child care certificate (plan) is issued after the parent has selected a child care provider. It includes the child's name, the provider name, the hours of child care that were authorized for the child, the family share deduction (co-payment) information, and the amount of child care benefits authorized for the child for each month of the eligibility period. If the family is approved for child care assistance for more than one child, information is included on the plan for each child.

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

- Certificate that provides information about the choice of providers
- Certificate that provides information about the quality of providers
- Certificate not linked to a specific provider, so parents can choose any provider
- Consumer education materials on choosing child care
- Referral to child care resource and referral agencies
- Co-located resource and referral in eligibility offices
- Verbal communication at the time of the application
- Community outreach, workshops, or other in-person activities
- Other.

Describe:

Agency website: www.dcf.ks.gov and Kansas Quality Network (KQN) website: <http://ksqualitynetwork.org>.

4.1.3 Child care services available through grants or contracts.

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

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

If yes, describe how many jurisdictions use grants or contracts for child care slots. Kansas Early Head Start Child Care Partnerships provides intensive, comprehensive program designed services to individualize to the unique strengths and needs of each child and family. KEHS programs are required to involve parents and community representatives in all areas of the program, including policy, program design, curriculum, and management decisions. All KEHS programs follow Head Start Performance Standards that require at least 10 percent of total enrollment slots be made available to children with disabilities. Kansas Early Head Start Child Care Partnerships also offer comprehensive services to child care partner programs that exhibit needs, desires to participate, and has willingness to follow enhanced program regulations. KEHS grantees also offer their own center-

based classes.

Three hundred and sixty-six (366) slots are available in 35 Counties in Kansas. Counties included are: Ford, Clay, Washington, Republic, Cloud, Ottawa, Shawnee, Douglas, Franklin, Lyon, Ellis, Rush, Russell, Rooks, Johnson, Saline, Dickinson, McPherson, Finney, Grant, Gray, Hamilton, Haskell, Kearny, Morton, Scott, Seward, Stanton, Stevens, Wichita, Wyandotte, Cherokee, Crawford, Labette and Montgomery.

Services are provided by these entities:

Bright Beginnings (KEHS CCP)

Clay County Child Care (KEHS CCP)

Community Action, Inc. (KEHS CCP)

East Central Kansas Economic Opportunity Corporation (ECKAN) (KEHS CCP)

Early Childhood Connections (KEHS CCP)

Growing Futures (KEHS CCP)

Heartland Early Education (KEHS CCP)

Kansas Children's Service League (KCSL) (KEHS CCP)

Project Eagle (KEHS CCP)

Southeast Kansas- Community Action Program (SEK-CAP) (KEHS CCP)

Yes, statewide. If yes, describe:

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

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

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

iv. The process for accessing grants or contracts:

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

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

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

4.1.3 Child care services available through grants or contracts.

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

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

4.1.3 Child care services available through grants or contracts.

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

- Programs to serve children with disabilities
- Programs to serve infants and toddlers
- Programs to serve school-age children
- Programs to serve children needing non-traditional hour care
- Programs to serve homeless children
- Programs to serve children in underserved areas

- Programs that serve children with diverse linguistic or cultural backgrounds
 - Programs that serve specific geographic areas
 - Urban
 - Rural
 - Other
- Describe

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

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. Their signature on the application certifies that they have read and understand those terms and agree to them. KDHE licensing also requires parental access to child care facilities. This may be found at: K.A.R. 28-4-123

http://www.kdheks.gov/bcclr/regs/lic_group_daycare/Day_Care_homes_and_Group_Day_Care_all_sections.pdf and

http://www.kdheks.gov/bcclr/regs/ccc/Preschools_and_Child_Care_Centers_all_sections.pdf

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

- No.
- Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.

- Restricted based on minimum the number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements.

Describe:

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

Describe:

Must be at least 18 years of age.

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

Describe:

Care must be for less than 24 hours a day.

- Restricted to care by relatives.

Describe:

Provider must be an aunt, uncle, grandparent, great-grandparent or adult sibling to the child. Relationship may be established by blood, marriage or court decree.

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

Describe:

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

Describe:

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.

- Other.

Describe:

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

4.2 Assessing Market Rates and Child Care Costs

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

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

- Provide an overview of the Lead Agency's proposed approach (e.g., cost estimation model, cost study/survey, etc.), including a description of data sources.
- Describe how the Lead Agency will consult with the State's Early Childhood Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, organizations representing child care caregivers, teachers and directors, and other appropriate entities prior to conducting the identified alternative methodology.
- Describe how the alternative methodology will use methods that are statistically valid and reliable and will yield accurate results. For example, if using a survey, describe how the Lead Agency will ensure a representative sample and promote an adequate response rate. If using a cost estimation model, describe how the Lead Agency will validate the assumptions in the model.
- If the proposed alternative methodology includes an analysis of costs (e.g., cost estimation model or cost study/survey), describe how the alternative methodology will account for key factors that impact the cost of providing care such as: staff salaries and benefits, training and professional development, curricula and supplies, group size and ratios, enrollment levels, licensing requirements, quality level, facility size, and other factors.

- Describe how the alternative methodology will provide complete information that captures the universe of providers in the child care market.
- Describe how the alternative methodology will reflect variations by provider type, age of children, geographic location and quality.
- Describe how the alternative methodology will use current, up to date data.
- Describe the estimated reporting burden and cost to conduct the approach.

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

- MRS
- Alternative methodology.

Describe:

- Both.

Describe:

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

Describe how the Lead Agency consulted with the:

a) State Advisory Council or similar coordinating body:

Prior to the development and conducting of the Market Rate Survey, consultation did not take place with a body similar to the State Advisory Council, although an email was sent to a group of stakeholders, including resource and referral agencies, the state licensing

agency, child care provider organizations, and other local organizations representing caregivers, teachers, directors, etc. In that email, input was requested on the information the lead agency needed to include in the market analysis, including a number of new items that would be needed to meet the requirements of the CCDF reauthorization. Following receipt of input from these stakeholders, the lead agency made adjustments to the request for proposal for the market rate survey prior to its release.

b) Local child care program administrators:

Prior to announcing the request for proposals for the market analysis, an email was sent to a group of stakeholders, including resource and referral agencies, the state licensing agency, child care provider organizations, and other local organizations representing caregivers, teachers, directors, etc. In that email, input was requested on the information the lead agency needed to include in the market analysis, including a number of new items that would be needed to meet the requirements of the CCDF reauthorization. Following receipt of input from those stakeholders, the lead agency made adjustments to the request for proposal for the market rate survey prior to its posting.

c) Local child care resource and referral agencies:

Prior to announcing the request for proposals for the market analysis, an email was sent to a group of stakeholders, including resource and referral agencies, the state licensing agency, child care provider organizations, and other local organizations representing caregivers, teachers, directors, etc. In that email, input was requested on the information the lead agency needed to include in the market analysis, including a number of new items that would be needed to meet the requirements of the CCDF reauthorization. Following receipt of input from those stakeholders, the lead agency made adjustments to the request for proposal for the market rate survey prior to its posting.

d) Organizations representing caregivers, teachers, and directors:

Prior to announcing the request for proposals for the market analysis, an email was sent to a group of stakeholders, including resource and referral agencies, the state licensing agency, child care provider organizations, and other local organizations representing caregivers, teachers, directors, etc. In that email, input was requested on the information the lead agency needed to include in the market analysis, including a number of new items that would be needed to meet the requirements of the CCDF reauthorization. Following receipt of input from those stakeholders, the lead agency made adjustments to

the request for proposal for the market rate survey prior to its posting.

e) Other. Describe:

Prior to announcing the request for proposals for the market analysis, an email was sent to a group of stakeholders, including resource and referral agencies, the state licensing agency, child care provider organizations, and other local organizations representing caregivers, teachers, directors, etc. In that email, input was requested on the information the lead agency needed to include in the market analysis, including a number of new items that would be needed to meet the requirements of the CCDF reauthorization. Following receipt of input from those stakeholders, the lead agency made adjustments to the request for proposal for the market rate survey prior to its posting.

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

The MRS used the most current child care resource and referral data, as well as data gathered through a survey of providers statewide. The data used for the rate analysis was provided by the child care resource and referral agency. This data used for the rate analysis included all providers that were in the Child Care Aware of Kansas database.

Representative of the child care market, It included licensed day care homes, licensed group day care homes, licensed child care centers, licensed school age programs, licensed Head Start programs, and licensed preschools. Data from licensed exempt centers, school age programs, Head Start Programs and preschools may also be included. (These license exempt providers in Kansas must become licensed to enroll as a subsidy provider with the Kansas Department for Children and Families (DCF). There were 4246 licensed day care homes and licensed group homes reported by Kansas Department of Health and Environment for June 30, 2017. The Child Care Aware of Kansas database provided rate information for 4219 licensed day care homes and licensed group homes on June 30, 2017.

There were 604 licensed child care centers reported by Kansas Department of Health and Environment for June 30, 2017. The Child Care Aware of Kansas database provided rate information for 596 licensed child care centers on June 30, 2017. Additional information was gathered through the survey. Prior to the survey being sent, an email was sent to licensed providers for whom email addresses were available, announcing the survey and encouraging their participation. Written notice of the upcoming survey was sent to licensed providers for whom no email address was available. For those with email addresses, the contractor sent via email a link to the survey. Paper surveys were mailed to providers with no email address. See the market analysis report linked to this plan for additional details about how the survey was conducted, as well as the response rate. Valid responses to the survey were received from approximately 22.8% of the licensed child care providers in the state, which is within the normal range of response rates for a typical survey of this type.

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

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

Resource and referral data is gathered from licensed providers statewide. A link to the survey was provided to all child care providers with email addresses and paper surveys were sent to those without email addresses. This also provided information from providers statewide, and responses were received from providers in all three of the states current geographical county groupings. The Market Rate Survey (MRS) reflects that Johnson County stands out as the area of the state with the highest rates, and in general, the rates of child care providers is highest in the most populous areas of the state.

b) Type of provider. Describe:

The survey includes data from all licensed child care providers (centers and family home providers) regardless of their participation within the DCF subsidy program. The provider survey completed as part of our MRS, reflects that the rates reported for child care continues to be higher among child care centers than it is among family child care home providers.

c) Age of child. Describe:

Rate data collected by the state resource and referral agency, as well as data that was gathered through the survey, are for all age groups from newborn to age 18. Data gathered reflects that the age of child in care impacts the rate charged. Rates continue to be higher for younger children with infant care being the highest.

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

The survey examined variations in participation in the Child and Adult Care Food Program (CACFP) and/or professional development activities, accreditations, alternative hour care, and additional amounts charged to families beyond charges for basic care. The MRS reflects higher rates are charged by child care centers participating in CACFP than by centers who do not participate, but little difference between family child care providers who participate and those who do not. Slightly higher rates are charged by providers who participate in special projects administered by Child Care Aware of Kansas. The survey reflected that of those providers who provide alternative hour care, more than half charge different rates for those hours. But statewide, the median rates charged for alternative hours by providers who offer the care is lower than median rates charged by those providers who do not offer alternative hour care.

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

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

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). 04/23/2018

b) Date the report containing results was made widely available - no later than 30 days after the completion of the report. 05/01/2018

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

The report is available to the public on the DCF website

http://www.dcf.ks.gov/services/ees/Pages/Child_Care/Child-care-and-early-education.aspx

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

A supplement to the detailed report includes both the public comments received and the lead agency's responses. Comments offered suggestions for future market analyses that had already been incorporated into the current analysis and will also be included in the future.

4.3 Setting Payment Rates

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

4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS) for the following categories below. Percentiles are not required if the Lead Agency conducted an alternative methodology only (with pre-approval from ACF), but must be reported if the Lead Agency conducted an MRS alone or in combination with an

alternative methodology. The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. Please use the most populous geographic region (area serving highest number of CCDF children) to report base payment rates below, if they are not statewide. Note: If the Lead Agency obtained approval to conduct an alternative methodology, then reporting of percentiles is not required.

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

Rate \$ 3.80 per hour unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 65th

b) Infant (6 months), full-time licensed FCC home in the most populous geographic region

Rate \$ 2.88 per hour unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 80th

c) Toddler (18 months), full-time licensed center care in the most populous geographic region

Rate \$ 3.81 per hour unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 64th

d) Toddler (18 months), full-time licensed FCC care in the most populous geographic region

Rate \$ 2.60 per hour unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region

Rate \$ 2.93 per hour unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 74th

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 2.60 per hour unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

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., daily, weekly, monthly, etc.)

Percentile of most recent MRS: 70th

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

Rate \$ 2.60 per hour unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

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

In Kansas, child care benefits are calculated separately for each child. Benefits are determined by a combination of factors: the age of the child; the numbers of hours of care each month the child needs; the family's family share, the child care provider's standard rate; and DCF maximum rates. When hours of care are determined there are additional things taken into consideration, such as, the time it takes to travel to work or training, lunch time, sleep time when they work over night, the individual needs of a child like naps or preschool activities, and study time for teen parents. Benefits for each child are automatically put into the parent's EBT (Electronic Benefit Transfer) account at the start of each month. All child care benefits are put into a single child care account for that household. Providers may charge parents for their child's slot, (full or part time) and/or absent days, if this is consistent with the provider's stated private pay policy. Parents are responsible for their family share amount and any additional charges agreed upon between themselves and their child's providers. Kansas' system of issuing benefits to parents and parent's being responsible for payment to provider's based upon their provider's individual payment practice mirrors private pay. One benefit of this system allows for providers to be paid in advance if this practice is consistent with their private pay families. Kansas offers part-time (20 hours per week) and full-time (40 hours per week) blocks of hours for families participating in the Kansas Early Head Start Child Care Partnership Program. If more than 40 hours per week can be justified, additional hours may be authorized. For other families not participating in this program, benefits are paid based on the projected hours care is needed. Within our current Market Rate Analysis Child care providers who charge families their full private pay rate were asked if the

additional amount the family paid exceeded the family portion as allocated by DCF. Full time was defined as providing services between 50 and 55 hours per week, reporting a rate greater than \$1 per hour and less than \$10 per hour, and providing care Monday through Friday. If providers reported a full-time rate, rates were converted to hourly by dividing the daily rate by 10.4 (52 hours / 5 days); weekly rate by 52 (hours/week); and monthly by 4.33 weeks per month and then divided by 52 hours per week. Of the 183 Center providers who responded, 36.1% reported the amount exceeded the family portion (family share) as allocated by DCF, 7.7% reported the amount did not exceed their family portion as allocated by DCF, and 56.3% reported the family has not shared that information with the provider. Of the 392 Family Child Care providers who responded, 29.1% reported the amount exceeded the family portion as allocated by DCF, 12.5% reported the amount did not exceed the family portion as allocated by DCF, and 58.4% reported the family has not shared that information with the provider. Since parents negotiate and establish an agreement with their child care provider, not sharing this information is an expected response. A total of 1,303 child care providers responded to the survey, representing a quarter (24.9%) of all providers in the state, with 1,192 providing complete survey responses (22.8% of all providers). Of those providing complete responses, 886 were family child care providers (21.9% of family child care providers) and 306 were child care centers (25.9% of all child care centers) This is within the normal ranges of response rates for a typical survey of this size.

With the planned November 1, 2018 rate adjustment, we anticipate the percentages exceeding the family portion (family share) to decrease.

j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). 11/01/2018

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

Sedgwick County

l) Provide the citation or link, if available, to the payment rates.

<http://content.dcf.ks.gov/EES/KEESM/Appendix/C-18%20Provider%20Rate%20Chart%2001-16.pdf>

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

N/A

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

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



Differential rate for *non-traditional hours*.

Describe:



Differential rate for *children with special needs*, as defined by the state/territory.

Describe:

Parents of children with a physical, emotional or mental disability may request an enhanced benefit rate for child care services. Documentation of the child's disability and/or special need must be provided by a skilled professional. Additional information must be provided by the care provider indicating the type of enhanced child care being provided to the child and what type of education and/or training the provider possesses in order to provide the care needed. If approved, that rate is \$6.00 per hour, regardless of the child's age or child care setting is used to calculate child care benefits for the family. In Kansas, child care benefits are calculated separately for each child. Benefits are

determined by a combination of factors: the age of the child; the numbers of hours of care each month the child needs; the family's family share, the child care provider's standard rate; and DCF maximum rates. Benefits for each child are automatically put into the parent's EBT (Electronic Benefit Transfer) account at the start of each month. All child care benefits are put into a single child care account for that household. Providers may charge parents for their child's slot, (full or part time) and/or absent days, if this is consistent with the provider's stated private pay policy. Parents are responsible for their family share amount and any additional charges agreed upon between themselves and their child's providers. Kansas' system of issuing benefits to parents and parent's being responsible for payment to provider's based upon their provider's individual payment practice mirrors private pay. One benefit of this system allows for providers to be paid in advance if this practice is consistent with their private pay families.

- Differential rate for *infants and toddlers*. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:

- Differential rate for *school-age programs*. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

- Differential rate for higher quality, as defined by the state/territory.

Describe:

Through individual grants for the Kansas Early Head Start Child Care Partnerships (KEHS CCP). KEHS grantees pay a quality payment to participating child care providers, on top of the base subsidy payment that is issued to and paid by the parents. Amounts vary based on the individual grantees' agreements with their participating providers. Providers receive the DCF Subsidy rate for their base payment. The KEHS grantees pay the child care partners a quality payment on top of the subsidy they receive dependent on their child care agreements with each child care partner. Quality payments are based upon their approved grant application's quality payment structure. Child Care Partners in the Kansas Early Head Start Child Care Partnership grant process develop their own individual quality incentive structure. The quality incentive structure is based on the

needs of their child care partners and the Head Start Performance Standards they are required to follow.

Other differential rates or tiered rates.

Describe:

Tiered or differential rates are not implemented.

4.4 Summary of Facts Used To Determine That Payment Rates Are Sufficient To Ensure Equal Access

4.4.1 Lead Agencies must certify that CCDF payment rates are sufficient to ensure equal access for eligible families to child care services comparable to those provided by families not receiving CCDF assistance (98.16(a)). Certify that payment rates reported in 4.3.1 are sufficient to ensure equal access by providing the following summary of facts (98.45(b)):

a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices.

At application, if an interview is conducted and a family does not already have a provider selected, they are referred to the local resource and referral agency for assistance in locating and selecting a provider who can meet their needs. Also at application, all families are provided with access to the Parent Provider Partnership Handbook which explains the range of provider types available. For those families who are not interviewed and do not have a provider chosen, the handbook also provides information about resource and referral services and how to select a provider. This handbook is also available to the general public on the agency's public website. There is a link to the handbook on the Kansas Quality Network web page.

Approximately 50% of all licensed child care providers in Kansas participate in the CCDF subsidy program. According to the most recent market analysis completed in April of 2018, approximately 54.2% of providers responding to the survey participate in the

CCDF subsidy program. Of participating providers responding with barriers to participation, the following top two challenges were identified: difficulty collecting the balance from parents and paperwork concerns. Other providers currently not participating indicated their top two reasons they did not participate were because families served did not ask for it and they reported they see this as a loss of income. A total of 1,303 child care providers responded to the survey, representing a quarter (24.9%) of all providers in the state, with 1,192 providing complete survey responses (22.8% of all providers). Of those providing complete responses, 886 were family child care providers (21.9% of family child care providers) and 306 were child care centers (25.9% of all child care centers) This is within the normal ranges of response rates for a typical survey of this size.

b) Describe how payment rates are adequate and have been established based on the [most recent MRS or alternative methodology](#) . Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

The Kansas Child Care Assistance program provider base rates are set at an average of the 65th percentile of the market in Kansas based upon the most current Market Rate Analysis completed in April 2018 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. The Lead Agency will also initiate the enrollment process with any eligible provider who is not currently enrolled but is chosen by the parent.

c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF.

In the child care market analysis completed in March 2018, 76.5% of responding family

child care providers and 76.4% of child care center providers reported that the amounts they were paid were sufficient to meet the basic health, safety, quality of care, and staffing requirements of providing child care.

d) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, Pre-K standards, Head Start performance standards, or State defined quality measures).

Kansas is currently in the development and implementation stage of a new QRIS system. Links to Quality kicked off in April 2018 in 5 peer learning communities across the state. Incentives for the L2Q participants are included in the pilot and based upon participation and meeting quality indicators identified within the system. Because Kansas is still in the pilot phase, the cost of care for each topic area (Link) is still being accessed using information regarding financial supports and data gathered during the pilot process. The agency with the Quality Support Services contract for L2Q is tasked in developing a cost estimate tool to determine the overall cost of higher quality within L2Q. L2Q participants apply for grants and indicate on these applications what these funds will be used for to complete the quality indicators. Tiered subsidy payments are not being offered at this time to L2Q pilot participants. Through the Kansas Early Head Start (KEHS) Child Care Partnership Grant, rates are set individually per grant. Providers receive the DCF Subsidy rate for their base payment. The KEHS grantees pay the child care partners a quality payment on top of the subsidy they receive dependent on their child care agreements with each child care partner. Quality payments are based upon their approved grant application's quality payment structure. Child Care Partners in the Kansas Early Head Start Child Care Partnership grant process develop their own individual quality incentive structure. The quality incentive structure is based on the needs of their child care partners and the Head Start Performance Standards they are required to follow. DCF reviews and approves each grantee's incentive structure as well as the resources needed for each Grantee.

e) How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds

(98.16 (k))? Check all that apply.

Limit the maximum co-payment per family.

Describe: .

Family Share deductions (co-payments) are assigned per family, regardless of the number of children receiving assistance.

Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and

Minimize the abrupt termination of assistance before a family can afford the full cost of care ('the cliff effect') as part of the graduated phase-out of assistance discussed in 3.1.7.

At review, a new income determination is made. If income remains below 185% of the Federal Poverty Level (FPL) for that household size, a new 12-month eligibility period is established with a family share deduction assigned based on income and household size. If Income exceeds 185% of the FPL, but is less than 85% of the State Median Income (SMI), a new 12-month eligibility period is established with a family share deduction assigned at the highest income level of initial eligibility for that household size. Eligibility will only end at review if income exceeds the SMI for that household size.

Other.

Describe:

f) To support parental choice and equal access to the full range of child care options, does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

No

Yes. If yes:

i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families.

Kansas allows provider to charge families up to their full private pay rate and encourages families to negotiate with providers regarding their terms of payment,

including the rate charged and frequency of payment. (Terms of payment are to be included in the parent/provider contract used by all licensed providers.) This encourages increased provider participation in the subsidy program, thereby providing families with more choices in deciding which provider is best for their needs. This also ensures that families are fully informed of private pay child care practices, including the real cost of child care so that it is no surprise if/when they are able to increase their income beyond DCF eligibility standards.

ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.

According to the 2017 Child Care Market Analysis completed in April 2018, 87% of child care centers and 92.9% of family child care providers charge families receiving DCF subsidy their full private pay rate. As stated above, terms of payment (including the frequency and rate) are negotiated by the family and included in their parent/provider contracts. 76.1% of child care centers and 21.2% of family child care providers indicated that they also charge additional fees for things such as enrollment, activity fees, transportation, late payment, supplies, late pick up, and food. (Additional information and a more detailed description of fees charges can be found in Table 18 and Appendix 9 of the 2017 Kansas Child Care Market Analysis Report.) However, 55.2% of centers and 34.4% of family child care providers offer discounts to families with multiple children ranging from \$0.19 - \$2.49 per hour per child for centers and \$.04 - \$2.25 per hour per child for family child care providers). 54.6% of centers and 1.8% of family child care providers offer discounts to employees, ranging from \$0.13 - \$4.34 per child per hour for centers and \$0.44 - \$2.49 per hour per child for family child care providers. Discounts for child care subsidy recipients are given by 13% of centers (ranging from \$.10 to \$1.25 per hour per child) and 7.1% of family child care providers (ranging from \$.09 to \$2.75 per hour per child).

iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees.

DCF allows families to negotiate terms of payment with their child care provider, If the provider does choose to charge the families more than their co-payment amount, some may choose to pay that from their household income, or may find

other sources (such as churches, family members or other community resources) to assist them in paying these amounts. Others may choose to select a different provider who may not charge as much, or even a relative provider. Our most recent Market Rate Survey found a majority of providers do charge families additional amounts, eligible families are continuing to use child care services while they participate in eligible activities as seen by the continued use of the child care benefits provided.

[g\) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers.](#)

The Lead Agency supports the following payment practices that are similar to private pay: benefits are allowed for days a child is absent, benefits are issued on a prospective basis to families, benefits are made available electronically to parents at the first of the month and payment is established between the parent and the provider, and an allowance is provided for enrollment fees. Since payment is between the parent and the provider, the provider has the same resolutions available to them for payment disputes as they do any of their private pay parents.

[h\) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.](#)

[Geographic area.](#)

[Describe:](#)

Counties are placed in one of three groups - high cost, medium cost and low cost, considering information from the most recent child care market rate analysis completed in March of 2018

[Type of provider.](#)

[Describe:](#)

Rates are set for four different child care provider types. Child care centers, family child care providers, out of home relative child care providers and in home relative child care providers.

[Age of child.](#)

Describe:

Rates for relative and family child care providers are set for two age groups, age 18 months and younger, and over 18 months. Rates for child care centers are broken into 5 age groups, 12 months and younger, 13 month through 18 months, 19 months through 30 months, 31 months through 5 years, and 6 years and older.

Quality level.

Describe:

Other.

Describe:

i) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access. Check all that apply and describe:

Payment rates are set at the 75th percentile benchmark or higher of the most recent MRS.

Describe:

Based on the approved alternative methodology, payments rates ensure equal access.

Describe:

Feedback from parents, including parent surveys or parental complaints.

Describe:

Other.

Describe:

According the 2017 Child Care Market Analysis Report completed in April 2018, 58.2% of child care centers and 57.8% of family child care providers indicated that the amounts they received covered their costs. This report is currently under review by the lead agency.

4.5 Payment Practices and the Timeliness of Payments

Lead Agencies are required to demonstrate that they have established payment practices applicable to all CCDF child care providers that include ensuring the timeliness of payments by either (1) paying prospectively prior to the delivery of services or (2) paying within no more than 21 calendar days of the receipt of a complete invoice for services. To the extent practicable, the Lead Agency must also support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by (1) paying based on a child's enrollment rather than attendance, (2) providing full payment if a child attends at least 85 percent of the authorized time, (3) providing full payment if a child is absent for 5 or fewer days in a month, or (4) using an alternative approach for which the Lead Agency provides a justification in its Plan (658E(c)(2)(S)(ii); 98.45(l)(2)).

Lead Agencies are required to use CCDF payment practices that reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF-funded assistance. Unless a Lead Agency is able to demonstrate that the following policies are not generally accepted in its particular state, territory, or service area or among particular categories or types of providers, Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents (658E(c)(2)(S); 98.45(l)(3)).

In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(l)(4) through (6); 658E(c)(2)(S)(ii); 98.45(l)(4); 98.45(l)(5); 98.45(l)(6)).

4.5.1 Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.

- a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

Paying prospectively prior to the delivery of services.

Describe the policy or procedure.

After initial approval, authorized benefits are paid on a prospective basis, available at 6:00 am on the first day of the month. The family can then transfer benefits at any time during the month to make payment to their provider.

Paying within no more than 21 calendar days of the receipt of a complete invoice for services.

Describe the policy or procedure.

N/A

b) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):

Paying based on a child's enrollment rather than attendance.

Describe the policy or procedure.

Benefits are authorized and paid on a prospective basis, based on the projected hours of care needed for the month. Absent days are not a part of the calculation, as benefits are issued to the family's benefit card prior to the delivery of services and prospective hours are based on the full months need for care. Each family has a written agreement with their provider on the terms of their child care services, the same as families who do not receive subsidy. This agreement is individualized in nature and the family follows the payment procedures that are established within that agreement. The family can then transfer benefits at any time during the month to make payment to their provider.

Providing full payment if a child attends at least 85 percent of the authorized time.

Describe the policy or procedure.

N/A

Providing full payment if a child is absent for five or fewer days in a month.

Describe the policy or procedure.

N/A

Use an alternative approach for which the Lead Agency provides a justification in its Plan.

If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

In Kansas child care benefits are calculated separately for each child. Benefits are determined by a combination of factors: the age of the child; the numbers of hours of care each month the child needs; the family's family share, the child care provider's standard rate; and DCF maximum rates. Benefits are issued prospectively, and Kansas does not reduce prospected benefits to account for absences, nor do we collect overpayments for time the child was not in care. This allows families to maintain the child's slot in their child care setting, regardless of occasional absences. Benefits for each child are automatically put into the parent's EBT (Electronic Benefit Transfer) account at the start of each month. All Child Care benefits are put into a single Child Care account for that household. Providers may charge parents for their child's slot and/or absent days, if this is consistent with the provider's stated private pay policy. Parents are responsible for their family share amount and any additional charges agreed upon between themselves and their child's providers.

c) The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).

i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time).

Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time).

In Kansas, child care benefits are calculated separately for each child. Benefits are determined by a combination of factors: the age of the child; the numbers of hours of care each month the child needs; the family's family share, the child care provider's standard rate; and DCF maximum rates. When hours of care are determined there are

additional things taken into consideration, such as, the time it takes to travel to work or training, lunch time, sleep time when they work over night, the individual needs of a child like naps or preschool activities, and study time for teen parents. Benefits for each child are automatically put into the parent's EBT (Electronic Benefit Transfer) account at the start of each month. All child care benefits are put into a single child care account for that household. Providers may charge parents for their child's slot, (full or part time) and/or absent days, if this is consistent with the provider's stated private pay policy. Parents are responsible for their family share amount and any additional charges agreed upon between themselves and their child's providers. Kansas' system of issuing benefits to parents and parent's being responsible for payment to provider's based upon their provider's individual payment practice mirrors private pay. One benefit of this system allows for providers to be paid in advance if this practice is consistent with their private pay families. Kansas offers part-time (20 hours per week) and full-time (40 hours per week) blocks of hours for families participating in the Kansas Early Head Start Child Care Partnership Program. If more than 40 hours per week can be justified, additional hours may be authorized. For other families not participating in this program, benefits are paid based on the projected hours care is needed. Within our current Market Rate Analysis Child care providers who charge families their full private pay rate were asked if the additional amount the family paid exceeded the family portion as allocated by DCF. Full time was defined as providing services between 50 and 55 hours per week, reporting a rate greater than \$1 per hour and less than \$10 per hour, and providing care Monday through Friday. If providers reported a full-time rate, rates were converted to hourly by dividing the daily rate by 10.4 (52 hours / 5 days); weekly rate by 52 (hours/week); and monthly by 4.33 weeks per month and then divided by 52 hours per week. Of the 183 Center providers who responded, 36.1% reported the amount exceeded the family portion (family share) as allocated by DCF, 7.7% reported the amount did not exceed their family portion as allocated by DCF, and 56.3% reported the family has not shared that information with the provider. Of the 392 Family Child Care providers who responded, 29.1% reported the amount exceeded the family portion as allocated by DCF, 12.5% reported the amount did not exceed the family portion as allocated by DCF, and 58.4% reported the family has not shared that information with the provider. Since parents negotiate and establish an agreement with their child care provider, not sharing this information is an expected response. A total of 1,303 child care providers responded to the survey, representing a quarter (24.9%) of all providers in the state,

with 1,192 providing complete survey responses (22.8% of all providers). Of those providing complete responses, 886 were family child care providers (21.9% of family child care providers) and 306 were child care centers (25.9% of all child care centers) This is within the normal ranges of response rates for a typical survey of this size.

With the planned November 1, 2018 rate adjustment, we anticipate the percentages exceeding the family portion (family share) to decrease.

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.

Describe the policy or procedure.

Kansas pays a registration fee of up to \$50 per child per year.

d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe:

In Kansas, child care benefits are paid via EBT to a family's child care account. The family transfers those benefits to their provider's bank account to assist in payment for their child care expenses. This allows the provider to receive payments in accordance with the same payment practices used with private pay parents. All payment arrangements are between the parents and providers. Providers have the same options for dealing with payment issues with subsidy eligible parents as they do with private pay parents .

e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur.

Describe:

DCF provides notice to providers when a child is determined eligible for child care benefits and when eligibility ends.

f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

Parents have the right to appeal any decision regarding their child care benefits and may appeal if they believe the decision is not accurate. Appeals must be in writing and must be received within 33 days from the date the notice of action was mailed. Attempts are made to resolve the issue, but if that fails, an administrative hearing is held in which the agency and the parent have the opportunity to present oral or written statements and evidence. A hearing officer makes the decision within 90 days and notifies both parties. Kansas does not pay providers. Child Care benefits are issued to the parent/caretaker's child care EBT card account. Then the parent transfers those benefits to their provider to pay for child care services. Payments are made based on the terms of the contract between the parent and the provider. This allows the provider to receive payments in accordance with the same payment practices used with private pay parents. Providers are notified when eligibility is determined for DCF families and when eligibility ends. All payment arrangements are between parents and providers. Providers have the same options for dealing with payment issues with subsidy eligible parents as they do with private pay parents.

g) Other. Describe:

N/A

4.5.2 Do payment practices vary across regions, counties, and/or geographic areas?

No, the practices do not vary across areas.

Yes, the practices vary across areas.

Describe:

4.6 Supply-Building Strategies to Meet the Needs of Certain Populations

Lead Agencies are required to develop and implement strategies to increase the supply of and to improve the quality of child care services for children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours (658 E(c)(2)(M); 98.16 (x)).

4.6.1 Lead Agencies must identify shortages in the supply of high-quality child care providers. List the data sources used to identify shortages, and describe the method of tracking progress to support equal access and parental choice.

In licensed family child care.

In June 2017 Child Care Aware of Kansas completed a statewide supply and demand report. A copy of the report can be found at:

http://www.dcf.ks.gov/services/ees/Documents/Child_Care/2017SupplyDemandReportv2.pdf Child Care Aware of Kansas, the contracted resource and referral agency,

documents child care requests and availability in high need areas. The supply and demand report is done annually, therefore changes in access and parental choice are tracked and can be compared over various periods of time. Recommended actions and strategies are part of this annual report.

In licensed child care centers.

In June 2017 Child Care Aware of Kansas completed a statewide supply and demand report. A copy of the report can be found at:

http://www.dcf.ks.gov/services/ees/Documents/Child_Care/2017SupplyDemandReportv2.pdf Child Care Aware of Kansas, the contracted resource and referral agency,

documents child care requests and availability in high need areas. The supply and demand report is done annually, therefore changes in access and parental choice are tracked and can be compared over various periods of time. Recommended actions and strategies are part of this annual report.

Other.

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

a) Children in underserved areas. Check and describe all that apply.

[Grants and contracts \(as discussed in 4.1.3\).](#)

[Describe:](#)

Sixty-seven high need counties were identified based on poverty, unemployment and out of home placement data. The data collected for the high priority counties includes high poverty- 17% to 32.1% percent (Census Bureau, 2016 American Community Survey produced by: Small Area Income and Poverty Estimates). Unemployment 4.5% percent or above (Kansas Labor Force Estimates, provided by the Kansas Department of Labor, July 2017). Out of Home Placement (OOHP) over 1.2% percent (Kansas Department for Children and Families- Prevention and Protection Services, June 2017). Kansas Early Head Start (KEHS) grantees complete and base service needs on local community needs assessment. KEHS grantees maintain waiting list of eligible children. Priority for funding was given to grantees serving counties identified as high need.

[Family child care networks.](#)

[Describe:](#)

[Start-up funding.](#)

[Describe:](#)

[Technical assistance support.](#)

[Describe:](#)

The Lead Agency's QRIS Links to Quality (L2Q) pilot peer learning community locations were determined after identifying high need communities with high poverty, high unemployment and high out of home placement data.

[Recruitment of providers.](#)

[Describe:](#)

[Tiered payment rates \(as discussed in 4.3.2\).](#)

[Describe:](#)

As part of the award process, a higher priority for funding was given to Kansas Early Head Start Child Care Partnership Grantee applicants who indicated they would serve areas that were identified as high need based on poverty, high

unemployment and out of home placements. Child Care providers who partner with Kansas Early Head Start Grantees are required to meet Head Start Standards increasing the quality of care provided to infants and toddlers in their care. The Kansas Early Head Start Child Care grantees offer incentives to partnering child care providers to build upon base rates established to meet the health and safety requirements for families receiving child care assistance. This additional tier of funding or level of incentives is determined by each individual Kansas Early Head Start grantee based upon their community needs.

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

The Lead Agency's QRIS Links to Quality (L2Q) pilot peer learning community locations were determined after identifying high need communities with high poverty, high unemployment and high out of home placement data. L2Q has a strong emphasis on supporting strong business practices.

- Accreditation supports.

Describe:

- Child Care Health Consultation.

Describe:

- Mental Health Consultation.

Describe:

- Other.

Describe:

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

b) Infants and toddlers. Check and describe all that apply.

[Grants and contracts \(as discussed in 4.1.3\).](#)

[Describe:](#)

Kansas Early Head Start Child Care Partnerships program grants are for infants and toddlers prior to their 3rd birthday. Children may remain in the program through the end of the program year in which they turn three years of age or the time when their same aged peers would be enrolling in preschool programs.

[Family child care networks.](#)

[Describe:](#)

The Lead Agency contract with KCCTO for ITSN includes promotion of community connections to increase awareness and use of available resources/services that support health, safe and nurturing care for infants and toddlers. Infant Toddler Specialists will utilize Professional Learning Communities Wiki Workspaces through KCCTO's learning management system to encourage use of available resources and services in the community. Development of the online community of practices is ongoing and Community Provider Support Groups are slated for Greenwood, Neosho and Crawford counties.

[Start-up funding.](#)

[Describe:](#)

[Technical assistance support.](#)

[Describe:](#)

The Lead Agency contracts with KCCTO for training and technical assistance through the Infant Toddler Specialist Network contract. KCCTO provides three intensity levels of technical assistance available to all programs and providers of child care services for infants and toddlers.

At Level 1, Proactive/General Technical Assistance, resources include professional collaboration, linkages, information opportunities generally supporting development of core knowledge and competencies for the infant toddler workforce including health and safety requirements and use of the Kansas Early Learning Standards. Newly licensed childcare providers receive a new provider packet with resources that includes information on training opportunities and services, developmentally

appropriate practices material and an invitation to join a community of practices wiki facilitation by ITSN TA content specialists. A follow-up contact is made by one of the Infant Toddler Specialists within 60 days.

At Level 2, Focused Technical Assistance is designed to enhance core knowledge and competencies and anticipate and meet licensing needs of new and existing programs and providers. Technical assistance at this level can involve developing and providing access to core training and resources that support a workforce training program or career pathway and/or short-term consultation or coaching to assist programs or providers in identifying training and resources available to meet their needs.

At Level 3, Intensive Professional Development is based on a written plan developed collaboratively with an ITSN TA provider. Referrals can come directly from a program or provider, from DCF, KDHE or KCCTO. Technical assistance must target improvement of services to infants and toddlers through application of core knowledge and competencies in specified priority such as developmental delays or disabilities, English language learners, in tribal care, migrant or homeless, in foster care, in care during nontraditional work hours and in need of other special assistance and support. Level 3 technical assistance is guided by considerations proposed by Blasé (2009). Level 3 technical assistance will be geographically representative of childcare centers and family childcare homes in regions across the state.

Recruitment of providers.

Describe:

Tiered payment rates (as discussed in 4.3.2) .

Describe:

Through individual grants for the Kansas Early Head Start Child Care Partnerships.

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

The Lead Agency's QRIS Links to Quality (L2Q) pilot peer learning community locations were determined after identifying high need communities with high poverty, high unemployment and high out of home placement data. L2Q has a strong emphasis on supporting strong business practices.

Accreditation supports.

Describe:

Child Care Health Consultation.

Describe:

Mental Health Consultation.

Describe:

Other.

Describe:

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

c) Children with disabilities. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

At least 10 percent of the total number of enrollment opportunities in the Kansas Early Head Start Child Care Partnership must be made available to children who meet the definition for children with disabilities.

Family child care networks.

Describe:

Start-up funding.

Describe:

[Technical assistance support.](#)

[Describe:](#)

KDHE Infant-Toddler supports professional development through the Kansas In-Service Training System (KITS). 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. The Infant Toddler Specialist Network contractor, KCCTO, partners with KITS to provide training, technical assistance and resources to providers and programs statewide. Through the network, there are a variety of professional development opportunities to support providers who serve children with developmental delays and disabilities.

[Recruitment of providers.](#)

[Describe:](#)

[Tiered payment rates \(as discussed in 4.3.2\).](#)

[Describe:](#)

Through individual grants for the Kansas Early Head Start Child Care Partnerships. Kansas provides an enhanced rates for children with special needs

[Support for improving business practices, such as management training, paid sick leave, and shared services.](#)

[Describe:](#)

[Accreditation supports.](#)

[Describe:](#)

[Child Care Health Consultation.](#)

[Describe:](#)

[Mental Health Consultation.](#)

[Describe:](#)

KCCTO, through the ITSN contract, provides quality improvement financial

incentives to participants in Intensive Technical Assistance. Financial supports include funding necessary to implement their Intensive TA Plan. Financial incentives can include funding to obtain the Kansas Association for Infant and Early Childhood Mental Health Endorsement.

Other.

Describe:

Child Care Aware of Kansas, the contracted resource and referral agency, documents child care requests and availability in high need areas.

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

d) Children who receive care during non-traditional hours. Check and describe all that apply

Grants and contracts (as discussed in 4.1.3).

Describe:

Child Care Aware of Kansas, the contracted resource and referral agency, documents child care requests and availability in high need areas.

Family child care networks.

Describe:

Start-up funding.

Describe:

Technical assistance support.

Describe:

KCCTO, through the ITSN contract, provides quality improvement financial incentives to participants in Intensive Technical Assistance. This service is available to providers who operate during non-traditional hours.

Recruitment of providers.

Describe:

- Tiered payment rates (as discussed in 4.3.2) .

Describe:

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

- Accreditation supports.

Describe:

- Child Care Health Consultation.

Describe:

- Mental Health Consultation.

Describe:

- Other.

Describe:

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

e) Other. Check and describe all that apply:

- Grants and contracts (as discussed in 4.1.3).

Describe:

- Family child care networks.

Describe:

- Start-up funding.

Describe:

- Technical assistance support.

Describe:

- Recruitment of providers.

Describe:

- Tiered payment rates (as discussed in 4.3.2).

Describe:

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

- Accreditation supports.

Describe:

- Child Care Health Consultation.

Describe:

- Mental Health Consultation.

Describe:

- Other.

Describe:

4.6.3 Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs.

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment?

Highpoverty was defined as areas with poverty between 17% to 32.1% percent (Census Bureau, 2016 American Community Survey produced by: Small Area Income and Poverty Estimates). Unemployment 4.5% percent or above (Kansas Labor Force Estimates, provided by the Kansas Department of Labor, July 2017).

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs

Sixty-sevenhigh need counties were identified based on poverty, unemployment and out of home placement data. The data collected for the high priority counties includes high poverty- 17% to 32.1% percent (Census Bureau, 2016 American Community Survey produced by: Small Area Income and Poverty Estimates). Unemployment 4.5% percent or above (Kansas Labor Force Estimates, provided by the Kansas Department of Labor, July 2017). Out of Home Placement (OOHP) over 1.2% percent (Kansas Department for Children and Families- Prevention and Protection Services, June 2017). Kansas Early Head Start (KEHS) grantees complete and base service needs on local community needs assessment. KEHS grantees maintain waiting list of eligible children. Priority for funding was given to grantees serving counties identified as high need. The Lead Agency's QRIS Links to Quality (L2Q) pilot peer learning community locations were determined after identifying these same high need communities with high poverty, high unemployment and high out of home placement data.

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

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children, whether they are licensed or license-exempt. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for providers of child care in a state or territory and then moves to focus in on CCDF providers who may be licensed, exempt from licensing, or relative providers. The section then covers the health and safety requirements and training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Lead Agencies are also asked to describe any exemptions for relative providers (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children.

Note: When responding to questions in this section, the OCC recognizes that each State/Territory identifies and defines its own categories of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important to note that these requirements are in effect for all child care staff members that are licensed, regulated or registered under state/territory law and all other providers eligible to deliver CCDF services.

5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F));

98.16(u); 98.40(a)(2)(iv)).

5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check all that apply and provide a citation to the licensing rule.

Center-based child care.

Describe and Provide the citation:

The State of Kansas has licensing requirements for License Day Care homes, Group Day Care homes, School Age Programs, Child Care Centers and Preschools. The licensing requirements cover health & safety regulations, staff qualifications, staff training requirements, inspections and investigations, environmental factors and daily activities. Drop-In Centers are also licensed by the State of Kansas. The licensing requirements cover inspections and investigations, staff qualifications and background checks. Drop-In Centers are not eligible to be CCDF providers.

Kansas Economic and Employment Services Manual (KEESM) - Section 10020-10033

Family child care.

Describe and Provide the citation:

The State of Kansas has licensing requirements for License Day Care homes, Group Day Care homes, School Age Programs, Child Care Centers and Preschools. The licensing requirements cover health & safety regulations, staff qualifications, staff training requirements, inspections and investigations, environmental factors and daily activities. Drop-In Centers are also licensed by the State of Kansas. The licensing requirements cover inspections and investigations, staff qualifications and background checks. Drop-In Centers are not eligible to be CCDF providers.

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In-home care (care in the child's own home).

Describe and provide the citation (if applicable):

5.1.2 Describe if any providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)).

Note: Additional information about exemptions related to CCDF providers is required in 5.1.3. Exempt providers in Kansas include: Out of state providers, relative providers, Job Corp and Tribal Child Care facilities. Exempt child-based child care centers and family child care from another state have to meet CCDF Health & Safety regulations in the state they are licensed in. DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only other CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. DCF does not have any MOUs with Tribal Child Care facilities at this time. In-home relative providers must be related to all children in care. For CCDF relative providers a Health & Safety checklist is completed by both the provider and parent/guardian.

5.1.3 Check and describe any CCDF providers in your state/territory who are exempt from licensing (98.40(2)(i) through (iv))? Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care or any other factors applicable to the exemption

Center-based child care.

If checked, describe the exemptions.

Centers located in another state. These centers must be licensed by that state and be a subsidy provider for that state. Centers run by the Federal Government or a Tribe. These Centers must meet the CCDF requirements and have a Memorandum of agreement with Kansas to provide care.

Family child care.

If checked, describe the exemptions.

Licensed Homes in another state must be licensed by that state and be a subsidy provider for that state.

In-home care.

If checked, describe the exemptions.

Out of Home and In Home Relative providers. These are providers 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.

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.1 Standards on ratios, group sizes, and qualifications for CCDF providers.

Lead Agencies are required to establish child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories.

a) Licensed CCDF center-based care

1. Infant

-- How does the State/territory define infant (age range):

0 to 12 months

-- Ratio:

1 to 3

-- Group size:

9

-- **Teacher/caregiver qualifications:**

All Center Based Care employees must attend an Orientation within 7 calendar days of employment and prior to sole responsibility for the care and 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, including any special needs and known allergies; health and safety practices; and confidentiality. The orientation can be taught by the Center Director or other qualified employee.

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 requirements 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. Units 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 of 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.

Complete all the required health and safety training within 30 calendar days after the date of employment and before being given sole responsibility for the care and supervision of children.

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

2. Toddler

-- How does the State/territory define toddler (age range):

between 12 and 30 months and has learned to walk

-- Ratio:

1 to 5

-- Group size:

10

-- Teacher/caregiver qualifications:

Same as an Infant Lead Teacher and Assistant teacher. All Center Based Care employees must attend an Orientation within 7 calendar days of employment and prior to sole responsibility for the care and 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, including any special needs and known allergies; health and safety practices; and confidentiality. The orientation can be taught by the Center Director or other qualified employee.

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 requirements 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. Units 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 of 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.

Complete all the required health and safety training within 30 calendar days after the date of employment and before being given sole responsibility for the care and supervision of children.

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

3. Preschool

-- How does the State/territory define preschool (age range):
between 30 months and the age of eligibility to enter kindergarten.

-- Ratio:

1 to 12

-- Group size:

24

-- Teacher/caregiver 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 requirements 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. Units 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 that meets the following training requirements:

Option 1: Six months' teaching experience in licensed facilities with children of the same age as enrolled in the 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 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. Assistant teachers shall be at least 16 years of age and shall participate in staff orientation at time of employment.

Complete all the required health and safety training within 30 calendar days after the date of employment and before being given sole responsibility for the care and supervision of children.

4. School-age

-- How does the State/territory define school-age (age range):

6 years of age and older

-- Ratio:

1 to 16

-- Group size:

30

-- Teacher/caregiver 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' of experience with school-age children. In addition, units enrolling fewer than 13 children shall have a staff person who meets the same training requirements as a Program Director for a facility 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. Units enrolling more than 24 school age children shall have a staff person who meets the requirements of a facility licensed for the same size.

Assistant teachers shall be at least 16 years of age and shall participate in staff orientation at the time of employment.

Complete all the required health and safety training within 30 calendar days after the date of employment and before being given sole responsibility for the care and supervision of children.

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers

Child Care Providers regulated by the Federal government and/or Tribes. These facilities must have a Memorandum of Agreement with DCF and at a minimum meet state licensing requirements including ratio and group size. Providers operating in a surrounding state must meet that state's licensing requirements.

6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups.

The minimum staff/child ratio is shown above. The ratio between staff and children is 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.

7. Describe the director qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care.

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: 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.

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. Child care center staff shall plan their observations so that daily activities during morning, lunch, nap time and late afternoon can be observed; and one year of teaching experience in licensed centers or preschools, or one year of supervised practicum in licensed centers or preschools; or

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 one year of supervised practicum in licensed

centers or preschools; or

Option 3: A child development associate credential.

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: Twelve 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 one 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 one year of teaching experience in licensed centers or preschools, or a supervised practicum in licensed centers or preschools;

Option 4: An A.B. or B.S. degree in child development or early childhood education, including a supervised practicum; and 3 months' teaching experience in licensed centers or preschools; or

Option 5: An A.B. or B.S. 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 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 A.B. or B.S. 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 one year of experience as a program director in a center licensed for more than 24 children, or one year of experience as an assistant program director in a center licensed for more than 100 children.

Complete all the required health and safety training within 30 calendar days after the date of employment and before being given sole responsibility for the care and

supervision of children.

b) Licensed CCDF family child care provider

1. Infant

-- How does the State/territory define infant (age range):

0 to 18 months

-- Ratio:

A ratio of 1 provider for 3 infants 18 months and younger is allowed in a License Day Care home.

A ratio of 2 providers for 4 infants 18 months and younger is allowed in a Group Day Care Home

-- Group size:

The age mix of the children and the number of adults present determines the total capacity.

Licensed Day Care Home group size is 10

The maximum group size for a Licensed Day Care home is 10, however the total number of children decreases based on the youngest child(ren) in care. For example, if 2 infants are in care the provider is allowed to have 9 total children and if the provider has 3 infants in care then the provider is allowed to only have 8 children in care.

Group Day Care Home group size is 12

The maximum group size for a Group Day Care Home is 12, however the total number of children decreases based on the youngest child(ren) in care. For example, if 4 infants are in care with 2 providers the total number of children allowed is 10.

-- Teacher/caregiver qualifications:

A Licensed CCDF family child care provider must be a high school graduate or the equivalent thereof and attend a pre-Licensing orientation. Complete all the required

health and safety training within 30 calendar days after the date of application or employment and before being given sole responsibility for the care and supervision of children

2. Toddler

-- How does the State/territory define toddler (age range):

18 months to 5 years

-- Ratio:

A ratio of 1 provider for 7 toddlers 18 months to 5 years is allowed in a License Day Care home.

A ratio of 2 providers for 8 toddlers 18 months to 5 years is allowed in a Group Day Care Home

-- Group size:

The age mix of the children and the number of adults present determines the total capacity.

Licensed Day Care Home group size is 10

The maximum group size for a Licensed Day Care home is 10, however the total number of children decreases based on the youngest child(ren) in care. For example, if 2 infants are in care the provider is allowed to have 9 total children and if the provider has 3 infants in care then the provider is allowed to only have 8 children in care.

Group Day Care Home group size is 12

The maximum group size for a Group Day Care Home is 12, however the total number of children decreases based on the youngest child(ren) in care. For example, if 4 infants are in care with 2 providers the total number of children allowed is 10.

-- Teacher/caregiver qualifications:

A Licensed CCDF family child care provider must be a high school graduate or the equivalent thereof and attend a pre-Licensing orientation. Complete all the required

health and safety training within 30 calendar days after the date of application or employment and before being given sole responsibility for the care and supervision of children

3. Preschool

-- How does the State/territory define preschool (age range):

N/A

-- Ratio:

N/A

-- Group size:

N/A

-- Teacher/caregiver qualifications:

N/A

4. School-age

-- How does the State/territory define school-age (age range):

5 to 11 years old

-- Ratio:

A ratio of 1 provider for 10 school-age children 5 years to 11 years old is allowed in a License Day Care home.

A ratio of 2 providers for 12 school-age children 5 years to 11 years old is allowed in a Group Day Care Home

-- Group size:

The age mix of the children and the number of adults present determines the total capacity.

Licensed Day Care Home group size is 10

The maximum group size for a Licensed Day Care home is 10, however the total

number of children decreases based on the youngest child(ren) in care. For example, if 2 infants are in care the provider is allowed to have 9 total children and if the provider has 3 infants in care then the provider is allowed to only have 8 children in care.

Group Day Care Home group size is 12

The maximum group size for a Group Day Care Home is 12, however the total number of children decreases based on the youngest child(ren) in care. For example, if 4 infants are in care with 2 providers the total number of children allowed is 10.

-- Teacher/caregiver qualifications:

A Licensed CCDF family child care provider must be a high school graduate or the equivalent thereof and attend a pre-Licensing orientation. Complete all the required health and safety training within 30 calendar days after the date of application or employment and before being given sole responsibility for the care and supervision of children

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes

Family child care homes licensed in another state are governed by those states. To ensure compliance with CCDF requirements the home must be licensed and a CCDF provider in the state where they are located.

c) In-home CCDF providers:

1. Describe the ratios

1 to 6

2. Describe the group size

Maximum size is 6

3. Describe the maximum number of children that are allowed in the home at any one time.

6 children under the age of 16

4. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size

The providers' own children under the age of 16 are included in the ratio and group size.

5. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day

There are no limits.

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.2 Health and safety standards for CCDF providers.

States and territories must establish health and safety standards for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the topics listed below, as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care providers receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives because Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)).

a) To certify, describe how the following health and safety standards for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(l)). Note: This question is different from the health and safety training requirements, which are addressed in question 5.2.3.

1. Prevention and control of infectious diseases (including immunization)

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The importance of immunizations, appropriate hand hygiene, diapering and toileting procedures.

Immunizations for each child in care shall be current as medically appropriate and shall be maintained current for protection from the diseases. A record of each child's immunizations shall be maintained on the child's medical record form. Immunizations and records must also be current for a child of the provider under 16 years of age. Hands shall be washed using soap and warm running water and dried with a paper towel or a single-use towel. When soap and running water are not readily available, an alcohol-based hand sanitizer may be used only by adults and, under adult supervision, by children two years of age and older. Each provider shall wash that provider's hands as needed when hands are soiled and when each of the following occurs: at the start of the hours of operation or when first arriving at the facility, returning from being outdoors, after toileting, diapering, assisting a child with toileting, or handling any bodily fluids, before preparing each snack and each meal and before and after eating each snack and each meal, before and after administering any medication, and after feeding or handling any pet. Each child shall wash that child's hands or be assisted in washing that child's hands as needed when hands are soiled and when each of the following occurs: at the start of the hours of operation or when first arriving at the facility, returning from being outdoor, after toileting, before and after eating each snack and each meal; and after feeding or handling any pet.

Diapering and toileting.

Each child's clothing or bedding shall be changed whenever wet or soiled. Each child under three years of age shall have at least one complete change of clothing at the facility. Handwashing facilities shall be in or readily accessible to the diaper-changing area. Each person caring for children shall wash hands with soap and water after changing diapers or soiled clothing.

Children shall be diapered in their own cribs or playpens, on a clean pad on the floor, or on a changing table. Each unit in a child care center shall have a changing table. Changing tables and pads shall have a waterproof, undamaged surface. Changing tables and pads shall be sanitized after each use by washing with a disinfectant solution of 1/4 cup of chlorine bleach to one gallon of water, or an appropriate commercial disinfectant.

The following procedures shall be followed when washable diapers or training pants are used:

Washable diapers or training pants shall not be rinsed out. They shall be stored in a labeled covered container or plastic bag and returned home with the parents.

Disposable diapers shall be placed in a covered container or plastic bag which shall be emptied daily, or more frequently as necessary for odor control. Potty chairs when used shall be left in the toilet room. The wastes shall be disposed of immediately in a flush toilet. The container shall be sanitized after each use and shall be washed with soap and water daily.

Diapering procedures recommended by the U.S. Department of Health and Human Services, Public Health Service, December, 1984, shall be followed in all child care facilities caring for infants and toddlers. Diapering and toileting procedures shall be posted in child care centers and group day care homes serving children under 2 1/2 years of age.

-- List all citations for these requirements, including those for licensed and license-exempt programs

K.S.A. 65-508 requires sanitary diapering

K.A.R. 28-4-132(c) Child Care Practices- applies to home and center-based care

K.A.R. 28-4-117 Licensed and Group Day Care Home- Immunizations

K.A.R. 28-4-430 Health Practices- Child Care Centers and Preschools- hand washing and immunizations.

DCF's Memorandum of Agreement with License-exempt providers state they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

KDHE License Exempt providers from out of state must meet their current state requirements for Licensing and CCDF funding.

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relative providers are exempt from training.

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Home and center child care providers are required to nap infants on their back on a surface and in an area, that has been approved for use as such by the secretary of health and environment. A child may not nap or sleep in the same crib or playpen as that occupied by another child. The sleep surface shall be free from soft or loose bedding, including, but not limited to, blankets, bumpers and pillows and the sleep surface shall be free from toys, including mobiles and other types of play equipment or devices. Cribs must comply with federal crib requirements. Safe sleep practices must be discussed with the parent or legal guardian of each child before the first day of care and the provider must develop and implement safe sleep practices for children in care who are napping and sleeping. Each child must be offered the opportunity to sleep.

Home child care providers must ensure supervision is provided to each child who is napping or sleeping. Each child who is napping or sleeping must be within sight or hearing distance of the provider and shall be visually check on by the provider at least every 15 minutes. If the provider is not in the room with the napping child the door to that room must remain open.

Infant rooms in a child care center must have visual supervision at all times, including the separate sleeping space.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.S.A. 65-508, K.A.R. 28-4-116a, K.A.R. 28-4-115(c)(3), K.A.R. 28-4-428a, K.A.R. 28-4-428(a)(2)

DCF's Memorandum of Agreement with License-exempt providers state they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed

by provider and parent/guardian.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

Training on this topic is not required for programs that provide care for school age children only. KDHE License Exempt providers from out of state must meet their current state requirements for Licensing and CCDF funding.

-- Describe any variations based on the age of the children in care

Children under 12 months of age must be in a crib or playpen and placed on their back. Children 12 month of age and older may sleep on a bed, cot or pad.

-- Describe if relatives are exempt from this requirement

Relative providers are exempt from training.

3. Administration of medication, consistent with standards for parental consent

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

A person must be designated to administer medications to children who has completed the required health and safety training. Nonprescription and prescription medication may be administered when written permission has been obtained from the child's parent or legal guardian and before administering medication. The nonprescription medication must be supplied by a parent or guardian and must be in the original container. The container must be labeled with the first and last name of the child for whom the medication is intended and must be administered according to the instructions on the label. Prescription medication requires that medication be in the original container labeled by a pharmacist with the name of the child, dose required with frequency and date. Documentation of each medication administered must be kept on a form provided by the department and maintained in each child's file.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.A.R. 28-4-118, K.A.R. 28-4-430(c) 9-10

DCF's Memorandum of Agreement with License-exempt providers state they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

4. Prevention of and response to emergencies due to food and allergic reactions

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

If a child has a food allergy or special dietary need, the provider and the parent or legal guardian of the child shall make arrangements for the provision of alternative foods or beverages. Only pasteurized milk products may be served. Sanitary methods of food handling and storage must be followed. Tableware must be washed, rinsed and air dried or placed in a dishwasher after each meal. A washable or disposable individual cup, towel, and washcloth must be provided for each child.

If a child has a food allergy the provider must have a response identified on the facility emergency preparedness plan.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.A.R. 28-4-116(e)(3)(D)9-13, K.A.R. 28-4-439(e)-(s), K.A.R. 590(f)(2)(E), K.A.R. 28-4-128, K.S.A. 65-508

DCF's Memorandum of Agreement with License-exempt providers state they must

meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this training.

5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

General environmental requirements include that the facility must be well maintained, free from hazards, stairs guarded based on youngest age of child in care, balusters and handrails for stairs, visible clean and vermin free, appropriate, heating, cooling and drinking water requirements are met. Electrical outlets must have plugs. Outdoor play area(s) must be fenced for a child care center. A fence is also required for a home-based facility if the home is deemed on a road with high traffic or a hazard such as a pond is on the premises. Pools must be enclosed by a fence that is at minimum 5 feet tall.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.A.R. 28-4-115, K.A.R. 28-4-423, K.A.R. 28-4-437

DCF's Memorandum of Agreement with License-exempt providers state they must

meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this training requirement.

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

A discipline policy is required and must be age appropriate. The policy must be shared with parents. Prohibited punishment is not permitted and includes any treatment that is physically harmful to a child.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.A.R. 28-4-132

DCF's Memorandum of Agreement with License-exempt providers state they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

KDHE License Exempt providers from out of state must meet thier current state

requirements for Licensing and CCDF funding.

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Child care facilities regulations require facilities to develop an emergency plan for the safety of children and staff in emergencies such as fire, tornadoes, storms, floods, and serious injury. The plan is to be posted in a conspicuous place in the facility. The emergency plans should be shared with parents and legal guardians of each child enrolled. Plans are to include a designated relocation site and evacuation route, procedure to meet the needs of individual children, including those with special health care or mobility needs and procedures for notifying parents and legal guardians of the relocation and for reunification. Surveyors review emergency plans during the initial and annual inspections. Plans should be update as necessary.

Fire and tornado drills are required for center and home-based facilities and a record of the drills must be maintained on file

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.A.R. 28-4-128, K.A.R. 28-4-592, Policy: Emergency Plans to Provide for the Safety

of Children and Staff in the Facility.

DCF's Memorandum of Agreement with License-exempt providers state they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relatives are exempt from training requirements

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Hazardous items must be safely stored. These items included household cleaning supplies and all bodily care products bearing warning labels to keep out of reach of children or containing alcohol shall be in locked storage. Dangerous chemicals and household supplies with warning labels must be kept out of reach of children and all medications must be in locked stored or stored out of reach of children under 10 years of age. Sharp instruments must be stored in drawers or cabinet equipped with childproof devices or stored out of reach of children. Tobacco products, ashtrays, lighters and matches must be stored out of reach of children. Weapons must be stored in a locked room, closet, container, or cabinet and ammunition must be kept in locked storage separate from other weapons.

Buildings and homes must meet the requirements for flushing toilets and sewage disposal.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.A.R. 115(g), K.A.R. 28-4-115 (c) 16, K.A.R. 28-4-423, K.S.A. 65-508

DCF's Memorandum of Agreement with License-exempt providers state they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this training requirement.

9. Precautions in transporting children (if applicable)

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The state transportation laws and regulations supersede child care licensing laws and must be followed when transporting children in care using a vehicle. If a vehicle is used to transport children the vehicle must have yearly mechanical safety checks and a record of the annual safety check and corrections must be kept on file at the facility. Vehicles must be equipped with the required individual restraints for each child. Accident and liability insurance is required for personal injury or death. Emergency release forms and health assessment records must be in the vehicle for each child being transported.

Staff to child ratios must be maintained and supervision regulations must be followed at all times in the assigned unit, when going outdoors or utilizing a multipurpose room, and if going on a field trip off premises. Parental permission for children to go off-premises is required for each location and documented on a form supplied by the department. The destination, time children leave the facility, the adults responsible for the children while off premises and the estimated time of return must be posted in a place accessible to parents.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.S.A. 65-508, K.A.R. 28-4-130, K.A.R. 28-4-130, K.A.R. 28-4-582, K.A.R. 28-4-583, K.A.R. 28-4-593

DCF's Memorandum of Agreement with License-exempt providers state they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relatives are exempt from training requirements.

10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Each applicant, licensee, primary and substitute providers in a licensed day care home, child care center and preschool must have completed pediatric first aid and

cardiopulmonary resuscitation and a copy current certification must be on file. At least one staff member who is onsite and available must have a current certification and a copy on file for a school age program.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.A.R. 28-4-114a, K.A.R. 28-4128a, K.A.R. 28-4-592

DCF's Memorandum of Agreement with License-exempt providers state they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian..

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relatives are exempt from requirements.

11. Recognition and reporting of child abuse and neglect

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Each provider is requested to report to the Kansas department for children and families or to law enforcement any suspected child abuse or neglect within 24 hours. A failure to report is most commonly found during a complaint investigation and the facility is cited for noncompliance.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.A.R. 28-4-118(b), K.A.R. 28-4-430(c)(6), K.A.R. 28-592(h)

DCF's Memorandum of Agreement with License-exempt providers state they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

KDHE License Exempt providers from out of state must meet their current state requirements for Licensing and CCDF funding.

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relative providers are exempt from training requirements.

b) Does the Lead Agency include any of the following optional standards?

No, if no, skip to 5.2.3.

Yes, if yes provide the information related to the optional standards addressed.

1. Nutrition

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Development and implementation of menu plans for meals and snacks that contain a variety of healthful foods, including fresh fruits, fresh vegetables, whole grains, lean meats, and low-fat dairy products.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.A.R. 28-4-116; K.A.R. 28-4-434; K.A.R. 28-4-439; K.A.R. 28-4-591

DCF's Memorandum of Agreement with License-exempt providers state they must

meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian.

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

-- Describe any variations based on the age of the children in care.

None

--Describe if relatives are exempt from this requirement

Relatives are exempt from training requirements.

2. Access to physical activity

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Daily activities should include the opportunity for each child to participate in one hour of physical activity either indoors or outdoors. Daily activities should contribute to fine and gross motor development.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.A.R. 116 (a)(4), K.A.R. 28-4-438, K.A.R. 28-4-440

-Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care.

None

--Describe if relatives are exempt from this requirement

Relatives are exempt from requirements.

3. Caring for children with special needs

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

High quality child care must be available to any family seeking care regardless of where the family lives or the special needs of the child. Orientation for staff must include any special needs of a child(ren) in care. Child care centers and preschools serving children with special needs must ensure that the building premises meets all requirements to accommodate children for exits, steps, ramps, toilets and washbasins. Facilities with children who use walkers or wheelchairs must have 50 square feet of space for each child. Staff serving children with special needs are required to have a minimum of six hours of academic credits or equivalent clock hours in understanding the needs of children with special needs and in developing individual program plans. Additionally, all staff must have 10 clock hours of annual in-service training specific to handicapping conditions. If more than one-third or more of the children enrolled in a child care center or preschool has special needs the minimum staff/child ratio is reduced to ensure the health and safety of the children in care. Written individual program plans must be on file for each child with special needs and, in consultation with the parents, must be reviewed and revised annually. The plan must assign responsibility for the delivery of services, and indicate the anticipated change in the child's behavior, and how these changes will be measured. If an IPP for a school age child is required it must be developed by the program director or staff person as well as with the parent or guardian of the child. The IPP must include goals and special services and reviewed annually. The IPP must be kept in the child's file.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.S.A. 65-508, K.A.R. 114a(a)(2)(D), K.A.R. 28-4-465, K.A.R. 28-4-588(f)

DCF's Memorandum of Agreement with License-exempt providers state they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed

by provider and parent/guardian.

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care.

None

--Describe if relatives are exempt from this requirement

Relatives are exempt from requirements.

4. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)).

Describe:

Daily activity that promote health growth and development, take into consideration the cultural background and traditions that are familiar to the children, and incorporate both indoor and outdoor activities are that are appropriate for the ages and development levels of the children in care are required.

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

A variety of activities must be available for children to choose and the opportunity to participate. Toys and play equipment, books and other learning materials must be age appropriate and made available in sufficient quantities to allow each child a choice of activity. Activities, equipment and supplies must be designed to promote large and small motor development, creative expression, math and science skills, language development and literacy. Toys and other items used by children must be clean and of safe construction and in good repair. Providers and staff should be actively engage with children in care to promote positive adult-child relationships.

-- List all citations for these requirements, including those for licensed and license-exempt providers

K.A.R. 28-4-116 (a), K.A.R. 28-4-440(o), K.A.R. 28-4-588

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care.

N/A

--Describe if relatives are exempt from this requirement

N/A

5.2.3 Health and safety training for CCDF providers on required topics.

Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served, that address the health and safety topics described in 5.2.2, and child development. Lead Agencies must also have ongoing training requirements on the health and safety topics for caregivers, teachers, and directors of children receiving CCDF funds (658E(c)(2)(I)(i); 98.44(b)(1)(iii)). The state/territory must describe its requirements for pre-service or orientation training and ongoing training. These trainings should be part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory. Lead Agencies have flexibility in determining the number of training hours to require, but they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

Pre-Service or Orientation Training Requirements

a) Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:

1. Licensed child care centers:

No minimum number of pre-service or orientation training hours is set - the requirements only specify the topics that must be covered. All training must be pre-approved by KDHE to meet the requirements.

2. Licensed FCC homes:

No minimum number of pre-service or orientation training hours is set- the requirements only specify the topics that must be covered. All training must be pre-approved by KDHE to meet the requirements.

3. In-home care:

CCDF authorized in-home care is only provided by relatives and is exempt from training requirements, except for the required on-line DCF Provider training.

4. Variations for exempt provider settings:

DCF has an MOU with Flint Hills Job Corps which is overseen by the US Dept. of Labor. The MOU specifies that all staff must complete training on specified topics but no hour requirement is regulated. Licensed providers in other states must meet the pre-service or orientation training hours on health and safety topics as specified by the licensing state

b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer)

Not later than 30 calendar days after the date of employment.

c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served

Prevention of sudden infant death syndrome and the use of safe-sleep practices is only required if the individual will be caring for children under 12 months of age.

d) Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered

Professional development training is offered in a variety of ways, include face to face and on line training. Training must be approved by KDHE. A face to face test is required for Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR) certifications.

e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).

1. Prevention and control of infectious diseases (including immunizations)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only other CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian. KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only

other CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian. KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 3. Administration of medication, consistent with standards for parental consent

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587.

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only other CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care

for children unsupervised?

- Yes
 No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
 No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 4. Prevention and response to emergencies due to food and allergic reactions

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587.

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only in state CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian. KDHE License Exempt providers from out of state must meet their current state requirements for Licensing and CCDF funding. KDHE License Exempt providers from out of state must meet their current state requirements for Licensing and CCDF funding.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- Yes
 No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed

to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587.

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only in state CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian. KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587.

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only other CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian. KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587.

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only in state CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian. KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587.

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only in state CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian. KDHE License Exempt providers from out of state

must meet thier current state requirements for Licensing and CCDF funding.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 9. Appropriate precautions in transporting children (if applicable)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587.

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only in state CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian. KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 10. Pediatric first aid and CPR certification

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587.

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only in state CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian. KDHE License Exempt providers from out of state must meet their current state requirements for Licensing and CCDF funding.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 11. Recognition and reporting of child abuse and neglect

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587.

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only in state CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian. KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-428a; K.A.R. 28-4-114a; K.A.R. 28-4-587.

DCF has a Memorandum of Agreement with the Flint Hills Job Corps, the only in state CCDF exempt provider. Their agreement states that they must meet or exceed the state licensing Health & Safety requirements. In-home relative providers must be related to all children in care. Health & Safety checklist is completed by provider and parent/guardian. KDHE License Exempt providers from out of state must meet thier current state requirements for Licensing and CCDF funding.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from requirements. Health & Safety checklist is completed by provider and parent/guardian.

5.2.3e 13.

Describe other training requirements, such as nutrition, physical activities, caring for children with special needs, etc..

N/A

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

N/A

Ongoing Training Requirements

5.2.4 Provide the minimum number of annual training hours on health and safety topics for caregivers, teachers, and directors required for the following.

a) Licensed child care centers:

Annual training is required but the topics are not specified. The only Health and Safety topic requirement is that certification for CPR and Pediatric First Aid must be kept current. Each licensure year, each program director shall assess the training needs of each staff member and each volunteer and shall provide or arrange for annual service training as needed. In each licensure year each staff member counted in the staff-child ratio and each volunteer counted in the staff-child ratio shall complete in-service training as follow, based upon the staff member's or volunteer's job responsibilities and the trainings identified by the program directors: For each licensure year ending during the 2018 calendar year, 10 clock hours; for each licensure year ending during the 2019 calendar year, 12 clock hours; and for each licensure year ending during the 2020 calendar year, and for each subsequent year, 16 clock hours. Annual professional

development hours required for each program director are as follows: For each licensure year ending during the 2018 calendar year, 5 clock hours; for each licensure year ending during the 2019 calendar year, 12 clock hours; and for each licensure year ending during the 2020 calendar year, and for each subsequent year, 16 clock hours.

b) Licensed FCC homes:

Annual training is required but the topics are not specified. The only Health and Safety topic requirement is that certification for CPR and Pediatric First Aid must be kept current. Annual professional development hours required are as follows: For each licensure year ending during the 2018 calendar year, 5 clock hours; for each licensure year ending during the 2019 calendar year, 12 clock hours; and for each licensure year ending during the 2020 calendar year, and for each subsequent year, 16 clock hours

c) In-home care:

In-home care is only authorized for relatives and they are exempt from Health & Safety training requirements.

d) Variations for exempt provider settings:

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

5.2.5 Describe the ongoing health and safety training for CCDF providers by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

1. Prevention and control of infectious diseases (including immunizations)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers entering into agreements with DCF must meet the annual training requirements as specified by their state licensing entity.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

-- How often does the state/territory require that this training topic be completed by

caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

3. Administration of medication, consistent with standards for parental consent

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

-- How often does the state/territory require that this training topic be completed by

caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

4. Prevention and response to emergencies due to food and allergic reactions

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

5. Building and physical premises safety, including the identification of and protection

from hazards, bodies of water, and vehicular traffic

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

-- How often does the state/territory require that this training topic be completed by

caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

9. Appropriate precautions in transporting children (if applicable)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

10. Pediatric first aid and CPR certification

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary and to maintain their current first aid and CPR certifications.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

11. Recognition and reporting of child abuse and neglect

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

K.A.R. 28-4-587; K.A.R. 28-4-114a; K.A.R. 28-4-428a.

Flint Hills Job Corps has an MOU with DCF and must meet center licensing standards on annual training requirements.

Out of state licensed providers contracting with DCF must meet the annual training requirements as specified by their state licensing entity.

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Initially and then as the provider deems necessary.

13. Describe other requirements such as nutrition, physical activities, caring for children with special needs, etc..

N/A

Provide the citation for other training requirements, including citations for both licensed and license-exempt providers

N/A

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

N/A

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

N/A

5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

5.3.1 Enforcement of licensing and health and safety requirements

Lead agencies must certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with all applicable State and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.3.2.

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements

CCDF FCC Homes and Centers have an agreement with DCF. Their agreement specifies that they must have a current KDHE license and not be under any KDHE enforcement actions and must continue to be in compliance with KDHE regulations. Health and Safety requirements are required by Kansas licensing regulations. Completion of training on all new child care providers and staff are verified by child care licensing surveying staff.

5.3.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections-with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards-of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the

same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)). Certify by responding to the questions below to describe your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

a) Licensed CCDF center-based child care

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed child care center providers for compliance with health, safety, and fire standards

New facilities are inspected prior to the issuance of a license. The first onsite inspection for an Initial license is announced and the second onsite inspection is unannounced. Pursuant to K.S.A. 65-504 the applicant must be in full compliance to receive a license.

Kansas law requires that all child care facilities comply with all applicable fire codes and rules and regulations of the state fire marshal. An application for a center-based facility is not deemed complete unless it includes Kansas Fire Marshal Approval. Home based facilities must submit an attestation to comply with fire codes with an application and Kansas Health Environment refers the applicant's information to the State Fire Marshal for inspection. Annual inspections by the State Fire Marshal are required and if there is an issue of compliance the fire marshal notifies child care licensing at Kansas Health and Environment by issuing a compliant.

Kansas law allows for the issuance of a license only after the child care facility is found in full compliance. All child care facilities, home and center based, receive an initial inspection and annual inspections. An inspection is also required when a complaint has been received. A license cannot be issued if a facility is not found in compliance with child care laws and regulation. An annual inspection is required. All laws and regulations must be found in compliance during the annual inspection. If non-compliance is found the licensee must correct within 5 days. A second onsite inspection may be required to determine compliance was achieved.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers

Existing facilities are inspected annually, which may require two inspection. An onsite

unannounced inspection is required for all complaints of regulatory non-compliance. Additional inspections, compliance inspections, may be conducted due to the history of a facility to maintain compliance with licensing statutes and regulations. Annual, complaint and compliance inspections are unannounced.

3. Identify the frequency of unannounced inspections:

- Once a year
- More than once a year

Describe:

Once a year and upon receipt of a complaint of regulatory non-compliance.

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards.

All inspections except the first onsite visit for an initial are unannounced. Procedures: Review the facility history file for any concerns to consider during the survey is completed prior to the onsite inspection. The web based template is not applied until the time of the survey. This is important in the event the provider has received a complaint that will make them ineligible for the indicator survey.

A complete walk through of the entire facility, both inside and outside, is to be conducted, including a count of staff and children. Note: for a licensed or group day care home the entire premises is licensed. K.S.A. 65-512 grants authority to inspect all areas even if they are made inaccessible. Rooms that the licensee designates as "not used by children" should be evaluated for presence of children or hazards that present a health or safety risk.

During the inspection the surveyor focuses on reviewing and assessing compliance with the licensing statutes and regulations, observes child care practices and ask questions in order to determine compliance, and provide technical assistance as needed on regulations and whatever issues are relevant to the provider.

Findings of noncompliance are documented according to licensing procedures. Consultations and technical assistance provided is documented. Answering questions

posed by the provider is not typically considered technical assistance and consultation. Conduct the exit interview- a review of non-compliance Significant non-compliance may result in an additional onsite inspection.

The first onsite inspection for an initial applicant is a scheduled inspection. A second onsite inspection is unannounced. All annual, compliance and complaint inspections are unannounced.

An initial license cannot be issued prior to full compliance with all laws and regulations that govern child care licensing pursuant to law. Kansas child care licensing regulations specify health and safety and fire standards for each program type. Kansas child care licensing regulations meet the definitions of the CCDF health and safety and fire standards. An onsite inspection is required to determine full compliance.

[5. List the citation\(s\) for your state/territory's policies regarding inspections for licensed CCDF center providers](#)

K.S.A. 65-504 Requires compliance with laws and regulations for issuance of a license

K.S.A. 65-508 Requires compliance with Kansas State Fire Codes

K.S.A. 65-512 Requires inspections

[b\) Licensed CCDF family child care home](#)

[1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed family child care providers for compliance with health, safety, and fire standards](#)

The first onsite inspection for an initial applicant is a scheduled inspection. A second onsite inspection is unannounced. All annual, compliance and complaint inspections are unannounced.

An initial license cannot be issued prior to full compliance with all laws and regulations that govern child care licensing pursuant to law. Kansas child care licensing regulations specify health and safety and fire standards for each program type. Kansas child care licensing regulations meet the definitions of the CCDF health and safety and fire standards. An onsite inspection is required to determine full compliance.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF family child care providers

Annual, complaint and compliance inspections are unannounced. Existing facilities are inspected annually, and inspections are unannounced. The annual inspection may require two onsite unannounced inspections. Complaint inspections regarding regulatory concerns are also conducted and are unannounced. Unannounced compliance inspections may be required in addition to the annual inspections to determine if compliance was obtained and/or is being maintained.

3. Identify the frequency of unannounced inspections:

- Once a year
- More than once a year

Describe:

Once a year and upon receipt of a complaint of regulatory non-compliance.

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

Kansas Licensing Indicator System- Criteria for Use of the Licensing Indicator System

A. If all of the following criteria are met, a child care center or home is eligible for the annual survey to begin as an indicator survey.

1. The facility has had a full license at the current address for the past two years. A facility with a temporary permit is not eligible.
2. The facility has had an initial and one annual survey or at least two annual surveys completed within the past two years.
3. There has been no change in ownership, licensed premises, or program type within the past two years.
4. In the past year, administration of the facility has remained the same:
 - a. the program director in the center or preschool has not changed;
 - b. the primary care provider (when the owner is not the primary care provider) in a licensed day care home has not changed;
 - c. at least one primary care provider in a group day care home has not changed.
5. The most recent survey (annual, complaint or compliance) was in compliance or a corrective action plan was accepted. The CLARIS status indicates "complete".
6. The facility is in compliance with the terms of the license (the number and ages of children and the use of approved space) and any occupancy, building code, zoning, or

fire safety violations have been resolved.

7. The facility has not had any of the following Administrative Orders or combination of administrative orders issued within the past two years:

- a. Intent to Deny [K.S.A. 65-504];
 - b. Intent to Assess a Civil Penalty [K.S.A. 65-526];
 - c. Intent to Suspend [K.S.A. 65-523 (limit, modify or suspend)];
 - d. Intent to Revoke [K.S.A. 65-504] for noncompliance; does not include a Notice of Intent to Revoke for a prohibited person that has been resolved;
 - e. Emergency Order of Suspension [K.S.A. 65-524 (limit, modify or suspend)].
8. The facility does not have a consent agreement resolving an Administrative Order in effect.
9. There are no pending complaints or incidents currently under investigation by the Department.
10. There have been no substantiated complaints within the past year.

B. A full annual survey must be conducted every third year (an indicator survey will not replace the full annual survey at a facility for more than two years).

C. Use of the indicator system will not be announced to the provider in advance of the survey. 1. If at any time during a licensing indicator survey, one licensing violation is found for an indicator or any other regulation on the survey tool, all paragraphs and subsections within the regulation are to be reviewed for compliance.

2. During the indicator survey, as soon as two or more regulatory violations with an indicator regulation or any other regulation on the survey tool are determined, then the indicator survey is ended and a full survey is conducted.

3. Noncompliance with regulations, not included on the indicator survey tool, should be cited and documented in the designated tab within the survey module. For example, the surveyor may need to look at the license to assess compliance with the number of children observed in the center or home. If the surveyor observes that the license is not posted as required, this should be cited. However, the surveyor should not then begin to assess compliance with all paperwork posting regulations as that would be outside the scope of the licensing indicator survey.

4. Document findings of noncompliance according to licensing procedures.

5. Document consultation and technical assistance provided according to licensing procedures. Answering questions posed by the provider is not typically considered technical assistance and consultation.

6. Conduct the exit interview. Significant non-compliance may result in an additional onsite inspection.

[5. List the citation\(s\) for your state/territory's policies regarding inspections for licensed CCDF family child care providers](#)

K.S.A. 65-512

[c\) Licensed in-home CCDF child care](#)

N/A. In-home CCDF child care (care in the child's own home) is not licensed in the State/Territory. Skip to 5.3.2 (d).

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF in-home child providers

3. Identify the frequency of unannounced inspections:

Once a year

More than once a year

Describe:

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers

d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers

Kansas Department of Health and Environment (KDHE)

5.3.3 Inspections for license-exempt CCDF providers

Lead Agencies must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety (including, but not limited to, those requirements described in 98.41), and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Lead Agencies have the option to exempt relative providers (as described in section (658P(6)(B)) from this requirement. To certify, respond to the questions below to describe the policies and practices for the annual monitoring of:

a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

Current MOUs with in state license exempt providers specify that they must have at least one unannounced inspection annually and must provide a copy of the full inspection for posting. Providers must meet required licensing inspection requirements including health and safety regulations and fire inspections. Out of state licensed providers entering into an agreement with DCF to accept child care subsidy must meet the requirements as specified by their state licensing entity and must be a CCDF provider in that state.

[Provide the citation\(s\) for this policy or procedure](#)

This information is provided within our MOU agreements with in-state license exempt providers.

b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

Out of state licensed providers contracting with DCF must meet the requirements as specified by their state licensing entity and must be a CCDF provider in that state meeting all CCDF monitoring requirements including unannounced inspections.

DCF's Kansas Economic and Employment Services Manual (KEESM) Section 10032 addresses this requirement for out of state provider.

Out of State Providers-Providers who care for Kansas children but reside in a state other than Kansas must meet the minimum requirements for child care providers, be licensed and a subsidy provider in their state of residence (not applicable to out of home relative or in-home relative providers). Documentation of compliance with that state will be required to approve the provider for enrollment. DCF will check The National Database of Child Care Licensing Regulations to see if the out of state requirements are being met.

[Provide the citation\(s\) for this policy or procedure](#)

All licensed exempt facilities are required to renew with DCF yearly. (KEESM 10022,10033) DCF cannot enroll a person or persons living or working in the household or facility where care will be provided with someone who is listed as a prohibited person in the Child Abuse/Neglect Central Registry or the Adult Abuse, Neglect or Exploitation

Registry and/or listed in [Kansas Adult Supervised Population Electronic Repository](#) (KASPER) as being convicted of a felony. (KEESM 10035 (1), KEESM 10031(6) Provider Handbook, the provider enrollment forms and application). Provider's must also sign the policy on discipline and the health and safety standards form and return it with their enrollment paperwork. (Provider handbook, provider enrollment forms, provider application) All records of required trainings are to be submitted to the agency at application and yearly renewal. (MOU) If a program is not located within a school a fire inspection from the local fire inspector is completed and documentation is required. (Provider handbook, KEESM 10033, and unregulated provider enrollment forms and application)

c) [License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used](#)

The only in-home CCDF providers are relative providers and are exempt from this requirement.

[Provide the citation\(s\) for this policy or procedure](#)

N/A

d) [Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home \(98.42\(b\)\(2\)\(iv\)\(B\)\). Does your state use alternate monitoring procedures for monitoring in-home care?](#)

No

Yes. If yes,

decide:

e) [List the entity\(ies\) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers](#)

Flint Hills Job Corps is our one in-state License exempt provider and is under the direction of the US Department of Labor. Out of state licensed providers contracting with DCF must meet the requirements as specified by their state licensing entity.

5.3.4 Licensing inspectors.

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the State's licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1-2)).

a) To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers and that those inspectors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

Licensing inspectors, (referred to as surveyors), must be qualified as an RN or have a 4-year degree in nursing, early childhood or elementary education, child development, human development, social work or related field. All licensing inspectors are trained one-on-one with a seasoned inspector and/or a Kansas Health and Environment, (KDHE), Child Care Licensing District Specialist. The training includes conducting initial and annual inspections, conducting an inspection during a complaint investigation, a full review of child care laws and regulations, as well as how to determine if health and safety training and requirements are met by a child care provider. In addition, it is recommended by the licensing agency that all inspectors take the required provider health and safety trainings to better understand the information the providers are receiving. As stated in the licensing inspector contract annual professional development related to the work of an inspector is required, a minimum of 5 clock hours. Licensing inspectors are also required to attend 3 of 4 quarterly KDHE Regional Meetings for training with a District Specialist for ongoing training related to regulations and procedures.

b) Provide the citation(s) for this policy or procedure

KDHE Aid to Local Contract.

Kansas Health and Environment, Child Care Licensing, District Specialist Procedures.

5.3.5 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).

a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

MOU language between the Lead Agency and the Child Care Licensing agency has been updated to include language to meet requirements of adequate staffing to meet the timeliness requirements.

b) Provide the policy citation and state/territory ratio of licensing inspectors

KDHE does not have a policy for surveyor ratio but does mandate in Aid to Local Contracts or in performance reviews requirements for KDHE staff, that surveys are conducted with 90% timeliness. Timeliness is reviewed quarterly at KDHE District Specialists meetings. Regional Administrators and District Specialists work with surveyors to improve timeliness by providing time management guidance and/or by assisting with surveys.

5.3.6 States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from inspection requirements. Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from the inspection requirements listed in 5.3.3?

Yes, relatives are exempt from all inspection requirements.

If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care.

Each relative provider and the parent must complete a Health and Safety checklist pertaining to the place where care will be provided. The Checklist is signed by both the parent and provider and submitted to DCF

Yes, relatives are exempt from some inspection requirements.

If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.

No, relatives are not exempt from inspection requirements.

5.4 Criminal Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct criminal background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For FCC homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)).

A criminal background check must include 8 specific components (98.43(2)(b)), which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks

Components	In-State	National	Inter-State
1. Criminal registry or repository using fingerprints in the current state of residency	x		
2. Sex offender registry or repository check in the current state of residency	x		
3. Child abuse and neglect registry and database check in the current state of residency	x		
4. FBI fingerprint check		x	

5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)		x	
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional			x
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years			x
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years			x

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met by responding to questions 5.4.1 through 5.4.4 and then apply for the time-limited waiver by completing the questions in Appendix A: Background Check Waiver Request Form. By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 98.43 and 98.16(o):

--The national FBI fingerprint check; and,	
--The three in-state background check provisions for the current state of residency:	
	--state criminal registry or repository using fingerprints;
	--state sex offender registry or repository check;
	--state-based child abuse and neglect registry and database.

All four components are required in order for the milestone to be considered met.

Components	New (Prospective) Staff	Existing Staff
1. Criminal registry or repository using fingerprints in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
2. Sex offender registry or repository check in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
3. Child abuse and neglect registry and database check in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
4. FBI fingerprint check	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff

5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff

Use the questions below to describe the status of the requirements, policies and procedures for background check requirements. These descriptions must provide sufficient information to demonstrate how the milestone prerequisites are being met and the status of the other components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form, for components not included in the milestones. Approval of these waiver requests will be subject to verification that the milestone components have been met as part of the CCDF Plan review and approval process.

In-state Background Check Requirements

5.4.1 In-State Criminal Registry or Repository Checks with Fingerprints Requirements (98.43(b)(3)(i)).

Note: A search of a general public facing judicial website does not satisfy this requirement. This check is required in addition to the national FBI criminal history check (5.4.4 below) to mitigate any gaps that may exist between the two sources.

a) Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or

repository, with the use of fingerprints required in the state where the staff member resides.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Amended licensing regulations to include all of the requirements of a comprehensive background check specifying which individuals will be required to have fingerprint-based background checks became effective on June 7, 2018. Regulations are as follows: K.A.R. 28-4-128, K.A.R. 28-4-584, K.A.R. 28-705.

Regulations that are required to collect the background check fee were delayed at the date of the hearing due to other law changes which required KDHE Child Care Licensing to start the promulgation process over. A hearing is scheduled for October 3, 2018 and expected implementation of background check regulations date is December 3, 2018.

KDHE collaborated with the department of Kansas Bureau of Investigations to develop a plan of implementation for the Kansas criminal fingerprint-based background check. Requirements, policies and procedures have been developed and are in draft. Finalization is pending prior to implementation due to any required updates due to system upgrades. Fingerprint based checks will apply to all licensed providers, employees and volunteers 16 and older working in the facility. Household members age 18 and over will also have to comply. Child care providers were informed regarding requirements and implementation via email, USPS and updates to the webpage. A background check email address was created and made available to the public via the KDHE CCL webpage to ensure prompt responses to questions. Background check packets that include the required documents for obtaining the fingerprint-based checks were developed and printed and will be made available to providers during the license renewal period. New staff beginning at the facility prior to the facility renewal period, (beginning December 2018-November 2019), will continue to have the name-based state criminal and abuse and neglect registry checks until the facility renewal period. After the facility renewal period all new staff will be required to be submitted for the comprehensive background check prior to the first day of employment.

KBI results will be reported back to KDHE CCL as stipulated by KBI procedure.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Flint Hills Job Corp is under the authority of the US Department of Labor. They have signed an agreement with DCF and have agreed to meet all KDHE licensing standards including background checks. Out of state licensed providers contracting with DCF must meet the licensing requirements of their state and must be a CCDF Provider for that state.

b) Has the search of the in-state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

At renewal (beginning December 2018-November 2019) existing staff will be required to be submitted for the comprehensive background check.

KDHE collaborated with the department of Kansas Bureau of Investigations to develop a plan of implementation for the Kansas criminal fingerprint-based background check.

Requirements, policies and procedures have been developed and are in draft.

Finalization is pending prior to implementation due to any required updates due to system upgrades. Fingerprint based checks will apply to all licensed providers,

employees and volunteers 16 and older working in the facility. Household members age

18 and over will also have to comply. Child care providers were informed regarding requirements and implementation via email, USPS and updates to the webpage. A background check email address was created and made available to the public via the KDHE CCL webpage to ensure prompt responses to questions. Background check packets that include the required documents for obtaining the fingerprint-based checks were developed and printed and will be made available to providers during the license renewal period.

Results will be reported back to KDHE CCL as stipulated by KBI procedure.

Amended licensing regulations to include all of the requirements of a comprehensive background check specifying which individuals will be required to have fingerprint-based background checks became effective on June 7, 2018. Regulations are as follows: K.A.R. 28-4-128, K.A.R. 28-4-584, K.A.R. 28-705.

Regulations that are required to collect the background check fee were delayed at the date of the hearing due to other law changes which required KDHE Child Care Licensing to start the promulgation process over. A hearing is scheduled for October 3, 2018 and expected implementation of background check regulations date is December 3, 2018.

The fingerprint and comprehensive background check requirements will be implemented for all initial and renewal applicants (currently affiliated) by December 1, 2018 and completing with renewals November 30, 2019. KS is requesting the waiver extension to meet the requirement to conduct a five-year lookback at any states a person may have resided in. The system build is still in process and many of the policies and procedures are in draft but cannot be completed until closer to the date of completion.

5.4.2 In-State Sex Offender Registry Requirements (98.43(b)(3)(B)(ii)).

Note: This check must be completed in addition to the national NCIC sex offender registry check (5.4.5 below) to mitigate any gaps that may exist between the two sources. Use of fingerprints is optional to conduct this check.

a) Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state sex offender registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Requirements, policies and procedures are still being developed. They will apply to all licensed providers, employees and volunteers 16 and older working in the facility. Household members age 18 and over will also have to comply.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Flint Hills Job Corp is under the authority of the US Department of Labor. They have signed an agreement with DCF and have agreed to meet all KDHE licensing standards including background checks. Out of State licensed providers contracting with DCF must meet the licensing requirements of their state and must be a CCDF provider for that state.

b) Has the search of the in-state sex offender registry been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Amended licensing regulations to include all the requirements of a comprehensive background check specifying which individuals will be required to have checks became effective on June 7, 2018. Regulations are as follows: K.A.R. 28-4-128, K.A.R. 28-4-584, K.A.R. 28-705.

Regulations that are required to collect the background check fee were delayed at the date of the hearing due to other law changes which required KDHE Child Care Licensing to start the promulgation process over. A hearing is scheduled for October 3, 2018 and expected implementation of background check regulations date is December 3, 2018.

KDHE collaborated with the department of Kansas Bureau of Investigations to develop a plan of implementation for the Kansas State Sex-Offender Registry and NCIC. This check will take place simultaneously with the Kansas Criminal Background Check and results will be reported back to KDHE CCL as stipulated by KBI procedure.

Requirements, policies and procedures have been developed and are in draft. Finalization is pending prior to implementation due to any required updates due to system upgrades. Kansas State Sex-Offender Registry and NCIC checks will be required for all licensed providers, employees and volunteers 16 and older working in the facility. Household members age 18 and over will also have to comply.

Child care providers were informed regarding requirements and implementation via email, USPS and updates to the webpage. A background check email address was created and made available to the public via the KDHE CCL webpage to ensure prompt responses to questions. Background check packets that include the required documents for obtaining the fingerprint-based checks were developed and printed and will be made available to providers during the license renewal period. New staff beginning at the facility prior to the facility renewal period, (beginning December 2018-November 2019), will continue to have the name-based state criminal and abuse and neglect registry checks until the facility renewal period. After the facility renewal period all new staff will be required to be submitted for the comprehensive background check prior to the first day of employment.

5.4.3 In-State Child Abuse and Neglect Registry Requirements (98.43(b)(3)(B)(iii)).

Note: This is a name-based search.

a) Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state child abuse and neglect registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

K.S.A. 65-516, restricts individuals from working, residing or volunteering if they have been added to a registry. K.A.R. 28-4-125,(center and home-based care),requires in-state child abuse and neglect registry checks for all individuals over 10 years of age who resides, works or volunteers in the facility. K.A.R. 28-4-584 (School Age Programs), requires each applicant and each operator shall submit the identify information that is necessary to complete a child abuse registry background check for each individual 14 years of age or older who works, substitutes or regularly volunteers in the program. K.A.R. 28-705, (Drop in Program), requires each applicant and each operator shall submit each individuals identifying information for the necessary child abuse registry background check.

This check will continue for new staff submitted.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

DCF staff check the state child abuse and neglect registry for all relative providers and Job Corps staff. Out of state licensed providers contracting with DCF must meet the requirements as specified by their state licensing entity and must be a CCDF provider in that state.

b) Has the search of the in-state child abuse and neglect registry been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

Each applicant, applicant with a temporary permit, and licensee shall meet the following requirements: Submit to the department the identifying information necessary to complete background checks for each individual who works or regularly volunteers in the facility, each individual at least 10 years of age who resides in the facility, and any other individual in the facility whose activities involve either supervised or unsupervised access to children.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state child abuse and neglect registry for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

National Background Check Requirements

5.4.4 National FBI Criminal Fingerprint Search Requirements (98.43(b)(1)).

Note: The in-state (5.4.1 above) and the inter-state (5.4.6 below) criminal history check must be completed in addition to the FBI fingerprint check because there could be state crimes that do not appear in the national repository. Also note, that an FBI fingerprint check satisfies the

requirement to perform an interstate check of another State's criminal history records repository if the responding state (where the child care staff member has resided within the past five years) participates in the National Fingerprint File program (CCDF-ACF-PIQ-2017-01).

a) Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies and procedures for the search of the National FBI fingerprint check.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Amended licensing regulations to include all of the requirements of a comprehensive background check specifying which individuals will be required to have fingerprint-based background checks became effective on June 7, 2018. Regulations are as follows: K.A.R. 28-4-128, K.A.R. 28-4-584, K.A.R. 28-705.

Regulations that are required to collect the background check fee, including the FBI fee, were delayed at the date of the hearing due to other law changes which required KDHE Child Care Licensing to start the promulgation process over. A hearing is scheduled for October 3, 2018 and expected implementation of background check regulations date is December 3, 2018.

KDHE collaborated with the department of Kansas Bureau of Investigations to develop a plan of implementation for the FBI criminal fingerprint-based background check. Upon receipt of the fingerprints the KBI will forward prints to FBI for the required check. Requirements, policies and procedures have been developed and are in draft. Finalization is pending prior to implementation due to any required updates due to system upgrades. Fingerprint based checks will apply to all licensed providers, employees and volunteers 16 and older working in the facility. Household members age 18 and over will also have to comply. Child care providers were informed regarding requirements and implementation via email, USPS and updates to the webpage. A background check email address was created and made available to the public via the KDHE CCL webpage to ensure prompt responses to questions. Background check packets that include the required documents for obtaining the fingerprint-based checks were developed and printed and will be made available to providers during the license renewal period. New staff beginning at the facility prior to the facility renewal period, (beginning December 2018-November 2019), will continue to have the name-based state

criminal and abuse and neglect registry checks until the facility renewal period. After the facility renewal period all new staff will be required to be submitted for the comprehensive background check prior to the first day of employment.

FBI results will be reported back to KBI and forwarded to KDHE CCL as stipulated by KBI procedure.

Kansas is an NFF state and will obtain out of state information as permitted. KDHE legal is working with program to best determine how to obtain timely results. At this time a plan for obtaining all other required background check information for individuals having lived in other states in the past five years has not been finalized.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Flint Hills Job Corps is managed by the US Department of Labor. They have an MOU with DCF stating they will meet or exceed all KDHE licensing requirements (including background checks). Out of State licensing providers contracting with DCF must meet the requirements as specified in their state licensing entity and must be a CCDF provider in that state. Relative providers are exempt from this requirement.

b) For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Amended licensing regulations to include all of the requirements of a comprehensive background check specifying which individuals will be required to have fingerprint-based background checks became effective on June 7, 2018. Regulations are as follows:

K.A.R. 28-4-128, K.A.R. 28-4-584, K.A.R. 28-705.

Regulations that are required to collect the background check fee, including the FBI fee, were delayed at the date of the hearing due to other law changes which required KDHE Child Care Licensing to start the promulgation process over. A hearing is scheduled for October 3, 2018 and expected implementation of background check regulations date is December 3, 2018.

KDHE collaborated with the department of Kansas Bureau of Investigations to develop a plan of implementation for the FBI criminal fingerprint-based background check. Upon receipt of the fingerprints the KBI will forward prints to FBI for the required check. Requirements, policies and procedures have been developed and are in draft. Finalization is pending prior to implementation due to any required updates due to system upgrades. Fingerprint based checks will apply to all licensed providers, employees and volunteers 16 and older working in the facility. Household members age 18 and over will also have to comply. Child care providers were informed regarding requirements and implementation via email, USPS and updates to the webpage. A background check email address was created and made available to the public via the KDHE CCL webpage to ensure prompt responses to questions. Background check packets that include the required documents for obtaining the fingerprint-based checks were developed and printed and will be made available to providers during the license renewal period. New staff beginning at the facility prior to the facility renewal period, (beginning December 2018-November 2019), will continue to have the name-based state criminal and abuse and neglect registry checks until the facility renewal period. After the facility renewal period all new staff will be required to be submitted for the comprehensive background check prior to the first day of employment.

FBI results will be reported back to KBI and forwarded to KDHE CCL as stipulated by KBI procedure.

Kansas is an NFF state and will obtain out of state information as permitted. KDHE legal is working with program to best determine how to obtain timely results. At this time a plan for obtaining all other required background check information for individuals having lived in other states in the past five years has not been finalized.

National Background Check Requirements

5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).

Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the in-state (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

a) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

The licensing agency, Kansas Health and Environment, is working with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS will be asking for an extension to implement the requirements. The fingerprint and comprehensive background check requirements will be implemented for all initial and renewal applicants (currently affiliated) by December 1, 2018 and completing with renewals November 30, 2019. KS will also be asking for the extension to meet the requirement to conduct a five year lookback at any states a person may have resided in. The system build is still in process and many of the policies and procedures are in draft but cannot be completed until closer to the date of completion

b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

The licensing agency, Kansas Health and Environment, is working with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS will be asking for an extension to implement the requirements. The fingerprint and comprehensive background check requirements will be implemented for all initial and renewal applicants (currently affiliated) by December 1, 2018 and completing with renewals November 30, 2019. KS will also be asking for the extension to meet the requirement to conduct a five-year lookback at any states a person may have resided in. The system build is still in process and many of the policies and procedures are in draft but cannot be completed until closer to the date of completion.

Inter-state Background Check Requirements

Checking a potential employee's history in any state other than that in which the provider's services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43(b)(3). For example, an inter-state check would include situations when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resides and each state where the staff member resided during the previous 5 years. Background checks in the state where the staff member is employed may be advisable, but are not strictly required.

5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check (5.4.4 above) to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

- a) Has the interstate criminal registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the interstate criminal registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The licensing agency, Kansas Health and Environment, is working with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS will be asking for an extension to implement the requirements. The fingerprint and comprehensive background check requirements will be implemented for all initial and renewal applicants (currently affiliated) by December 1, 2018 and completing with renewals November 30, 2019. KS will also be asking for the extension to meet the requirement to conduct a five-year lookback at any states a person may have resided in. The system build is still in process and many of the policies and procedures are in draft but cannot be completed until closer to the date of completion.

b) Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate criminal registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The licensing agency, Kansas Health and Environment, is working with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS will be asking for an extension to implement the requirements. The fingerprint and comprehensive background check requirements will be implemented for all initial and renewal applicants (currently affiliated) by December 1, 2018 and completing with renewals November 30, 2019. KS will also be asking for the extension to meet the requirement to conduct a five-year lookback at any states a person may have resided in. The system build is still in process and many of the policies and procedures are in draft but cannot be completed until closer to the date of completion.

5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

a) Has the interstate sex offender registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The licensing agency, Kansas Health and Environment, is working with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS will be asking for an extension to implement the requirements. The fingerprint and comprehensive background check requirements will be implemented for all initial and renewal applicants (currently affiliated) by December 1, 2018 and completing with renewals November 30, 2019. KS will also be asking for the extension to meet the requirement to conduct a five year lookback at any states a person may have resided in. The system build is still in process and many of the policies and procedures are in draft but cannot be completed until closer to the date of completion.

b) Has the interstate sex offender registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The licensing agency, Kansas Health and Environment, is working with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS will be asking for an extension to implement the requirements. The fingerprint and comprehensive background check requirements will be implemented for all initial and renewal applicants (currently affiliated) by December 1, 2018 and completing with renewals November 30, 2019. KS will also be asking for the extension to meet the requirement to conduct a five year lookback at any states a person may have resided in. The system build is still in process and many of the policies and procedures are in draft but cannot be completed until closer to the date of completion.

5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).

Note: This is a name-based search.

a) Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The licensing agency, Kansas Health and Environment, is working with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS will be asking for an extension to implement the requirements. The fingerprint and comprehensive background check requirements will be implemented for all initial and renewal applicants (currently affiliated) by December 1, 2018 and completing with renewals November 30, 2019. KS will also be asking for the extension to meet the requirement to conduct a five-year lookback at any states a person may have resided in. The system build is still in process and many of the policies and procedures are in draft but cannot be completed until closer to the date of completion.

b) Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The licensing agency, Kansas Health and Environment, is working with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS will be asking for an extension to implement the requirements. The fingerprint and comprehensive background check requirements will be implemented for all initial and renewal applicants (currently affiliated) by December 1, 2018 and completing with renewals November 30, 2019. KS will also be asking for the extension to meet the requirement to conduct a five-year lookback at any states a person may have resided in. The system build is still in process and many of the policies and procedures are in draft but cannot be completed until closer to the date of completion.

Provisional Employment

The CCDF final rule states a child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2)). A prospective child care staff member may not begin work until one of the following results have been

returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF final rule, OCC will allow states and territories to request time-limited waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

1. the state requires the provider to submit the background check requests before the staff person begins working; and
2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below. (Waiver request allowed. See Appendix A). Check all that apply.

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides.

Describe and include a citation:

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but before receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A).

Describe and include a citation:

The department will provide each facility with a letter allowing provisional work once the fingerprint card, required KBI/FBI waiver and background payment have been submitted to the department and forwarded to KBI. Providers will have opportunity to participate on a webinar regarding background checks and provisional hire during the months of October and November 2018. In addition, information will be updated on the KDHE CCL webpage to include specifics related to provisional work.

Other.

Describe:

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

Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)).

Kansas participates in the National Fingerprint File (NFF) program. When other states submit fingerprints for an FBI check the file will indicate that the person has a rap sheet in Kansas. The inquiring state will receive a rap sheet from the KBI and the FBI.

Questions about the criminal history result can be referred to the KBI Records Unit at 785-296-2454. In addition, name based record checks can be completed at

<http://www.kansas.gov/kbi/criminalhistory> . There is a fee of \$20 per search. The name and date of birth of the individual is needed to conduct the search.

State agencies licensing child care homes or facilities who make requests for Child Abuse/Neglect registry checks are required to submit the signed release form (PPS 1011), available at <http://www.dcf.ks.gov/services/PPS/Pages/Child-Abuse-and-Neglect-Central-Registry.aspx> The following information is required in order to process a request:

the potential provider's name, all alias(es), other names used and/or maiden name (if applicable), date of birth and Social Security number. Responses to Central Registry requests will be emailed, mailed or faxed to the state agency requesting the information. There is no fee for processing requests from state child care licensing agencies.

Send request via email, postal mail or fax to:

Attention: DCF/Child Abuse and Neglect Central Registry

Requests may be emailed to:

DCF.CentralRegistry@ks.gov

Mailed to: DCF/Child Abuse and Neglect Central Registry

PO Box 2637

Topeka, KS 66612 Faxed to: 866-317-4279

5.4.11 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry. Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or - subject to an individual review (at the state/territory's option)- a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes - child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)).

Note: The Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable information (98.43(e)(2)(iii)).

Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(c)(i)?

No

Yes.

Describe other disqualifying crimes and provide citation:

DCF does not enter into agreements with providers who has been convicted or who have staff that have been convicted of any felony.

5.4.12 The state/territory has a process for a child care staff member to appeal the the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3).

Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2-4)).

All results of background checks are reviewed by the KDHE legal department. The licensed facility receives a notice that a person is not permitted to work in a child care facility but the prohibiting offense(s) is not disclosed.

Kansas Health and Environment legal department provides information related to appeal rights in the official prohibited person notice that is sent to the person identified as prohibited.

5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)).

Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. Lead Agencies can report that no fees are charged if applicable (98.43(f)).

A hearing has been set for October 3, 2018 Joint Committee on Rules and Regulations Hearing on K.A.R.28-4-95 which will give KDHE CCL the authority to collect background check fees. This was previously set for hearing, however new requirements imposed delayed the hearing and subsequent effective date. December 3, 2018 is the anticipated effective date.

The cost of the background check is \$48.00 per fingerprint check. This cost includes the

processing of the Kansas Bureau of Investigation fingerprint and Federal fingerprint fees and \$1 collected as a maintenance fee for the KanCheck system owned by The Kansas Department of Aging and Disability Services. Cost for taking of finger prints may vary according to site.

5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider.

Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

- No, relatives are not exempt from background check requirements.
- Yes, relatives are exempt from all background check requirements.
- Yes, relatives are exempt from some background check requirements. If the state/territory exempts relatives from some background check requirements, describe which background check requirements do not apply to relative providers. Relative providers are exempt from finger-printing and the 5-year look-back. Name and Social Security number checks are run on the Kansas Child Abuse and Neglect Registry, the Adult Abuse and Neglect Registry, the state and federal sex offender website and the Kansas Department of Corrections website.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

States and territories are required to describe their framework for training, professional

development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

6.1 Professional Development Framework

6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.

a) Describe how the state/territory's framework for training and professional development addresses the following required elements:

-- State/territory professional standards and competencies. Describe:

DCF, the Lead Agency contracts for professional development that requires use of the following standards and competencies:

- KS-MO Core Competencies for Early Childhood and Youth Development serves as the foundation for professional development systems for early childhood professionals.
- Kansas Early Learning Standards 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.

- Kansas Association for Infant and Early Childhood Mental Health (KAIMH) guidelines for Culturally Sensitive, Relationship Focused Practice Promoting Infant Mental Health
- Kansas Family Engagement and Partnership Standards for Early Childhood provides guidance for early childhood providers and educators, families, communities, and educational systems on the effective engagement of families.

-- **Career pathways. Describe:**

The Lead Agency's Kansas Child Care Workforce Professional Development contract includes establishment and facilitation of an advisory committee to research and refine a career pathway for child care professionals' ongoing professional development education and improved knowledge and skills. The pathway will be used to informally assess staff education levels and provide childcare professionals a foundation for planning their professional development progression. Lead Agency is participating in a professional development workgroup that includes early childhood professionals from both Kansas and Missouri. The work is facilitated by Mid-America Regional Council (MARC) and the goal is to develop a bi-state career lattice that clearly defines career pathways and credentials that can be earned on those pathways with multiple entry points.

-- **Advisory structure. Describe:**

DCF, the Lead Agency, included establishment and facilitation of an Advisory Committee in the Kansas Child Care Workforce Professional Development contract. The committee may include representation from DCF, KSDE, KDHE, Community Colleges, Universities, Early Head Start/Head Start, Child Care Aware of Kansas, KCCTO, KITS and Part C. This committee will provide recommendations for development, revision, and implementation of a professional development system.

-- **Articulation. Describe:**

Agreements are individually negotiated between two-year and four-year postsecondary programs.

-- **Workforce information. Describe:**

Child Care Aware of Kansas will release a 2018 update of the 2015 Workforce Study, Who Cares for Kansas Children. Further plans for data collection for workforce information will be developed within the Professional Development Advisory Committee.

-- Financing. Describe:

Lead Agency provides quality improvement financial incentives through the Statewide Infant and Toddler Network (ITSN) contract, the Kansas Child Care Workforce Professional Development contract, and the Links to Quality (QRIS) program. KCCTO, through the ITSN contract, provides quality improvement financial incentives to participants in Intensive Technical Assistance. Financial supports include funding necessary to implement the goals of their Intensive TA Plan. Financial incentives can include cost of environmental improvements, equipment, materials or professional development; funding to obtain the Kansas Association for Infant and Early Childhood Mental Health Endorsement; college credit for infant-toddler career pathway and scholarships to attend State Conferences (CCPS, KSAEYC, KAIMH, KDEC). KCCTO, through the ITSN contract, provides financial incentives for New Programs who have been in operation for less than 2 years and have an intensive TA plan. Eligibility for quality improvement financial incentives are based on their Environmental Rating Scale (ERS). Incentives include funds to increase the knowledge, skills, educational level, and competencies of infant toddler caregivers; funds to purchase materials in languages other than English, toys for children with visual, auditory or motor difficulties, visual supports, screening or curricular materials or equipment necessary for caring for infants and toddler. The Kansas Child Care Workforce Professional Development contract includes financial incentives that support trainers, child care providers seeking the CDA credential and child care providers who are seeking progression of professional development to improve quality of care in their program. The Links to Quality pilot includes participation incentives, grant incentives and recognition incentives to assist participants in their work to meet identified quality indicators.

b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

- Continuing education unit trainings and credit-bearing professional development to the extent practicable

Describe:

- Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's

framework

Describe:

Other

Describe:

6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.

The lead Agency (DCF) consulted with KDHE for Health and Safety training requirements for licensing. KCCTO, the current professional development contractor, developed two health and safety online training modules, Foundations for Safe and Healthy Early Care Facilities-Module 1 and Foundations for Safe and Healthy Early Care Facilities-Module 2. The modules include all courses for each of the health and safety requirements except for the CPR and first aid course. KCCTO offers CPR and First Aid Training as a face-to-face training. The Kansas Child Care Workforce Professional Development contract requires the establishment of an Advisory Committee of early childhood professionals to continue to advise on the state's profession development framework. The committee includes multiple agencies and stakeholders from family child care, center-based child care, Early Head Start/Head Start, and school age care. Agencies that must be included are DCF, KSDE, KDHE, Community Colleges, Universities, Early Head Start/Head Start, Child Care Aware of Kansas, Kansas Child Care Training Opportunities, KITS, and Part C.

6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).

To improve the quality, diversity, stability and retention of caregivers, teachers, and directors, the Kansas child care workforce contractor, Kansas Child Care Training Opportunities, Inc. (KCCTO), provides scholarships to providers for free or reduced costs trainings. Targeted training, as part of an Individualized Professional Development Plan (IPDP) will increase

knowledge, skills and competencies of caregivers. Scholarships may be awarded to child care providers who are taking college courses to obtain an early childhood certification or associates degree. The CDA Training Track assists providers interested in pursuing their CDA through an IPDP to guide training, coaching, mentoring and technical assistance necessary to obtain their CDA. The KCCTO contract offers a Leadership Series – Developing People course for program directors. This course is a book study of *The Art of Leadership Developing People in Early Childhood Organizations* which offers practical advice on selecting training, praising staff, and promoting teamwork among staff. The Infant Toddler Specialist Network (ITSN) quality improvement financial incentives target child care professionals who have a TA plan and are working with an Infant Toddler Specialist to increase knowledge, skills, educational level and competencies. The funding provided is for materials that support the goals established in the TA plan such as materials in language other than English, toys for children with visual, auditory or motor difficulties, visual supports, screening or curricular materials or equipment necessary for caring for infants and toddlers.

All Health and Safety Kansas Department of Health and Environment (KDHE) required courses are available in Spanish and moderated by a Spanish speaking trainer.

KCCTO/Kansas In-service Training System provides Early Childhood Resources in Spanish. All KCCTO coursework is developed and trained with consideration for the diverse population that are served. The KCCTO course, *Beyond a Celebration: Exploring Culture in Practice* provides participants with the understanding of the complexity of culture. It will engage participants in building effective relationships with diverse families and the technique on how to communicate effectively.

KCCTO, through the Infant - Toddler Specialist Network, has developed a Virtual Kit entitled *Understanding and Embracing Your Stress Through Self-Care*. This virtual kit shares information, resources and strategies that aid providers in identifying and implementing self-care practices to better understand, embrace, and utilize the everyday stresses in their lives.

6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development framework (98.44(b)).

Health and safety standards training is incorporated within the child care licensing training requirements. Early learning guidelines, social-emotional/behavioral and early childhood mental health intervention models, including positive behavioral intervention training, are available within the state Workforce Development contract and the Infant Toddler Specialist Network contract. Information on these trainings are made available to child care providers accepting subsidy through the Child Care Provider Handbook or the KQN website. Training and use of the Early Learning guidelines are also incorporated within Links to Quality pilot for participating providers.

6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).

All training and professional development courses through Kansas Child Care Training Opportunities, Inc., the agency with the Workforce Development contract with DCF, are accessible to all child care providers, anyone planning to become a provider or anyone just interested in learning new information. There are no limitations to who may take the training offered through Kansas Child Care Training Opportunities, Inc. The Interagency Agreement with Kickapoo Tribe in Kansas explicitly explains that CCDF supported workforce development courses are available to all providers throughout the state. Access to these workforce development courses has been verbally explained to Prairie Band Potawatomie Nation staff during a Tribal TANF coordination meeting.

6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers:

a) with limited English proficiency

Lead Agency's contract for Kansas Child Care Workforce Professional Development requires the contractor to respond to each learner's ability and cultural and linguistic background. The contract requires provision of translation and accommodations in all professional development trainings for non-English speaking learners. KCCTO's online foundational courses required for licensing will be available in Spanish and will be monitored by a Spanish-speaking trainer. Face-to-face trainers utilize translators within the community.

b) who have disabilities

KCCTO's course registration allows participants to identify needs for training accommodations. All online and face-to-face courses will adhere to Americans with Disabilities Act (ADA).

6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups

(such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii--iv)).

The Workforce Development contractor provides online training, community-based training and technical assistance appropriate for all providers of all age groups. There are a variety of trainings available to providers based on their individual needs and the needs of the children in their care. The contractor utilizes state and national best practice and evidence-based resources for course development. State resources includes KS-MO Core Competencies for Early Childhood and Youth Development Professionals and Kansas Early Learning Standards. These standards include learning environments and cognitive development, dual language learners, social and emotional development, and physical health and development. Providers who participate in KCCTO trainings and complete course evaluation survey can request additional information and/or technical assistance. Technical assistance, provided through the Workforce Development and Infant Toddler Specialist Network contracts, is based on provider requests and needs and is available to any provider at the intensity level required to meet the needs of their individual child care setting.

6.2.5 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).

a) Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).

The Kansas Early Learning Standards (KELS) Virtual Tool Kit provides Kansas early care and education practitioners and families with online resources which includes homelessness and meeting the needs of underserved populations. Training Modules include national resource links to McKinney-Vento as well as the Early Childhood Learning and Knowledge Center (ECLKC). In addition, KCCTO currently holds the contract for the Statewide Infant-Toddler Specialist Network. This contract agreement includes the development and offering of training opportunities for serving homeless children and families. DCF also funds the Kansas Child Care Workforce Professional Development contract which requires the

development of courses on identifying, serving and providing resources for families experiencing homelessness under the McKinney-Vento definition. Resources will include National center for Homeless Education (NCHE).

b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.2.2).

The state level interagency early childhood MOU has been up-dated and completed with agency signatures. It was developed to include the KSDE, McKinney Vento program. Other Lead Agency efforts include the funding of 2 contracts the Statewide Infant-Toddler Specialist Network and the Kansas Child Care Workforce Professional Development. Both contracts are required to provide training and technical assistance around supporting families experiencing homelessness. Lead Agency staff throughout the state are involved in varying ways with targeted work with families experiencing homelessness and have been involved in a variety of training and TA efforts to complete this work. In the East region, Economic and Employment Services (EES) workers take applications and provides information about agency and community resources directly from a local mission one day each week. Training was provided by the mission itself for this staff member. The Wichita region also has out-stationed staff at various homeless shelters, homes for victims of domestic violence and women's recovery centers one day a week. Staff members attend monthly homeless initiatives and board meetings, and report back what they are doing to help inform other case managers and provide updated information. They have provided TA in daily meetings with eligibility staff about services provided. The KC region has two projects supported by the McKinney Vento Homeless Assistance Act and the local school district where EES staff go into the community and provide assistance to homeless families. The training for the staff is hands-on. Four other workers rotate weekly to interview and provide benefits for families that have been identified as homeless by the Kansas City Public Schools. Johnson County has a program through the school district where partners, including DCF, come together bi-weekly to provide services. Training for this is also hands-on. Bridges Out of Poverty Training is a common training for new staff within EES.

6.2.6 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply

- Issue policy change notices
- Issue new policy manual
- Staff training
- Orientations
- Onsite training
- Online training
- Regular check-ins to monitor the implementation of CCDF policies

Describe the type of check-ins, including the frequency.

- Other

Describe:

Random provider reviews are done. During the review providers are given 1 on 1 training of the CCDF requirements and integrity.

6.2.7 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's business practices, which can include training and/or TA efforts.

a) Describe the strategies that the state/territory is developing and implementing for training and TA.

Business management courses area requirement of the Child Care Workforce Professional Development contract held by KCCTO. Current courses offered include: Building Your Business: Marketing Your Family Child Care; Power of Positive Communication; Tips & Tools for Contracts & Policies. KCCTO Infant Toddler Specialist Network offers technical assistance for new and established providers in all areas of

business management. KCCTO/ITSN provides outreach to all new child care licensing applicants and sends out a new provider packet followed by contact for technical assistance. ITSN Building Your Early Childhood Toolkit is a resource and training offered in communities throughout Kansas. All KCCTO courses are followed up with resource packages on the topic and information on how to receive additional technical assistance. Lead Agency partners offer opportunities for business practice courses that are not CCDF funded and include fiscal management, budgeting and recordkeeping. Links to Quality has participants look at business practices using the BAS and PAS assessment tools and corresponding quality indicators.

b) Check the topics addressed in the state/territory's strategies. Check all that apply.

- Fiscal management
- Budgeting
- Recordkeeping
- Hiring, developing, and retaining qualified staff
- Risk management
- Community relationships
- Marketing and public relations
- Parent-provider communications, including who delivers the training, education, and/or technical assistance
- Other

Describe:

6.3 Early Learning and Developmental Guidelines

6.3.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required

essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. Note: States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.

a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry

The current Kansas Early Learning Standards (KELS) are the third revision. The first document was completed in 2006 with the second revision done in 2009. Similar to previous revisions, the work focused on updating the standards based on new knowledge and research and the need to align the Kansas Early Learning Standards with the K-12 College and Career Ready Standards. The document provides information and guidance to early childhood providers and teachers, including primary grade teachers, on the developmental sequence of learning for children birth through kindergarten. The purpose of the KELS are to: Create a continuum that links early development to school readiness and later learning in school and life; To provide a clear statement of what young children should know and be able to do as a result of experiencing quality early learning opportunities; To provide guidance for early learning professionals that enhance and support their abilities to create experiences that promote early learning opportunities and support families; and to show that during the early years, children acquire skills, knowledge and abilities in all developmental areas. The KELS include eight domains or developmental areas: approaches in learning (ATL); physical development (PHD); social and emotional development (SED); communication and literacy (CL); mathematics (M); science (S); social studies (SS);

b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry.

The Kansas Early Learning Standards are designed to: recognize the importance of the early years as learning years; serve as a guide for appropriate curriculum development/selection; and serve as guide for creating quality learning environments and opportunities. The KELS are not designed to: serve as a curriculum in an early childhood program or other setting; exclude children from a program, school or activity; and/or serve as an assessment for children, families or programs. The document provides

information and guidance to early childhood providers and teachers, including primary grade teachers, on the developmental sequence of learning for children birth through kindergarten. The KELS promote quality programming for ALL children.

c) Verify by checking the domains included in the state/territory's early learning and developmental guidelines. Responses for "other" is optional

- Cognition, including language arts and mathematics
- Social development
- Emotional development
- Physical development
- Approaches toward learning
- Other

Describe:

In addition to the domain area noted above, the KELS include: Communication and Literacy; Mathematics; Science; and Creative Arts.

d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.

The Kansas State Agencies Early Childhood Education Team contracted with the University of Kansas, Life Span Institute and the Kansas Inservice Training Program (KITS) team to complete a toolkit designed to support training, technical assistance, and dissemination of information regarding the KELS. This toolkit has a number of resources that can be utilized to reinforce the knowledge and skills of early childhood educators and families. The materials address specific topics and how the KELS supports early childhood services and programs. Training on the KELS is incorporated into Links to Quality the Kansas QRIS system. Providers will complete training on the KELS while working on their Learning and Development Link.

e) Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates

Kansas has had three revisions to the Kansas Early Learning Standards. The first document was completed in 2006, with a second revision done in 2009. The latest version was released in 2015. The current version includes the same eight domains or

developmental content areas that were in previous versions. Unlike prior versions, each developmental content area is now structured into four organizational components: strand - the domain; age (grade in K-12) level; boxed sub-heading - sub-set of the strand (domain); and the standard - a broad concept (formerly the 'indicator' level).

f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards

NA

g) Provide the Web link to the state/territory's early learning and developmental guidelines.

<http://www.ksde.org/Portals/0/Early%20Childhood/KsEarlyLearningStandards.pdf>

6.3.2 CCDF funds cannot be used to develop or implement an assessment for children that:

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,
- Will be used as the primary or sole method for assessing program effectiveness,
- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used.

The Kansas Early Learning Standards are designed to: recognize the importance of the early years as learning years; serve as a guide for appropriate curriculum development/selection; and serve as guide for creating quality learning environments and opportunities. The KELS are not designed to: serve as a curriculum in an early childhood program or other setting; exclude children from a program, school or activity; and/or serve as an assessment for children, families or programs. The document provides information and guidance to early childhood providers and teachers, including primary grade teachers, on the developmental

sequence of learning for children birth through kindergarten. The KELS promote quality programming for ALL children.

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care. States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a separate annual Quality Progress Report that will include a description of activities to be funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce
- Improving on the development or implementation of early learning and developmental guidelines
- Developing, implementing, or enhancing a tiered quality rating and improvement system for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers

- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)
- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)) These activities can benefit infants and toddlers through school age populations.

This section covers the quality activities needs assessment and quality improvement activities and indicators of progress for each of the activities undertaken in the state or territory.

7.1 Quality Activities Needs Assessment for Child Care Services

7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)).

Following the signing of the CCDBG Act of 2104 and in early 2015, the Lead Agency's (DCF) assessment of quality activities included an internal review of current expenditures of CCDF quality dollars, performance outcomes of contracts/grants funded through CCDF,

status of our developing QRIS system, and statewide quality initiatives. This assessment process resulted in two outcomes. The termination of one grant due to poor outcomes and the goal to incorporate newly identified CCDGB Act of 2014 requirements within our upcoming quality Requests for Proposals to enhance current quality efforts and ensure compliance with federal law as the agency prepared to issue new quality contracts/grants. Review of CCDF funded quality programs are done annually as contracts are renewed. Fiscal and program outcomes are reviewed as part of this annual review. Review of all quality efforts are assessed every three years in conjunction with the completion of the CCDF state plan.

Overarching goal for quality improvement is to develop and implement a statewide QRIS. Specific to our work on our QRIS (now titled Links to Quality) program, Links to Quality established the goals to 1) Focus on the few and the powerful (quality indicators) 2) Build the system with sustainability in mind from the start. (It is better to start small and add to than to pull from later) 3) Kansas has a strong system of early education and child care supports, use these rather than build a new system and 4) Seek provider and parent engagement and offer choice. The goals of Links to Quality (L2Q) is to improve the quality of care so children have a safe place to learn and grow, offer consumer education to parents to assist in the selection of quality child care for their children, and build a system to recognize providers as professionals and the recognize 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. Within the Links to Quality (L2Q) pilot, Kansas QRIS system, we are assessing several processes prior to statewide implementation. The L2Q Evaluation contractor conducts surveys to evaluate each of the identified processes below:

Orientation process (April 2018)

L2Q Process

Application process (April 2018)

L2Q Training Process (BAS/PAS) (August 2018)

L2Q Portfolio Process

L2Q Review Process

L2Q Recognition Process

Templates

Role and effectiveness of L2Q Community Consultants

Role and effectiveness of L2Q Program Staff

The L2Q evaluators create a survey after each completed process for L2Q participants. Once data is collected, the evaluators submit a report to DCF with detailed information to assist the agency in making necessary adjustments for statewide implementation. At the end of the pilot period, the L2Q evaluators will collect and develop a process to evaluate the efficacy and sustainability of the L2Q pilot incentive structure and future statewide implementation.

L2Q Pilot Support Services contract provides support services which includes but not limited to, coaching, mentoring, technical assistance, training, reviewing and assessing to our L2Q programs. They also have a key role in assessing the pilot. At the end of the pilot, they will complete a support services and reviewer needs assessment based on the L2Q pilot and develop recommendations for statewide implementation. They will also create and conduct satisfaction surveys for support services, training, assessment and review processes to gain feedback from L2Q pilot programs. Their final report will contain a summary of the L2Q pilot including participant participation and satisfaction, identify gaps in support services for providers; participants and staff challenges; and success stories. This report will also have recommendations for statewide implementation.

The Quality support services contract provides backbone support for DCF/L2Q program staff. This contract assists in the revisions of L2Q pilot materials based on feedback from L2Q community consultants, providers, and families. It also develops other support materials needed during the pilot period. DCF meets monthly with all L2Q contractors to determine next steps in the evaluation process.

Assessment of other quality contracts include quarterly data reports and activity narratives, monthly phone calls, and face to face meetings as needed. These contracts, Consumer Education, Resource and Referrals, Child Care Workforce Professional Development, Infant Toddler Specialist Network and Kansas Enrichment Network, have data points and performance standards within their contracts that they report quarterly on their CCDF Quality Performance Reports. Monthly phone call agendas vary, depending on the needs of the contractor and Lead Agency staff. Face-to-face meetings are conducted to provide evaluation and feedback regarding services, materials and activities related to the contractual requirements. All contractors utilize satisfaction surveys and/or course evaluations and share this information in their quarterly reports.

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.

Following the signing of the CCDBG Act of 2104 and in early 2015, the Lead Agency's (DCF) assessment of quality activities included an internal review of current expenditures of CCDF quality dollars, performance outcomes of contracts/grants funded through CCDF, status of our developing QRIS system, and statewide quality initiatives. This assessment process resulted in two outcomes. The termination of one grant due to poor outcomes and the goal to incorporate newly identified CCDGB Act of 2014 requirements within our upcoming quality Requests for Proposals to enhance current quality efforts and ensure compliance with federal law as the agency prepared to issue new quality contracts/grants. Review of CCDF funded quality programs are done annually as contracts are renewed. Fiscal and program outcomes are reviewed as part of this annual review. Review of all quality efforts are assessed every three years in conjunction with the completion of the CCDF state plan. During this time our work on our developing QRIS (now titled Links to Quality) program established the goals to 1) Focus on the few and the powerful (quality indicators) 2) Build the system with sustainability in mind from the start. (It is better to start small and add to than to pull from later) 3) Kansas has a strong system of early education and child care supports, use these rather than build a new system and 4) Seek provider and parent engagement and offer choice.

7.2 Use of Quality Funds

7.2.1 Check the quality improvement activities in which the state/territory is investing

- Supporting the training and professional development of the child care workforce If checked, respond to section 7.3 and indicate which funds will be used for

this activity. Check all that apply.

- CCDF funds
- Other funds

Describe:

- Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity. Check all that apply.

- CCDF funds
- Other funds

Describe:

- Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.

- CCDF funds
- Other funds

Describe:

- Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply

- CCDF funds
- Other funds

Describe:

- Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.

- CCDF funds
- Other funds

Describe:

- Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check

all that apply.

CCDF funds

Other funds

Describe:

Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply

CCDF funds

Other funds

Describe:

7.3 Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds

Lead Agencies can invest in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 in addition to the following (98.53(a)(1)).

7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce

a) Check and describe which content is included in training and professional development activities and describe who or how an entity is funded to address this topic. Check all that apply.

- Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies

Describe:

Kansas Early Learning Standards (KELS) are used in development and coursework and utilized and distributed by ITSN specialist through their technical assistance with providers. There is currently a variety of training opportunities available on the topics of social emotional, physical and cognitive development and nutrition and physical activity. Through CCDF funding, Lead Agency contracts for Kansas Child Care Workforce Professional Development. The contract includes training and technical assistance that follow content and design strategies that are evidence-based and based on current best practices relating to the skills necessary for caregivers, teachers, and directors to meet the developmental needs of participating children and engage families, including culturally and linguistically-appropriate addresses the continuum of young children's abilities and needs. Courses included are:

Emotional Childhood Social and Emotional Development covers the current Caring for Our Children National Health and Safety Performance Standards regarding this area. Kansas Early Learning Standards (KELS) This course is an introductory course that will provide information and guidance on utilizing the KELS Toolkit when planning

developmentally-appropriate practices. The standards include physical health and development, social-emotional development, communication and literacy. Lead Agency (DCF) contracts with Kansas Child Care Training Opportunities, Inc. (KCCTO) for technical assistance through the Infant Toddler Specialist Network. KCCTO/ITSN provide quality improvement financial incentives for new programs who have an intensive TA plan based on their ERS and the three basic needs of all children: protection of their health and safety, supporting and guiding social/emotional development, and opportunities for intellectual and language stimulation and appropriate learning activities. Technical assistance providers utilize the Kansas Early Learning Standards in multiple formats and media to support child care providers serving infant and toddlers and their families.

All courses offered through CCDF funded partners have opportunities to receive additional resources and additional technical assistance.

- [Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. \(See also section 2.5.\)](#)

[Describe:](#)

The Kansas Early Learning Standards (KELS) are used in development and coursework and utilized and distributed by ITSN specialist through their technical assistance with providers. There is currently a variety of training opportunities available on the topics of social emotional, physical and cognitive development and nutrition and physical activity. Through CCDF funding, Lead Agency contracts for Kansas Child Care Workforce Professional Development. This contract includes training and technical assistance that follows content and design strategies that are evidence-based and based on current best practices relating to the skills necessary for caregivers, teachers, and directors to meet the needs of participating children and engage families in behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health for providers of children birth to age five.

Courses included are:

Preventing Suspension and Expulsion in Early Child Care. This course provides participants with a better understanding of what suspension and expulsion is defined as, the short and long term concerns of suspension and expulsion, and an introduction to prevention. Additionally, feedback during training and technical assistance will focus on active observation, responsive interactions, and positive guidance models in promoting developmentally appropriate practice. Other courses available specific to social-emotional guidance include: Behavior and Guidance; Child Abuse and Neglect: Identification, Reporting, and Prevention; FLIP IT!; Play: Problems and Interventions; Supporting Relationships through Engaging Environments; Teaching Strategies to Enhance Transitions; and Understanding Temperaments of Young Children; Understanding Risk and Promoting Resilience in the First Five Years.

Emotional Childhood Social and Emotional Development covers the current Caring for Our Children National Health and Safety Performance Standards regarding this area. Kansas Early Learning Standards (KELS) This course is an introductory course that will provide information and guidance on utilizing the KELS Toolkit when planning developmentally-appropriate practices. The standards include physical health and development, social-emotional development, communication and literacy.

Lead Agency also contracts with KCCTO for technical assistance through the Infant Toddler Specialist Network. KCCTO/ITSN provide quality improvement financial improvement incentives for new programs who have an intensive TA plan based on their ERS and the three basic needs of all children: protection of their health and safety, supporting and guiding social/emotional development, and opportunities for intellectual and language stimulation and appropriate learning activities. Technical assistance providers utilize the Kansas Early Learning Standards in multiple formats and media to support child care providers serving infant and toddlers and their families. The ITSN has professional resources and virtual toolkits available through their Early Learning Resource Center.

All courses offered through CCDF funded partners have opportunities to receive additional resources and technical assistance.

[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 imbedded 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 courses. In addition, KCCTO offers the online training "Beyond a Celebration: Exploring Culture in Practice". There are several training opportunities to address communication and relationship building with families. Technical assistance, additional training and resources are available through the KCCTO Infant Toddler Specialist Network.

- [Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards.](#)

Describe:

Cultural and linguistic indicators are imbedded in Early Learning Standards and Core Competencies. Cultural and linguistic activities are embedded within courses. The workforce development contract requires professional development trainings to be designed within the guidelines of standards and competencies that include Caring for Our Children National Health and Safety Performance Standards on the topics of Cultural Responsiveness. Technical assistance, additional training and resources are available through the KCCTO Infant Toddler Specialist Network.

- [Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development](#)

Describe:

Our professional development contract with KCCTO has CCDF priority courses that include topics on the DCF Child Care Subsidy Program; homelessness; nutrition, physical activity and obesity prevention; Adverse Childhood Experiences (ACES); cultural responsiveness; English language learners; children with disabilities; preventing and reducing expulsions and suspensions; early neurological development; and family engagement using the Kansas Family Engagement and Partnership Standards. KCCTO's online courses offer many more topics on supporting children's social and emotional development, trauma and adverse childhood experiences, risk

and resilience, behavior management, and safe, healthy learning environments. Community-based training is offered by a cadre of trainers from the KCCTO trainer directory. Child care programs in any geographical location can request training and topics for their staff. KCCTO training services are offered to all providers in Kansas. Technical assistance is also available in all 105 counties of Kansas and can be requested through KCCTO's Infant Toddler Specialist Network.

Comprehensive services are also offered to families through the Kansas Early Head Start Child Care partnerships. Eligible families enrolled in the KEHS-CCP Program receive child care assistance for their children and Early Head Start comprehensive services based upon Early Head Start Standards while participating in 30 hours of approved activities.. Child care partnerships are included within the comprehensive services to families developed by KEHS-CCP Program grantees.

Using data to guide program evaluation to ensure continuous improvement

Describe:

Caring for children of families in geographic areas with significant concentrations of poverty and unemployment

Describe:

Our professional development contract with KCCTO has CCDF priority courses that include topics on the DCF Child Care Subsidy Program; homelessness; nutrition, physical activity and obesity prevention; Adverse Childhood Experiences (ACES); cultural responsiveness; English language learners; children with disabilities; preventing and reducing expulsions and suspensions; early neurological development; and family engagement using the Kansas Family Engagement and Partnership Standards. KCCTO's online courses offer many more topics on supporting children's social and emotional development, trauma and adverse childhood experiences, risk and resilience, behavior management, and safe, healthy learning environments. Community-based training is offered by a cadre of trainers from the KCCTO trainer directory. Child care programs in any geographical location can request training and topics for their staff. KCCTO training services are offered to all providers in Kansas. Technical assistance is also available in all 105 counties of Kansas and can be requested through KCCTO's Infant Toddler Specialist Network.

Comprehensive services are offered to families through the KEHS Child Care partnerships and target services in areas with significant concentrations of poverty, unemployment and high out of home placements (foster care). Sixty-seven high need counties were identified based on poverty, unemployment and out of home placement data. The data collected for the high priority counties includes high poverty- 17% to 32.1% percent (Census Bureau, 2016 American Community Survey produced by: Small Area Income and Poverty Estimates). Unemployment 4.5% percent or above (Kansas Labor Force Estimates, provided by the Kansas Department of Labor, July 2017). Out of Home Placement (OOHP) over 1.2% percent (Kansas Department for Children and Families- Prevention and Protection Services, June 2017). Kansas Early Head Start grantees complete and base service needs on local community needs assessment. KEHS grantees maintain waiting list of eligible children. Priority for funding was given to grantees serving counties identified as high need. The Lead Agency's QRIS Links to Quality (L2Q) pilot peer learning community locations were determined after identifying these same high need communities with high poverty, high unemployment and high out of home placement data.

[Caring for and supporting the development of children with disabilities and developmental delays](#)

[Describe:](#)

KDHE Infant-Toddler supports professional development through the Kansas In-Service Training System (KITS). 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. The Infant Toddler Specialist Network contractor, KCCTO, partners with KITS to provide training, technical assistance and resources to providers and programs statewide. Through the network, there are a variety of professional development opportunities to support providers who serve children with developmental delays and disabilities.

[Supporting the positive development of school-age children](#)

[Describe:](#)

Lead Agency contracts with Kansas Enrichment Network for school-age technical

assistance and professional development opportunities to strengthen services for new and existing out-of-school programs. Activities include technical assistance and training to existing out-of-school programs. The new Kansas Workforce Professional Development contract will further develop support, training and technical assistance for school-age children.

Other

Describe:

b) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply

Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling

Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities

Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education

Other

Describe:

7.3.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

Improve knowledge and skills of child care program staff participating in long-term technical assistance as self-determined in Goals Attainment Follow-up. Promoting the social, emotional, physical, and cognitive development of children, Implementing behavior management strategies, including positive behavior interventions and support models, Engaging parents and families in culturally and linguistically appropriate ways to expand knowledge and skills, Implementing developmentally appropriate, instruction, curricula and learning environments and Caring for and supporting the development of children with

disabilities and developmental delays- 1) Outcome: Training- Increase knowledge as demonstrated in pre and post evaluations of trainings; 2) Output: Number of KELS distributed; 3) TA Outcomes: needs based and determined by self-assessment and TA specialist observation and feedback.; 4) TA Outcomes- Technical Assistance Plan (long term TA)- self-assessment intake with specialist, length and duration expected, TA plan identifies specific outcome needs, and goal attainment follow up; 5) Outputs: Number of TA per topic; and 6) Output- Narrative summary (examples). Providing onsite or accessible comprehensive services- 1) Output: KEHS Child Care Outcomes quarterly and 2) Number of environments used by KEHS Grantee Child Care Staff that have a score of 5 or higher on the Thelma Harmes Rating Scale divided by the Number of environments rated by KEHS Grantee Child Care Staff. Caring for children of families in geographic areas with significant concentrations of poverty and unemployment- KEHS 1) Output 22 counties with high needs due to out of home placements, high poverty and high unemployment are being served out of 105 counties by the KEHS-CCP grant program. Output: Number of slots available to children in these counties: 309. Supporting the positive development of school-age children- 1) Outputs: Improve the skills and knowledge of after-school program staff by providing training and technical assistance. Measures of impact include: Number of attendees, number of counties represented, number of organizations, number of youth impacted, and number of others who will be trained.

7.4 Quality Rating and Improvement System (QRIS)

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

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

7.4.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?

No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.

No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.

Yes, the state/territory has a QRIS operating statewide or territory-wide

Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available.

Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.

Provide a link, if available. <http://ksqualitynetwork.org/links/>

Yes, the state/territory has another system of quality improvement

If the response is yes to any of the above, describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

7.4.2 QRIS participation

a) Are providers required to participate in the QRIS?

Participation is voluntary

Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).

Participation is required for all providers.

b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS? Check all that apply

- Licensed child care centers
- Licensed family child care homes
- License-exempt providers
- Early Head Start programs
- Head Start programs
- State prekindergarten or preschool programs
- Local district-supported prekindergarten programs
- Programs serving infants and toddlers
- Programs serving school-age children
- Faith-based settings
- Tribally operated programs
- Other

Describe:

7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

- No
- Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.

- Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system) .
- Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
- Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
- Programs that meet all or part of state/territory school-age quality standards.
- Other.

Describe:

7.4.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?

- No
- Yes. If yes, check any links between the state/territory's quality standards and licensing requirements
 - Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
 - Embeds licensing into the QRIS
 - State/territory license is a "rated" license
 - Other.

Describe:

7.4.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS

No

Yes. If yes, check all that apply

One time grants, awards, or bonuses.

Ongoing or periodic quality stipends

Higher subsidy payments

Training or technical assistance related to QRIS.

Coaching/mentoring.

Scholarships, bonuses, or increased compensation for degrees/certificates

Materials and supplies

Priority access for other grants or programs

Tax credits (providers or parents)

Payment of fees (e.g., licensing, accreditation)

Other

Describe:

7.4.6 Describe the measurable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

The Links to Quality (L2Q) pilot was developed to increase quality within identified topic links or areas. These quality links have benchmarks with criteria or evidence that must be completed before a child care provider receives their quality recognition link. The quality recognition links used to assess quality for L2Q are: Program Leadership, Family Partnerships and Learning and Development. Each link has a self-assessment the child care provider must complete and after each assessment a Quality Improvement Plan is created to either create or improve the necessary evidence for their portfolio.

At the end of the pilot period, the L2Q Pilot Evaluators, Learning Tree Institute (awarded contractor), will provide DCF information on the structural processes of the pilot. This report will include an analysis and recommendations for statewide implementation.

7.5 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs. Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

7.5.1 What activities are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe

- Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low-income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families

Describe:

- Establishing or expanding the operation of community- or neighborhood-based family child care networks.

Describe:

The Lead Agency (DCF) contract with Kansas Child Care Training Opportunities, Inc. (KCCTO) for the Infant Toddler Services Network (ITSN) includes promotion of community connections to increase awareness and use of available resources/services that support health, safe and nurturing care for infants and toddlers. Infant Toddler Specialists will utilize Professional Learning Communities Wiki Workspaces through KCCTO's learning management system to encourage use of available resources and services in the community. Development of the online community of practices is ongoing

and Community Provider Support Groups are slated for Greenwood, Neosho and Crawford counties.

- [Providing training and professional development to enhance 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). Through work with the Kansas State Department of Education (KSDE) and the Kansas State Agencies Early Childhood Leadership team, the Lead Agency (DCF) 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). Kansas Child Care Training Opportunities, Inc. (KCCTO) promotes the use of KELS through distributions of print copies of the KELS kits upon request or as needed through technical assistance services. KCCTO currently offers an introductory online course, "Kansas Early Learning Standards". KELS was a required standard for new course development in the professional development contract awarded July 1, 2018.

- [Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant-toddler specialists](#)

[Describe:](#)

The Lead Agency (DCF) contracts with KCCTO for training and technical assistance through the Infant Toddler Specialist Network contract. KCCTO provides three intensity levels of technical assistance available to all programs and providers of child care services for infants and toddlers. At Level 1, Proactive/General Technical Assistance, resources include professional collaboration, linkages, information opportunities generally supporting development of core knowledge and competencies for the infant toddler workforce including health and safety requirements and use of the Kansas Early Learning Standards. Newly licensed childcare providers receive a new provider packet with resources that includes information on training opportunities and services, developmentally appropriate practices material and an invitation to join a community of practices wiki facilitation by ITSN TA content specialists. A follow-up contact is made by one of the Infant Toddler Specialists within 60 days. At Level 2, Focused Technical

Assistance is designed to enhance core knowledge and competencies and anticipate and meet licensing needs of new and existing programs and providers. Technical assistance at this level can involve developing and providing access to core training and resources that support a workforce training program or career pathway and/or short-term consultation or coaching to assist programs or providers in identifying training and resources available to meet their needs. At Level 3, Intensive Professional Development is based on a written plan developed collaboratively with an ITSN TA provider. Referrals can come directly from a program or provider, from DCF, KDHE or KCCTO. Technical assistance must target improvement of services to infants and toddlers through application of core knowledge and competencies in specified priority such as developmental delays or disabilities, English language learners, in tribal care, migrant or homeless, in foster care, in care during nontraditional work hours and in need of other special assistance and support. Level 3 technical assistance is guided by considerations proposed by Blasé (2009). Level 3 technical assistance will be geographically representative of childcare centers and family childcare homes in regions across the state.

- [Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act \(20 U.S.C. 1431 et seq.\).](#)

Describe:

- [Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments](#)

Describe:

Within the QRIS, Links to Quality, we are utilizing the Kansas Early Learning Standards (KELS). Our providers will be designing and evaluating opportunities for learning and play with the purpose to support children's learning and development. They will be submitting portfolio evidence with sample activities. This evidence will include the ages of each group of children, description of the activities, an explanation of how the activity gave the children an opportunity to demonstrate the skill and a documented reflection by the provider of how the activity went and if children gained the skills the activity sought to develop. Through ongoing communication with families, the extension of these activities can support children's learning and development at home as well as in the program's environment.

- Developing infant and toddler components within the state/territory's child care licensing regulations

Describe:

- Developing infant and toddler components within the early learning and developmental guidelines

Describe:

- Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development

Describe:

The Kansas Early Learning Standards virtual toolkit is available to programs and providers. It is designed to support training, technical assistance and dissemination of information regarding KELS. The KELS Training Module Folder contains a module titled Supporting Early Childhood Education in Talking with Parents about KELS. The toolkit is available at <http://kskits.org/search/node/Kansas%20Early%20Learning%20Standards>

Our CCR&R contractor, Child Care Aware of Kansas, provides a texting program that covers a wide variety of topic areas for parents. They share best practice standards and resources on their social media platforms. The website has a variety of resources available in the parent/family section. The Resource Center has a resource tab embedded in WLS referral system. Parent can access a variety of PDFs when completing a request for child care referrals. The CCR&Rs share printed materials at a variety of community events including some that are parent focused - such as Back to School Fairs.

ITSN collaborates with community partners to provide a variety of activities for parents. Activities include guest speakers for family groups at the local library; guest speakers on topics such as brain development for the library family group; monthly parent lunch and learn education meetings over the noon hour; and participation in various community collaboratives for parents and families. Ancillary activities include ITSN specialist who are ASQ trained to support providers implementation of the ASQ with their parents; a Community Resource template for as part of the ASQ training to assist in completion of an inventory of local services for families of young children; training on "How to Support

the Breastfeeding Family"; trainings for conferences that are attended by both provider and parents that have included topics such as family engagement and prevention of suspension and expulsion. ITSN has many TA plans that address strategies for family engagement.

KITS web resources include Virtual Kits and TA packets that are accessible to family members. Topics include building resilience, inclusion, nutrition, social emotional development, temperament, tummy time, biting, and managing stress through self-care. KITS Early Childhood Resource Center lending library has informational and training materials that are available for parents to check out. KITS website <http://readyforlearning.net/> provides information and support for parents on topics of play, social emotional development, early literacy, language, writing and math.

- Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being

Describe:

- Coordinating with child care health consultants.

Describe:

- Coordinating with mental health consultants.

Describe:

- Other

Describe:

7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures

The Lead Agency's contracts with KCCTO for services to improve the supply and quality of infant and toddler care. The contract includes written statements outlining goods/services to

be produced by the project and identifies intended recipients of the goods/services. Performance standards and output measures are reported quarterly and annually. These include: Communities of practice output reports on the number of providers participating; and Kansas Early Learning Standards (KELS) training Outcome-increase knowledge as demonstrated in pre-and post-evaluations of trainings; and Output- number of KELS distributed; number of coaching, mentoring and technical assistance. Technical Assistance Outcomes: needs based and determined by self-assessment and TA specialist observation and feedback.; TA Outcomes- Technical Assistance Plan (long term TA)- improve knowledge and skills of child care program staff participating in long-term technical assistance self-assessment, intake with specialist, length and duration expected, TA plan identifies specific outcome needs, and goal attainment follow up; Outputs: Number of TA per topics and number of TA participants at each intensity level. Improving transparency for parents- Output: Number of KELS distributed; number of modules of virtual toolkits accessed on Supporting Early Childhood Education in Talking with Parents about KELS.

7.6 Child Care Resource and Referral

A Lead Agency may expend funds to establish or expand a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

7.6.1 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

The Lead Agency's contracts for consumer education and child care resources and referrals. The contract includes written statements outlining goods/services to be produced by the project and identifies intended recipients of the goods/services. Performance standards and output measures are reported quarterly and annually. Quarterly report outputs include 1)

number of families requesting child care referrals by age and type of care requested; 2) number of families and children who are receiving subsidy benefits who request referrals; 3) number and type of consumer education materials distributed to families and providers; 4) number and type of services and community supports offered to child care providers; and 5) provider vacancy updates.

7.7 Facilitating Compliance With State Standards

7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards? Describe:

DCF provides CCDF quality funding through an interagency agreement with the Kansas Department of Health and Environment (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 a 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.

Currently the KDHE Child Care Licensing (CCL) Program establishes and enforces regulatory safeguards to approximately 5800 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 Child Care Licensing. Inspection activity is carried out by local 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).

KDHE licensing surveyors also refer providers who have findings to Kansas Child Care Trainings, Inc. for technical assistance and training.

Child care quality expenditures are also devoted to resource and referral services, workforce development, and expanding infant and toddler care. Resource and referral programs serve as a central component of the State's child care infrastructure. The core role of this service is to provide consumer education information to parents about child care available in their communities and referrals to other programs in response to family needs. Other functions include maintaining a database on child care programs and building the supply of child care, Workforce development activities include face-to-face, on-line training opportunities, and technical assistance to new and existing providers.

Specific quality activities for Infants and Toddlers are within the Infant Toddler Statewide Network. In the Infant/Toddler Statewide Network Kansas Child Care Training Opportunities, Inc's (KCCTO) overall goal is to support and strengthen families and child providers through training, technical assistance, sharing of information and community resources to enhance access to quality infant and toddler care.

DCF also contracts with the Kansas Enrichment Network to strengthen afterschool programs within the state. Kansas Enrichment Network (KEN) utilizes CCDF funds to develop the afterschool infrastructure across the state, provide technical assistance to existing and new out-of-school time programs, evaluate collaborative partnerships and educate Kansans about the potential of quality after-school programs.

The Kansas Early Head Start-Child Care Partnership Program (KEHS-CCP) is a quality initiative that requires KEHS grantees to partner with community child care providers and/or provide child care in a center-based infant-toddler classroom operated by the KEHS grantee. The program provides child care for parents who are employed, attending school or in a job training program. KEHS-CCP grantees support families in completing a minimum of 30 hours of approved activities each week, including work, school, study, training, sleep (for third shift work), and other activities to meet goals identified in their Family Partnership Agreement. The program provides full-day, full year care to KEHS-CCP children by offering child care in high quality settings and assisting child care partners in meeting high quality performance standards.

7.7.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?

No

Yes. If yes, which types of providers can access this financial assistance?

Licensed CCDF providers

Licensed non-CCDF providers

License-exempt CCDF providers

Other

Describe:

DCF provides CCDF funding for a statewide child care workforce contract to assist with the development and offering of the minimum Health and Safety Training. This allows the required Health and Safety Training to be offered to all child care providers and staff at a minimal cost.

7.7.3 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

Kansas Department of Health and Environment, the Child Care licensing agency, has a responsibility to provide certain deliverables to DCF as agreed on through the interagency agreement to show measured progress in improving the quality of child care programs and services.

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

KDHE, the Child Care licensing agency, also submits required reports in accordance with the scope of work. All reports include information regarding outcome measures, and DCF compares the outcome measures with the annual target goals/objectives identified to ensure compliance.

KDHE submits quarterly program reports of CCDF activities. Program reports include the following:

Number of licensed child care providers by categories: center-based, licensed day care providers and licensed group day care

Percentage of programs receiving monitoring visits and the frequency of these visits by provider category

Number of programs with licenses suspended or revoked due to licensing violations by provider category

Number of reported serious injuries at child care facilities by provider category

Number of reported fatalities at child care facilities by provider category

Number of complaints received, number and type of enforcement actions by provider category

Participation in state and local workgroups to promote professional development and quality activities in Kansas

Copies of materials developed and/or distributed to promote professional development or encourage participation in the DCF Subsidy Program

Training schedule for possible DCF field staff participation

Copies of agendas for District Meeting for child care surveyors

Number of surveyor visits to licensed facilities

Number of new providers receiving licenses.

CCDF Performance Measures for Resource and Referral Services, Workforce Development, Infant Toddler Services, The Kansas Early Head Start Child Care Partnership Program and the Kansas Enrichment Network include:

Percent of parents reporting satisfaction with consumer education materials received for child care referral services. 2018-91%, 2019- 94%

Percentage increase of child care providers accessing professional development. 2018-12%, 2019- 24%

Infant Toddler Statewide Network Quantitative data measures the number and types of Technical Assistance provided to child care facilities.

Kansas Enrichment Network narratives and number of participants measure the impact work through coordination and development of out-of-school programs that provide opportunities to low income and at risk student populations.

Percent of KEHS child care partnerships that provide quality early learning environments based on a recorded score of 5 or higher on the Thelma Harnes Rating Scale. 2018-100.0%, 2019-100.0%

[7.8 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services](#)

7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services in both child care centers and family child care homes currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children

The Kansas Department of Health and Environment (KDHE) utilizes data from the web based survey tool to pull information for most frequent violations per region or county. Non-compliance data is provided to surveyors. Some counties use this information to build specific training or to guide further training topics in their contracted county. In addition,

KDHE monitors county and state inspection timeliness information quarterly and reports this information to the Contract Administrators for each county. The information gathered is used to work with the counties to improve their timeliness rates. Depending on the situation a corrective action plan can be initiated and KDHE will also send in a District Specialist to assist in training and conducting surveys. County contracts are re-evaluated yearly and timeliness is a factor in deciding if a contract will be renewed.

7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures

Current funding is provided to KDHE, KEHS, KCCTO and Child Care Aware. Each grant and/or memorandum of agreement has performance measures that must be met. Child Care Aware of Kansas is the Resource and Referral Agency. Their grant specifies that they must provide information on the number of consumer education materials distributed and number of child care referrals made. KCCTO has the grant for Child Care Provider Training and must provide information on the number of child care providers participating in professional development, receiving technical assistance, enrolled and completing the CDA Training Track and the number of CDA scholarships awarded. Kansas Early Head Start-Child Care Partnerships also tracks services and incentives provided to partnering providers.

Quality Data is collected and used for completion of the Federal QPR report.

Links to Quality (L2Q) was developed to increase quality within identified topic links or areas. These quality links have benchmarks with criteria or evidence that must be completed before a child care provider receives their quality recognition link. See Section 7.7.3.

7.9 Accreditation Support

7.9.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

- Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes

Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation

- Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers.

Describe:

- Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care

Describe:

- Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide

- Focused on child care centers

Describe:

- Focused on family child care homes

Describe:

- No, but the state/territory is in the accreditation development phase

- Focused on child care centers

Describe:

Focused on family child care homes

Describe:

No, the state/territory has no plans for accreditation development

7.9.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

N/A

7.10 Program Standards

7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children

Lead agency's workforce development contractor Kansas Child Care Training Opportunities provides professional development regarding the Kansas Early Learning Standards (KELS) and the KELS Toolkit. In addition to the KELS, Kansas has the Core Competencies for Early Childhood and Youth Development Professionals (Kansas and Missouri).

7.10.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

Programs Standards including: Health, Mental Health, Nutrition, Physical Activity, and

Physical Development- 1) Outcome: Training- Increase knowledge as demonstrated in pre and post evaluations of trainings; 2) Output: Number of KELS distributed; 3) TA Outcomes: needs based and determined by self-assessment and TA specialist observation and feedback.; 4) TA Outcomes- Technical Assistance Plan (long term TA)- self-assessment intake with specialist, length and duration expected, TA plan identifies specific outcome needs, and goal attainment follow up; 5) Outputs: Number of TA per topic; and 6) Output- Narrative summary (examples).

7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities

7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).

Programs Standards including: Health, Mental Health, Nutrition, Physical Activity, and Physical Development- 1) Outcome: Training- Increase knowledge as demonstrated in pre and post evaluations of trainings; 2) Output: Number of KELS distributed; 3) TA Outcomes: needs based and determined by self-assessment and TA specialist observation and feedback.; 4) TA Outcomes- Technical Assistance Plan (long term TA)- self-assessment intake with specialist, length and duration expected, TA plan identifies specific outcome needs, and goal attainment follow up; 5) Outputs: Number of TA per topic; and 6) Output- Narrative summary (examples).

7.11.2 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities, and also

describe the measureable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. Describe:

N/A

8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity and accountability apply to:

- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF
- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF
- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities
- Internal processes for conducting child care provider subsidy

8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

8.1.1 Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity. Check all that apply:

Train on policy manual

Describe:

Online training level 1 is updated with new policies as needed, implementation meetings occur when changes are made to the policy log and staff need to be made aware of the new policy, instructions and training materials are developed as needed to help implement new policies, questions are collected regarding new policies and the answers are shared with all staff. Regional trainers do onsite training on topics when needed, supervisors meet with staff on a regular basis to inform them of new information or known issues, and desk aids staff use for interviews are updated when needed due to policy changes.

Train on policy change notices

Describe:

Implementation meetings occur when changes are made to the policy log and staff need to be made aware of the new policy, instructions and training materials are developed as needed to help implement new policies, and questions are collected regarding new policies and the answers are shared with all staff. Summary of the change is attached to the Kansas Economic and Employment Services Manual and Implementation memos are attached when needed to explain how the new policy will be implemented. Regional trainers do onsite training on topics when needed, supervisors meet with staff on a regular basis to inform them of new information or known issues, and desk aids staff use for interviews are updated when needed due to policy changes.

Ongoing monitoring and assessment of policy implementation

Describe:

Random case reads are done and reviewed with staff to ensure accurate determinations are made, reports are often utilized to ensure new policies are implemented and assist in identifying needed changes and creating plans of action.

Other

Describe:

The KEES eligibility system has built in rules that apply most eligibility factors for a child care assistance determination based on information entered by an eligibility worker. This automates much of the child care policy. The KEES user manual provides detailed instructions on the system. Access to eligibility records is limited to individuals with a job description that requires access. Only limited positions are allowed access to approve eligibility on the system, others are only given read-only access.

8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:

Verifying and processing billing records to ensure timely payments to providers

Describe:

When Kansas implemented EBT for child care, we also implemented prospective issuance of benefits so that families have their benefits available for any given month on the first day of that month, so they may transfer those benefits to their provider throughout the month in payment for child care services according to the terms of their parent/provider agreements. Providers have the same recourse with subsidy eligible families as they do with private pay families if there is a payment dispute. DCF has a Child Care Overpayment Detection and Prevention Unit to review provider's records and compare to the child care plans. Provider overpayments are determined and referred to the Fraud Unit for civil or criminal proceedings. After a fraud determination is adjudicated a repayment notice is sent and the case is referred to the Central Collections Unit.

[Fiscal oversight of grants and contracts](#)

[Describe:](#)

The Procurement Services Unit within the Operations Division with DCF, the lead agency, coordinates and processes the procuring of goods and services through contracts and grants. They are responsible for making payments for all encumbered contracts and grants and ensuring they comply for all applicable statutes, regulations and policies. Prior to entering written agreements, the Lead Agency verifies the subrecipients' tax clearance, debarment status and FFATA (Federal Funding Accountability and Transparency Act) information. The specific work required by a grant must be completed in accordance with the scope of work specified in the notification of grant award and all required reports must be submitted to a designated DCF staff member as agreed on. Written agreements include scope of work; services to be provided; performance measures; deliverables and reporting requirements. The status report, budget transaction report and budget itemization reports are reviewed by multiple DCF staff for completeness and allowability. In addition to monthly financial reports, subrecipients are required to submit quarterly performance goals reports, quarterly outcome reports and annual quality performance reports. Site visits may occur by assigned DCF staff and/or the DCF internal audit services unit to ensure appropriate fiscal practices are being followed. Desk reviews, monthly calls and email communications are examples of other methods used for grant/contract oversight and monitoring. The grantee is responsible for obtaining an independent audit of any grant awarded by DCF. All grantees are subject to federal and state audits.

[Tracking systems to ensure reasonable and allowable costs](#)

[Describe:](#)

Each grant/contract has its own file where copies of all payments processed, budget balances, the grant or agreement, and any important correspondence is stored. All grants/contracts are in an Access database. The database tracks payments and balances by fiscal year along with specific information regarding the length of the term of the grant/contract, if there is a renewal option and address information.

[Other](#)

[Describe:](#)

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:

Conduct a risk assessment of policies and procedures

Describe:

Establish checks and balances to ensure program integrity

Describe:

The eligibility system, KEES, contains edits that prevent the authorization of excessive hours, prevent the overlap of plans for the same child at the same time, determines the hours to be authorized when schedules are entered to prevent and reduce errors. Warnings are also created when the system recognizes something that requires a closer look by the eligibility worker, like child care plans being created for a provider who is almost at capacity or when a child is on another child care program. Provider rates are automated to prevent incorrect rates from being entered on the child care plan. System rules streamline the application of many of the child care policies based on data that is entered by eligibility workers. Data matches are used with Kansas wage and unemployment compensation and Social Security Administration to assist with verifying or identifying income. Eligibility workers also verify various child care eligibility factors, such as employment, income, citizenship, age, residency, etc.) through access to child support services, vital statistics, food assistance program information, TANF program information, the work number, and the Systematic Alien Verification for Entitlements Program. Fraud Navigator is a tool accessed through the EBT system to monitor real-time transactions including child care payments for suspicious payment activity, such as excessive transaction amounts. The Child Care Overpayment Detection and Prevention Unit uses outlier reports to target questionable providers and clients. The unit completes facility site visits to review the handbook with the provider and answer questions. They also request and review enrollment, attendance, and payment records. Interview templates/scripts exist for child care interviews to ensure staff ask the needed questions and to ensure sufficient documentation. EES performance improvement case readers are reading CC cases on new trainees until such time that, in consultation with supervisory staff, it is determined that their accuracy rate level meets and maintains expectations. When resources allow, PI staff complete random reviews of CC cases processed by

experienced staff as well.

Use supervisory reviews to ensure accuracy in eligibility determination

Describe:

Supervisory case reviews are used to assess error trends and determine additional training needs. Supervisors and program improvement staff complete and record the results of case reads in the Case Review System (CARES), The data is available at the worker, unit, regional, or state level.

Other

Describe:

8.1.4 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

a) Check and describe all activities that the Lead Agency conducts to identify and prevent fraud or intentional program violations. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations. Include a description of the results of such activity.

Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

Describe

Eligibility workers verify various child care eligibility factors, such as employment, income, citizenship, age, residency, etc. through access to shared information from other programs like TANF, FNS and Medicaid. Other databases are used to assist

with verifying or identifying income, such as social security administration. PARIS matches are used to ensure that residency requirements are met and identify duplications in the program with another state.

[Run system reports that flag errors \(include types\).](#)

[Describe:](#)

Relative providers must be approved for a specific family prior to accepting funds from them - reports are run showing if a relative provider accepted funds from an unauthorized family; parents are to authorize payments to providers so reports are run showing if a provider receive all payments on the 1st of the month when the 1st is on a weekend; excessive large payments are also tracked. The eligibility system, KEES, contains edits that prevent the authorization of excessive hours, prevent the overlap of plans for the same child at the same time, determines the hours to be authorized when schedules are entered to prevent and reduce errors. Warnings are also created when the system recognizes something that requires a closer look by the eligibility worker, like child care plans being created for a provider who is almost at capacity or when a child is on another child care program. Provider rates are automated to prevent incorrect rates from being entered on the child care plan. System rules streamline the application of many of the child care policies based on data that is entered by eligibility workers. Fraud Navigator is a tool accessed through the EBT system to monitor real-time transactions including child care payments for suspicious payment activity, such as excessive transaction amounts. The Child Care Overpayment Detection and Prevention Unit uses outlier reports to target questionable providers and clients.

[Review enrollment documents and attendance or billing records](#)

[Describe:](#)

The Child Care Overpayment Detection and Prevention Unit completes facility site visits to review the handbook with the provider and answer questions. They also request and review enrollment, attendance, and payment records.

[Conduct supervisory staff reviews or quality assurance reviews.](#)

[Describe:](#)

Interview templates/scripts exist for child care interviews to ensure staff ask the

needed questions and to ensure sufficient documentation. EES performance improvement case readers are reading CC cases on new trainees until such time that, in consultation with supervisory staff, it is determined that their accuracy rate level meets and maintains expectations. When resources allow, PI staff complete random reviews of CC cases processed by experienced staff as well.

[Audit provider records.](#)

[Describe:](#)

DCF has a Child Care Overpayment Detection and Prevention Unit to review provider's records and compare to the child care plans. Provider overpayments are determined and referred to the Fraud Unit for civil or criminal proceedings. After a fraud determination is adjudicated a repayment notice is sent and the case is referred to the Central Collections Unit.

[Train staff on policy and/or audits.](#)

[Describe:](#)

Online training level 1 is updated with new policies as needed, implementation meetings occur when changes are made to the policy log and staff need to be made aware of the new policy, instructions and training materials are developed as needed to help implement new policies, questions are collected regarding new policies and the answers are shared with all staff. Regional trainers do onsite training on topics when needed, supervisors meet with staff on a regular basis to inform them of new information or known issues, and desk aids staff use for interviews are updated when needed due to policy changes.

[Other](#)

[Describe:](#)

The KEES eligibility system has built in rules that apply most eligibility factors for a child care assistance determination based on information entered by an eligibility worker. This automates much of the child care policy. The KEES user manual provides detailed instructions on the system. Access to eligibility records is limited to individuals with a job description that requires access. Only limited positions are allowed access to approve eligibility on the system, others are only given read-only access.

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.

- Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

Eligibility workers verify various child care eligibility factors, such as employment, income, citizenship, age, residency, etc. through access to shared information from other programs like TANF, FNS and Medicaid. Other databases are used to assist with verifying or identifying income, such as social security administration. PARIS matches are used to ensure that residency requirements are met and identify duplications in the program with another state.

- Run system reports that flag errors (include types).

Describe:

Relative providers must be approved for a specific family prior to accepting funds from them - reports are run showing if a relative provider accepted funds from an unauthorized family; parents are to authorize payments to providers so reports are run showing if a provider receive all payments on the 1st of the month when the 1st is on a weekend; excessive large payments are also tracked. The eligibility system, KEES, contains edits that prevent the authorization of excessive hours, prevent the overlap of plans for the same child at the same time, determines the hours to be authorized when schedules are entered to prevent and reduce errors. Warnings are also created when the system recognizes something that requires a closer look by the eligibility worker, like child care plans being created for a provider who is almost at capacity or when a child is on another child care program. Provider rates are automated to prevent incorrect rates from being entered on the child care plan. System rules streamline the application of many of the child care policies based on data that is entered by eligibility workers. Fraud Navigator is a tool accessed through the EBT system to monitor real-time transactions including child care payments for suspicious payment activity, such as excessive transaction amounts. The Child Care Overpayment Detection and Prevention Unit uses outlier reports to target questionable

providers and clients.

[Review enrollment documents and attendance or billing records](#)

Describe:

The Child Care Overpayment Detection and Prevention Unit completes facility site visits to review the handbook with the provider and answer questions. They also request and review enrollment, attendance, and payment records.

[Conduct supervisory staff reviews or quality assurance reviews.](#)

Describe:

Interview templates/scripts exist for child care interviews to ensure staff ask the needed questions and to ensure sufficient documentation. EES performance improvement case readers are reading CC cases on new trainees until such time that, in consultation with supervisory staff, it is determined that their accuracy rate level meets and maintains expectations. When resources allow, PI staff complete random reviews of CC cases processed by experienced staff as well.

[Audit provider records.](#)

Describe:

DCF has a Child Care Overpayment Detection and Prevention Unit to review provider's records and compare to the child care plans. Provider overpayments may be determined.

[Train staff on policy and/or audits.](#)

Describe:

Online training level 1 is updated with new policies as needed, implementation meetings occur when changes are made to the policy log and staff need to be made aware of the new policy, instructions and training materials are developed as needed to help implement new policies, questions are collected regarding new policies and the answers are shared with all staff. Regional trainers do onsite training on topics when needed, supervisors meet with staff on a regular basis to inform them of new information or known issues, and desk aids staff use for interviews are updated when needed due to policy changes.

Other

Describe:

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

Eligibility workers verify various child care eligibility factors, such as employment, income, citizenship, age, residency, etc. through access to shared information from other programs like TANF, FNS and Medicaid. Other databases are used to assist with verifying or identifying income, such as social security administration. PARIS matches are used to ensure that residency requirements are met and identify duplications in the program with another state.

Run system reports that flag errors (include types).

Describe:

The eligibility system, KEES, contains edits that prevent the authorization of excessive hours, prevent the overlap of plans for the same child at the same time, determines the hours to be authorized when schedules are entered to prevent and reduce errors. Warnings are also created when the system recognizes something that requires a closer look by the eligibility worker, like child care plans being created for a provider who is almost at capacity or when a child is on another child care program. Provider rates are automated to prevent incorrect rates from being entered on the child care plan. System rules streamline the application of many of the child care policies based on data that is entered by eligibility workers.

Review enrollment documents and attendance or billing records

Describe:

The Child Care Overpayment Detection and Prevention Unit completes facility site visits to review the handbook with the provider and answer questions. They also request and review enrollment, attendance, and payment records.

Conduct supervisory staff reviews or quality assurance reviews.

Describe:

Interview templates/scripts exist for child care interviews to ensure staff ask the needed questions and to ensure sufficient documentation. EES performance improvement case readers are reading CC cases on new trainees until such time that, in consultation with supervisory staff, it is determined that their accuracy rate level meets and maintains expectations. When resources allow, PI staff complete random reviews of CC cases processed by experienced staff as well.

Audit provider records.

Describe:

DCF has a Child Care Overpayment Detection and Prevention Unit to review provider's records and compare to the child care plans. Provider overpayments may be determined.

Train staff on policy and/or audits.

Describe:

Online training level 1 is updated with new policies as needed, implementation meetings occur when changes are made to the policy log and staff need to be made aware of the new policy, instructions and training materials are developed as needed to help implement new policies, questions are collected regarding new policies and the answers are shared with all staff. Regional trainers do onsite training on topics when needed, supervisors meet with staff on a regular basis to inform them of new information or known issues, and desk aids staff use for interviews are updated when needed due to policy changes.

Other

Describe:

8.1.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

a) Check and describe all activities that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

- Recover through repayment plans.

Describe:

After a fraud determination is adjudicated a repayment notice is sent and the case is referred to the Central Collections unit. Multiple recovery methods are available.

- Reduce payments in subsequent months.

Describe:

After a fraud determination is adjudicated a repayment notice is sent and the case is referred to the Central Collections unit. Multiple recovery methods are available.

- Recover through state/territory tax intercepts.

Describe:

After a fraud determination is adjudicated a repayment notice is sent and the case is referred to the Central Collections unit. Multiple recovery methods are available.

- Recover through other means.

Describe:

- Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

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 and criminal proceedings. Intentional client overpayments are referred to an Administrative Disqualification hearing or to the Fraud Division. After a fraud determination is adjudicated a repayment notice is sent and the case is referred to the Central Collections unit.

- Other

Describe:

b) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

- Recover through repayment plans.

Describe:

When overpayments are determined, repayment notices sent and a referral is made to the Central Collections unit. Multiple recovery methods are available to the client.

Reduce payments in subsequent months.

Describe:

When overpayments are determined, repayment notices sent and a referral is made to the Central Collections unit. Multiple recovery methods are available to the client.

Recover through state/territory tax intercepts.

Describe:

When overpayments are determined, repayment notices sent and a referral is made to the Central Collections unit. Multiple recovery methods are available to the client.

Recover through other means.

Describe:

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

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. Overpayments are determined, repayment notices sent and a referral is made to the Central Collections unit.

Other

Describe:

c) Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

- Recover through repayment plans.

Establish a unit to investigate and collect improper payments.

When overpayments are determined, repayment notices sent and a referral is made to the Central Collections unit. Multiple recovery methods are available to the client.

- Reduce payments in subsequent months.

Describe:

When overpayments are determined, repayment notices sent and a referral is made to the Central Collections unit. Multiple recovery methods are available to the client.

- Recover through state/territory tax intercepts.

Describe:

When overpayments are determined, repayment notices sent and a referral is made to the Central Collections unit. Multiple recovery methods are available to the client.

- Recover through other means.

Describe:

- Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

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. Overpayments are determined, repayment notices sent and a referral is made to the Central Collections unit .

- Other

Describe:

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

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

Describe:

Adults who fail to cooperate with a child care program fraud investigation are ineligible for child care for all household members until cooperation has been established in that fraud investigation. Clients have the right to submit a request for a fair hearing for this, or any, agency action. A fair hearing decision is rendered by the hearing officer no later than 90 days after the receipt of the request for the hearing. The decision is sent to the client and the local DCF service center.

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

Describe:

- Prosecute criminally.

Describe:

The local Fraud Unit will make a decision as to whether or not to pursue prosecution through either civil or criminal action.

- 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.

Appendix A: Background Check Waiver Request Form

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers will be considered "transitional and legislative waivers" to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)) These waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 -- 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019. If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

Overview of Background Check Implementation deadlines

Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017

Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018

One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019

Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting

a time-limited waiver extension.

- Appendix A.1:** In-state criminal registry or repository checks with fingerprints requirements for existing staff. (See related question at 5.4.1 (b)) Describe the provision from which the state/territory seeks relief.

The licensing agency, Kansas Health and Environment, worked with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS is asking for an extension to implement the requirements for the fingerprinting and comprehensive background checks due to regulation that has not passed giving the authority to the department to collect the required fee for the fingerprint background check. The Kansas Department of Health and Environment anticipates the effective date of the required fee regulation, K.A.R. 28-4-95, to be no later than December 3, 2018. Therefore, a wavier is requested for all existing staff beginning with December 2018 renewing licenses.

In addition, KDHE is requesting a full year to process existing staff background checks at the time of facility license renewals beginning December 3, 2018. KDHE anticipates approximately 36, 000 background checks and there is great concern that volume of processing will overload all required systems, including KBI. The rollout method was determined to be the most effective and cause the least amount disruption.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The additional time to implement the comprehensive changes to the regulated community, child care licensing system and to adequately train administrative and oversight staff will ensure that the system developed, and procedures are effective. Parents of children in care benefit from knowing that individuals caring for their children do not have prior records of behavior that could endanger children. Safe and secure regulated child care settings support Kansas business and industry. When working parents feel confident that their children are in a safe regulated care setting they are more likely to be productive at work.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the comprehensive background check system can be fully implemented.

Appendix A.2: In-state sex offender registry requirements for existing staff. (See related question at 5.4.2 (b))

Describe the provision from which the state/territory seeks relief.

Sex offenders currently are identified on the Kansas Criminal Background Check.

The licensing agency, Kansas Health and Environment, worked with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS is asking for an extension to implement the requirements for the fingerprinting and comprehensive background checks, including the in-state sex offender registry due to regulation that has not passed giving the authority to the department to collect the required fee for the fingerprint background check. The Kansas Department of Health and Environment anticipates the effective date of the required fee regulation, K.A.R. 28-4-95, to be no later than December 3, 2018. Therefore, a waiver is requested for all existing staff beginning with December 2018 renewing licenses.

In addition, KDHE is requesting a full year to process existing staff background checks at the time of facility license renewals beginning December 3, 2018. KDHE anticipates approximately 36, 000 background checks and there is great concern that volume of processing will overload all required systems, including KBI. The rollout method was determined to be the most effective and cause the least amount disruption.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The additional time to implement the comprehensive changes to the regulated community, child care licensing system and to adequately train administrative and oversight staff will ensure that the system developed, and procedures are effective.

Parents of children in care benefit from knowing that individuals caring for their children

do not have prior records of behavior that could endanger children. Safe and secure regulated child care settings support Kansas business and industry. When working parents feel confident that their children are in a safe regulated care setting they are more likely to be productive at work.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the comprehensive background check system can be fully implemented.

Appendix A.4: [National FBI fingerprint search requirements for existing staff. \(See related question at 5.4.4 \(b\)\)](#)

[Describe the provision from which the state/territory seeks relief.](#)

The licensing agency, Kansas Health and Environment, worked with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS is asking for an extension to implement the requirements for the fingerprinting and comprehensive background check, including the FBI fingerprint search due to regulation that has not passed giving the authority to the department to collect the required fee for the fingerprint background check. The Kansas Department of Health and Environment anticipates the effective date of the required fee regulation, K.A.R. 28-4-95, to be no later than December 3, 2018. Therefore, a waiver is requested for all existing staff beginning with December 2018 renewing licenses.

In addition, KDHE is requesting a full year to process existing staff background checks at the time of facility license renewals beginning December 3, 2018. KDHE anticipates approximately 36, 000 background checks and there is great concern that volume of processing will overload all required systems, including KBI. The rollout method was determined to be the most effective and cause the least amount disruption.


[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

The additional time to implement the comprehensive changes to the regulated community, child care licensing system and to adequately train administrative and

oversite staff will ensure that the system developed, and procedures are effective. Parents of children in care benefit from knowing that individuals caring for their children do not have prior records of behavior that could endanger children. Safe and secure regulated child care settings support Kansas business and industry. When working parents feel confident that their children are in a safe regulated care setting they are more likely to be productive at work.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the comprehensive background check system can be fully implemented.

 [Appendix A.5: National Crime Information Center \(NCIC\) National Sex Offender Registry \(NSOR\) search requirements for new or prospective staff. \(See related question at 5.4.5 \(a\)\)](#)

[Describe the provision from which the state/territory seeks relief.](#)

The licensing agency, Kansas Health and Environment, worked with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS is asking for an extension to implement the requirements for the fingerprinting and comprehensive background check, including the FBI fingerprint search due to regulation that has not passed giving the authority to the department to collect the required fee for the fingerprint background check. The Kansas Department of Health and Environment anticipates the effective date of the required fee regulation, K.A.R. 28-4-95, to be no later than December 3, 2018. Therefore, a waiver is requested for all new staff after the renewal period beginning with December 2018.


[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

The additional time to implement the comprehensive changes to the regulated community, child care licensing system and to adequately train administrative and oversight staff will ensure that the system developed, and procedures are effective. Parents of children in care benefit from knowing that individuals caring for their children do not have prior records of behavior that could endanger children. Safe and secure

regulated child care settings support Kansas business and industry. When working parents feel confident that their children are in a safe regulated care setting they are more likely to be productive at work.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the comprehensive background check system can be fully implemented.

 [Appendix A.6: National Crime Information Center \(NCIC\) National Sex Offender Registry \(NSOR\) search requirements for existing staff. \(See related question at 5.4.5 \(b\)\)](#)

[Describe the provision from which the state/territory seeks relief.](#)

The licensing agency, Kansas Health and Environment, worked with other state agencies, including the Kansas Bureau of Investigations, to complete the requirements for the comprehensive background check. KS is asking for an extension to implement the requirements for the fingerprinting and comprehensive background check, including the FBI fingerprint search due to regulation that has not passed giving the authority to the department to collect the required fee for the fingerprint background check. The Kansas Department of Health and Environment anticipates the effective date of the required fee regulation, K.A.R. 28-4-95, to be no later than December 3, 2018. Therefore, a waiver is requested for all existing staff beginning with December 2018 renewing licenses.

In addition, KDHE is requesting a full year to process existing staff background checks at the time of facility license renewals beginning December 3, 2018. KDHE anticipates approximately 36,000 background checks and there is great concern that volume of processing will overload all required systems, including KBI. The rollout method was determined to be the most effective and cause the least amount disruption.


[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

The additional time to implement the comprehensive changes to the regulated community, child care licensing system and to adequately train administrative and

oversite staff will ensure that the system developed, and procedures are effective. Parents of children in care benefit from knowing that individuals caring for their children do not have prior records of behavior that could endanger children. Safe and secure regulated child care settings support Kansas business and industry. When working parents feel confident that their children are in a safe regulated care setting they are more likely to be productive at work.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

 **Appendix A.7: Interstate criminal registry or repository check for new or prospective staff. (See related question at 5.4.6 (a))**

[Describe the provision from which the state/territory seeks relief.](#)


Kansas is requesting an extension to meet the requirements to conduct a five-year lookback at any states a person may have resided in. Final decisions have not been made at this time. KDHE is looking at other state systems, specifically information shared and timeliness of return results. KDHE CCL is working with KDHE legal to determine how we can get complete information from each state with in the 45 days permitted. The system build is still in discovery and initial process.

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

If CCL is made aware of a crime in another state for a person working in a child care facility the legal department will request records from that state, which is the current procedure.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

 **Appendix A.8: Interstate criminal registry or repository check for existing staff. (See related question at 5.4.6 (b))**

Describe the provision from which the state/territory seeks relief.


Kansas is requesting an extension to meet the requirements to conduct a five-year lookback at any states a person may have resided in. Final decisions have not been made at this time. KDHE is looking at other state systems, specifically information shared and timeliness of return results. KDHE CCL is working with KDHE legal to determine how we can get complete information from each state with in the 45 days permitted. The system build is still in discovery and initial process.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

If CCL is made aware of a crime in another state for a person working in a child care facility the legal department will request records from that state, which is the current procedure.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

 **Appendix A.9: Interstate sex offender registry or repository check for new or prospective staff. (See related question at 5.4.7 (a))**

Describe the provision from which the state/territory seeks relief.

Kansas is requesting an extension to meet the requirements to conduct a five year lookback at any states a person may have resided in. Final decisions have not been made at this time. KDHE is looking at other state systems, specifically information shared and timeliness of return results. KDHE CCL is working with KDHE legal to determine how we can get complete information from each state with in the 45 days permitted. The system build is still in discovery and initial process.


Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

If CCL is made aware of a crime in another state for a person working in a child care facility the legal department will request records from that state, which is the current procedure.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

 **Appendix A.10: Interstate sex offender registry or repository check for existing staff. (See related question at 5.4.7 (b))**

Describe the provision from which the state/territory seeks relief.

Kansas is requesting an extension to meet the requirements to conduct a five-year lookback at any states a person may have resided in. Final decisions have not been made at this time. KDHE is looking at other state systems, specifically information shared

and timeliness of return results. KDHE CCL is working with KDHE legal to determine how we can get complete information from each state with in the 45 days permitted. The system build is still in discovery and initial process.

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

If CCL is made aware of a crime in another state for a person working in a child care facility the legal department will request records from that state, which is the current procedure.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

Appendix A.11: Interstate child abuse and neglect registry check for new or prospective staff. (See related question at 5.4.8 (a))

[Describe the provision from which the state/territory seeks relief.](#)

Kansas is requesting an extension to meet the requirements to conduct a five-year lookback at any states a person may have resided in. Final decisions have not been made at this time. KDHE is looking at other state systems, specifically information shared and timeliness of return results. KDHE CCL is working with KDHE legal to determine how we can get complete information from each state with in the 45 days permitted. The system build is still in discovery and initial process.

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

Providers will continue to submit identifying information for anyone working, residing or

volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

If CCL is made aware of a crime in another state for a person working in a child care facility the legal department will request records from that state, which is the current procedure.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

Appendix A.12: Interstate child abuse and neglect registry check for existing staff. (See related question at 5.4.8 (b))

[Describe the provision from which the state/territory seeks relief.](#)

Kansas is requesting an extension to meet the requirements to conduct a five-year lookback at any states a person may have resided in. Final decisions have not been made at this time. KDHE is looking at other state systems, specifically information shared and timeliness of return results. KDHE CCL is working with KDHE legal to determine how we can get complete information from each state with in the 45 days permitted. The system build is still in discovery and initial process.

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

If CCL is made aware of a crime in another state for a person working in a child care facility the legal department will request records from that state, which is the current procedure.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. Providers will continue to submit identifying information for anyone working, residing or volunteering in a licensed child care facility pursuant to Kansas regulation. Name based Kansas criminal checks and Abuse and Neglect Registry checks will continue to be conducted until the compressive background check system can be fully implemented.

 **Appendix A. 13: New staff hired to work provisionally until background checks are completed. (See related question at 5.4.9)**

Describe the provision from which the state/territory seeks relief.

The barrier in Kansas is the time of 4-6 weeks after the submission request for a background check before state and federal results may have provided to Kanas Health and Environment, the licensing authority. Kansas is requesting that staff hired to begin work in a licensed facility, with supervising staff that have completed the background check requirements, be allowed to work provisionally with directly line of sight supervision until the background checks are completed.

The completion of a background check submission includes the return of the fingerprint card or scan, required waiver and fee to KDHE CCL and forwarded to KBI. The facility will be notified in writing that provisional work is allowed for identified person and will stipulate the requirement of supervising staff.

The delay will create a barrier that is likely to result in failure to maintain staff/child ratios as required by regulation or the reduction is children that can be served.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

New staff allowed to work provisionally will ensure that staff/child ratios are met and that supervision is sufficient to ensure the health safety and well-being of children in care. Staff hired to begin work provisionally in a licensed facility will be supervised by qualified staff that have completed the background check requirements and are cleared to work.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Staff hired to begin work provisionally in a licensed facility will be supervised by qualified staff that have completed the background check requirements and are cleared to work.