

CCDF Plan Outline

CCDF Background: In November 2014, Congress passed the Reauthorization of the Child Care and Development Fund. This law included several new requirements for states particularly around health and safety, monitoring, and child care subsidy. From March to August 2015, Regional Coalitions, the Early Learning Advisory Council, the Indian Early Learning Policy council and the Executive CCDF Leadership Team provided input into the plan. The Early Start Act was passed in June 2015 and the policy aspects of this new state law are also included in the plan.

In August 2015, division staff began to write responses to the CCDF pre-print. The writing continues and we now have draft CCDF plan for public review. A statewide public hearing is required by federal law, and is scheduled for January 28, 2016. The plan is due March 1, 2016 and used to measure the degree of compliance the state has toward the federal regulations. Plan approval from the federal Office of Child Care gives DEL permission to use federal CCDF funds in the ways that are described in the plan. The plan is amended as needed to respond to legislative and policy changes.

Sections of the Plan

Section 1 Define CCDF Leadership and Coordination with Relevant Systems

Define CCDF Leadership and Coordination with Relevant Systems

- 1.1 CCDF Leadership
- 1.2 CCDF Policy Decision Authority
- 1.3 Consultation in the Development of the CCDF Plan
- 1.4 Coordination with Partners to Expand Accessibility and Continuity of Care
- 1.5 Optional Use of Combined Funds
- 1.7 Coordination with Local or Regional Child Care Resource and Referral Systems
- 1.8 Disaster Preparedness and Response Plan

Summary: This section lists who was consulted in the development of the plan. It also contains the partners that are helping with expanding access and continuity for children and families who use child care subsidy.

Coordination is described with Child Care Resource and Referral Systems which is Child Care Aware Washington in our state.

The completion of the Disaster Preparedness and Response Plan is reflected in the end of this section.

Policy Questions:

1. Is description of EHS-CC partnership supports adequate?

2. Do we have all of the right partners listed and described accurately?
3. Could we do more to expand “braided funding” opportunities?

Section 2 Promote Family Engagement through Outreach and Consumer Education

- 2.1 Information about Child Care Financial Assistance Program Availability and Application Process
- 2.2 Consumer and Provider Education Information
- 2.3 Website for Consumer Education

Summary: This section describes the current application process for child care subsidy, and the way that families can get information about the availability and quality of child care.

DEL has been working on improvements to the website for consumer education which integrates Child Care Check with the Child Care Aware website. DEL will include the federal requirement that child deaths, serious injury and substantiated child abuse and neglect aggregate numbers are available to the public on the web.

Policy Questions:

1. Do we accurately describe our outreach efforts?
2. Is there more outreach we could be doing?

Section 3 Provide Stable Child Care Financial Assistance to Families

- 3.1 Eligible Children and Families
- 3.2 Increasing Access for Vulnerable Children and Families
- 3.3 Protection for Working Parents
- 3.4 Family Contribution to Payment

Summary: This section details eligibility and access for child care subsidy. It included the amounts of parent copayment.

Policy Questions:

1. Is there more detail needed here?
2. Do you see more that we could do around expanding eligibility?
3. Where is it appropriate that we can/should waive copays?

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

- 4.1 Parental Choice In Relation to Certificates, Grants or Contracts
- 4.2 Assessing Market Rates and Child Care Costs
- 4.3 Setting Payment Rates

- 4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access
- 4.5 Payment Practices and Timeliness of Payments
- 4.6 Supply Building Strategies to Meet the Needs of Certain Populations

Summary: This section discusses how families are informed of their options about the choice of providers, including high quality providers. It also provides summary data from the 2014 Market Rate Survey, tiered reimbursement, special needs rates and child care for homeless families.

The procedures and process for increase access to high quality programs by families receiving subsidy also is addressed.

Policy Questions:

1. What would you like to see more of in grant or contracting opportunities?
2. Could/should we reconsider opportunities to “braid” funding?
3. Any additional input on our market rate survey or how else we determine subsidy rates?
4. What do you think about enrollment-based payment policies?
5. We may need to do more to build supply in specific age ranges and/or geographic areas; suggestions?

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

- 5.1 Licensing Requirements and Standards
- 5.2 Monitoring and Enforcement Policies and Practices
- 5.3 Criminal Background Checks

Summary: Health and safety of children is strengthened with the 2014 reauthorization of CCDF. DEL must certify that it has licensing requirements to all child care providers that accept federal subsidies and exemptions to licensed care do not endanger children. Ratios of adult to child must be established, and have health and safety requirements for providers receiving CCDF in the following areas:

- Prevention and control of infectious diseases (including immunization)
- Prevention of sudden infant death syndrome and use of safe sleeping practices
- Administration of medication, consistent with standards for parental consent
- Prevention of and response to emergencies due to food and allergic reactions
- Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
- Prevention of shaken baby syndrome and abusive head trauma

- Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))
- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
- First aid and cardiopulmonary resuscitation (CPR) certification

DEL must certify that monitoring of all providers with the exception of relatives which can be exempted takes place unannounced and yearly.

Policy Questions:

1. This section mostly reflects current licensing requirements (training, ratios, etc.); anything you'd like to see changed?
2. We have preliminary plans to monitor non-relative FFN care; any concerns/ideas to share?
3. Expanded background checks are going to be a heavy lift...do you have thoughts on the benefit-to-cost comparison for this work?

Section 6 Recruit and Retain a Qualified and Effective Child Care Workforce

- 6.1 Training and Professional Development Requirements
- 6.2 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds
- 6.3 Early Learning and Developmental Guidelines

Summary: This section shows the variety of professional development strategies used to increase the capacity of providers knowledge of resource and best practice with children. It requires the state to have developed and implemented core competencies and has several ways that DEL can support providers to access training and education. The professional development system is described.

Policy Questions:

1. What more can we do to train our early learning professionals?
2. What more should we do to meet needs of diverse provider pool and the families they serve?

Section 7 Support Continuous Quality Improvement

- 7.1 Activities to Improve the Quality of Child Care Services
- 7.2 Quality Rating and Improvement System

- 7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers
- 7.4 Child Care Resource & Referral
- 7.5 Facilitating Compliance with State Standards
- 7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services
- 7.7 Accreditation Support
- 7.8 Program Standards
- 7.9 Other Quality Improvement Activities

Summary: DEL is required to improve the quality of child care which is described in this section. States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory. A special emphasis is given to infant and toddler care in the reauthorization of CCDF. This section asks what strategies are used to improve the quality of infant and toddler care, including training and professional development to expand child care provider's ability to provide developmentally appropriate services.

Policy Questions:

1. Any more to add to describe Early Achievers or related quality efforts?

Section 8 Ensure Grantee Program Integrity and Accountability

8.1 Program Integrity

Summary: DEL must have accountability measures to make sure that the policies are followed and to address potential fraud. DEL maintains a team of auditors for child care subsidy who check provider attendance records for errors. This section also discusses contract monitoring, algorithms run by Health Care Authority that identify payment errors such as duplicate payments and overbilling.

Policy Questions:

1. Any more we can/should do to ensure program integrity and accountability?