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Child Care and Development Fund (CCDF) Plan

for

Kentucky

FFY 2019–2021

This Plan describes the Child Care and Development Fund program to be administered by the State or Territory for the period from 10/1/2018 to 9/30/2021, as provided for in the applicable statutes and regulations. The Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

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

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Introduction and How to Approach Plan Development

The Child Care and Development Fund (CCDF) program provides resources to state, territory, and tribal grantees that enable low-income parents to work or pursue education and training so that they can better support their families while at the same time promoting the learning and development of their children. The CCDF program also provides funding to enhance the quality of child care for all children. On November 19, 2014, the Child Care and Development Block Grant (CCDBG) Act of 2014 was signed into law (Pub. L. 113-186). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for state and territory grantees. In September 2016, the final rule was released. The final rule makes regulatory changes to the CCDF program based on the CCDBG Act of 2014. These changes strengthen requirements to protect the health and safety of children in child care; help parents make informed consumer choices and access information to support child development; provide equal access to stable, child care for low-income children; and enhance the quality of child care and the early childhood workforce.

The Plan is the primary mechanism that the Administration for Children and Families (ACF) uses to determine state and territory compliance with the requirements of the law and rule. The Preprint provides a tool for states and territories to describe to ACF their progress on the following sections:

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

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

CCDF Plan Submission

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

electronic and information technology for individuals with disabilities. (See <http://www.section508.gov/> for more information.)

In responding to questions, states and territories are asked to provide brief, specific summaries and/or bullet points only with specific language that responds to the question. Do not use tables or copy and paste charts, add attachments, or paste manuals into the Plan. All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing oversight and monitoring efforts.

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. Coordination with child care resource and referral (CCR&R) systems are explained, and Lead Agencies outline the work they have done on their disaster preparedness and response plans.

1.1 CCDF Leadership

The Governor of a state or territory must designate an agency (which may be an appropriate collaborative agency) or establish a joint interagency office to represent the state or territory as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto (658D; 658E(c)(1)).

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

Identify the Lead Agency or joint 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: **Cabinet for Health and Family Services (CHFS)**

Department for Community Based Services (DCBS)

Division of Child Care (DCC)

Street Address: **275 East Main St, 3W-A**

City: **Frankfort**

State: **Kentucky**

ZIP Code: **40621**

Web Address for Lead Agency: <http://chfs.ky.gov>

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: **Adria**

Lead Agency Official Last Name: **Johnson**

Title: **Commissioner**

Phone Number: **502-564-3703**

Email Address: **Adria.Johnson@ky.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: **Christa**

CCDF Administrator Last Name: **Bell**

Title of the CCDF Administrator: **Director**

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

Street Address: **275 E. Main Street, 3C-F**

City: **Frankfort**

State: **Kentucky**

ZIP Code: **40621**

Phone Number: **502-564-2524 ext. 3762**

Email Address: christa.bell@ky.gov

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

CCDF Co-Administrator First Name: **Darlene**

CCDF Co-Administrator Last Name: **Hoover**

Title of the CCDF Co-Administrator: **Assistant Director**

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

Street Address: **275 East Main Street, 3C-F**

City: **Frankfort**

State: **Kentucky**

ZIP Code: **40621**

Phone Number: **502-564-2524 ext. 3761**

Email Address: Darlene.hoover@ky.gov

Description of the role of the Co-Administrator: **Assist the Director and Lead Agency with administration of programs and services and development of state plan.**

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.

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.

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

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.

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.

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.

What processes will the Lead Agency use to monitor administrative and implementation responsibilities performed by agencies other than the Lead Agency as indicated above, such as through written agreements or monitoring and auditing processes (98.11(a)(3))? Describe those processes and any indicators or measures used to assess performance.

The Lead Agency's Division of Administration and Financial Management (DAFM) is responsible for the department's financial management and budget activities through oversight, monitoring, auditing and assuring process compliance with CCDF requirements at § 98.65(h), federal auditing procedures, and CHFS' policies and procedures. This includes routine monitoring of contracts and agreements.

CHFS may issue penalties of up to 5% of the total amount of a contract for failure to perform services outlined within a contract's scope of work. If CHFS elects not to exercise any of the penalty clauses in a particular instance, a corrective action plan may be issued to facilitate resolving performance issues prior to imposing penalties.

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.

CHFS' information systems and information technology policy applies to all internal CHFS employees, consultants, temporary personnel, third party providers under contract with a CHFS agency, and other entities that interact with CHFS information related resources. This policy covers the applicable computer hardware, software, application, configuration, business data, and data communication systems.

Although such a request has not been received to date, Kentucky would share information technology or systems upon request of another public agency to the extent practicable and appropriate.

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.

Kentucky statutes prohibit accessing or releasing confidential information and/or records, or causing confidential information and/or records to be accessed or released to self, other individuals, clients, relatives, etc., outside the scope of the employee assigned job duties. Violation may result in disciplinary action taken against the employee up to and including dismissal and may be subject to civil and criminal liability for the disclosure of confidential information to unauthorized persons.

Under KRS 194A.060, all records and reports of CHFS, which directly or indirectly identify a patient or client, or former patient or client, of CHFS or CHFS by a former name (CHR, CHS, and CFC), are confidential.

Under KRS 205.175, all public assistance communications, both written and oral, generated during the course of business are confidential and privileged. KRS 205.835 prohibits the unauthorized use of information by an employee.

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.

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.

DCBS consults with general-purpose local government through its participation on Community Early Childhood Councils. Membership to individual councils is statutorily mandated and charged with creating local vision for early childhood service delivery, including child care. Individuals receiving CCDF funds are members of these councils, along with other general-purpose local government.

Web link: [Kentucky Revised Statue \(KRS\) 200.707 Community Early Childhood Council](#)

Regional Child Care Administrators through the Kentucky Child Care Aware Network of Services also solicit feedback from local government entities within their assigned regions and share this input back with the Lead Agency through established structures for communication and information sharing.

b) Describe how the Lead Agency consulted with the State Advisory Council.

The Kentucky State Child Care Administrator is a statutorily mandated, voting member of the Early Childhood Advisory Council (ECAC), as is the CHFS Secretary. The ECAC meets at least quarterly and at other times upon call of the chair or majority of the council. The ECAC charge is with making recommendations to CHFS.

Web link: [Kentucky Revised Statue \(KRS\) 200.700 Early Child Childhood Advisory Council](#)

The State Administrator presented information about the State Plan at a quarterly ECAC meeting and solicited feedback. Members were also asked to volunteer to serve on a

stakeholders group that will meet outside of the quarterly ECAC meeting to have a more focused and detailed discussion on the State Plan.

Kentucky also has a Child Care Advisory Council. This Council was consulted at the quarterly meetings that fell during the development of the State Plan prior to submission. Additionally, they were asked to volunteer to serve on the stakeholders group, which will continue to meet throughout the period the State Plan is in effect.

Web link: [199.8983 Kentucky Child Care Advisory Council](#)

- c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. **N/A**
- d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan.

The CCDF State Plan preliminary draft goes through multiple opportunities for review and revisions. The process includes an internal review, recommendations and comments period by fellow state agencies and departments in the development of the state plan, in addition to a 30-day public comment period for which public and private entities may submit written comments and attend a public hearing regarding the state plan.

The following list of agencies and partnerships is not all-inclusive.

- Office of the Inspector General
- Department of Public Health
- State coordinator for Homelessness
- Division of Protection and Permanency
- Division of Family Support
- Department of Behavioral Health and Intellectual Disabilities
- Kentucky Child Care Aware Child Care Resource and Referral Network of Services
- Department of Workforce Development
- Department of Education Child and Adult Care Food Program
- Early Head Start-Child Care Partnership grantees
- Kentucky Head Start Association
- Governor's Office of Early Childhood

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(s) of notice of a public hearing. **April 2, 2018** *Reminder:* Must be at least 20 calendar days prior to the date of the public hearing.

- b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include specific website links if used to provide notice.

DCBS advertises in regional newspapers, distributes notice via email distribution lists, and posts the preliminary state plan on its website for public comment.

Division of Child Care - <http://chfs.ky.gov/dcbs/dcc/>

The Legislative Research Commission posts a calendar of the standing and interim committees, as well as a daily calendar, accessible from the main site:

<http://www.lrc.ky.gov/>

The DCBS-Division of Child Care also distributed the notice of the plan in the state's major newspapers, through email distribution lists, and on its website.

The Kentucky Legislature makes effort to ensure the pages of this website are accessible to individuals with disabilities in accordance with [Section 508 of the Rehabilitation Act](#). Additionally, the Commonwealth of Kentucky has adopted the World Wide Web Consortium's [Web Content Accessibility Guidelines 1.0](#) Conformance Level "Double-A". The Commonwealth of Kentucky provides, upon request, reasonable accommodations, including auxiliary aids and services necessary to afford an individual with a disability an equal opportunity to participate in all services, programs, and activities. To request materials in an alternative format, each agency's website provides information for contacting the person or persons responsible for providing the service within the agency. Persons with hearing and speech impairments can contact each agency by using the Kentucky Relay Service, a toll-free telecommunication device for the deaf (TDD). For voice to TDD, call 800-648-6057. For TDD to voice, call 800-648-6056. (<http://www.lrc.ky.gov/Accessibility.htm>)

- c) Date(s) of the public hearing(s). **April 24, 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.
- d) Hearing site(s) or method(s), including how geographic regions of the state or territory were addressed. A public hearing for the preliminary State Plan was held. Prior to the hearing, the date and location were advertised in regional newspapers to ensure stakeholders from all areas of the state were informed. Other solicitation methods included statewide email distribution and posting the preliminary plan on the DCBS-Division of Child Care website.
- e) How the content of the Plan was made available to the public in advance of the public hearing(s). The preliminary plan is submitted in hardcopy to the Legislative Research Commission and made available through the Internet, email, and newspaper advertisement.
- f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? Public comments received through the public hearing(s) and written submissions are recorded and reviewed with written response provided for each comment. Amendments to the drafted content are made as a result of public comment when appropriate.

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)).

- a) Provide the website link to where the plan, any plan amendments, and/or waivers are available. <http://chfs.ky.gov/dcbs/dcc/>
- 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: **Pre-Print of State Plan is provided to Child Care Advisory Council and Early Childhood Advisory Council for recommendations and input.**
 - Working with child care resource and referral agencies. Describe: **The lead agency contracts with the University of Kentucky for Child Care Aware Network of Services, which works in coordination on the development of the CCDF State Plan.**
 - Providing translation in other languages. Describe:
 - Sharing through social media (e.g., Twitter, Facebook, Instagram, email). Describe:
 - Providing notification to stakeholders (e.g., provider groups, parent groups). Describe: **Kentucky's state plan draft is posted on the division's website and filed with the Legislative Research Commission, who coordinates opportunity for public hearing(s) in accordance with Kentucky Revised Statute (KRS) Chapter 45. Notice to stakeholder groups are also made via listserv.**
 - 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)).

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 entities 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; linking comprehensive services to children in child care settings; or developing the supply of quality care for vulnerable populations. Check who you 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: **The Department of Education and Kentucky Head Start grantees are partners with DCBS. These entities work collaboratively to ensure children are ready to succeed in school, including wrap-around service coordination with child care providers to expand accessibility and continuity of care, and to assist children enrolled in early childhood programs to receive full-day services. Additionally coordination with local government is achieved through the work of the Community Early Childhood Councils. Through contract with the University of Kentucky's Network of Services, Regional Child Care Administrators are also tasked with coordinating with local government to align goals and coordinate efforts to expand accessibility and continuity of care.**

(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:

The Secretary of CHFS and the DCC Director are two of 26 council members appointed to serve on the Kentucky Early Childhood Advisory Council to strengthen state, regional, and local level coordination and collaboration among the various sectors and settings of early childhood programs throughout the Commonwealth. Goals of the ECAC include improving the quality of early childhood programs, increasing supply and access to quality care, creating an aligned and unified early childhood system across Head Start, public preschool, and child care settings, and improving kindergarten readiness.

Link: [200.700 Early Childhood Advisory Council -- Membership -- Meetings](#)

Does the Lead Agency have official representation and a decision-making role in the State Advisory Council (or similar coordinating body)?

No

Yes

(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:

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 Section 619 for preschool).
Describe the coordination goals and process:

DCBS collaborates with the Department for Public Health First Steps early intervention program providing services to families and children age's birth to three who have developmental disabilities. Early Intervention Services are comprised of specially designed strategies provided in a group or individual setting including the child's natural caregiver environment through coordination with the child care facility and parent.

- (REQUIRED) State/territory office/director for Head Start state collaboration. Describe the coordination goals and process:

DCBS coordinates with the Kentucky Head Start State Collaboration Director to work with families and early care and education providers to provide healthy environments and developmental experiences that promote growth and learning to ensure that all children enter school eager and excited to learn. This collaboration leverages partnerships and resources to remove barriers so every child enters school ready to grow and learn. Additionally, DCBS/DCC works closely with the Kentucky Head Start Association in an intentional effort to align goals and activities.

- (REQUIRED) State agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals and process:

The Division of Child Care coordinates with the Department for Public Health (DPH), Division of Maternal and Child Health, which includes the First Steps Program (Part C), the Health Access Nurturing Development and Services (HANDS) program (Home Visitation), and Child Care Health Consultation Program. The Division of Child Care coordinates with each of these programs through shared training, information exchange, and committee workgroups. The Strengthening Families initiative through DPH is utilized throughout state agencies and represents a multi-disciplinary partnership of more than 20 public and private national, state, and local organizations dedicated to promoting six research-based protective factors into services and supports for children and their families. Kentucky Strengthening Families is part of the nationally recognized Strengthening Families: A Protective Factors Framework initiative coordinated nationally by the Center for the Study of Social Policy.

- (REQUIRED) State agency responsible for employment services/workforce development. Describe the coordination goals and process:

The Department for Workforce Investment, Office of Employment and Training connects clients to employment, workforce information, education and training. This agency refers clients for DCBS and child care assistance services. Additionally, Kentucky's Resource and

Referral Network utilizes regional workforce development specialists to provide training, skill development, and consultation for small business.

- (REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK). Describe the coordination goals and process:

The Department of Education is a major partner with DCBS, as both entities work collaboratively to assure children are ready to succeed in school, including wrap-around service coordination with providers.

- (REQUIRED) State/territory agency responsible for child care licensing. Describe the coordination goals and process:

DCBS contracts with the Cabinet's Office of Inspector General (OIG) Division of Regulated Child Care (DRCC) for the inspection, licensing and certification of licensed child-care centers and certified family child-care homes pursuant to Kentucky statutes and regulations.

Regional DRCC staff are responsible for conducting on-site visits and investigating complaints of all Kentucky licensed child-care centers, certified family child care homes and registered providers to determine compliance with applicable child care regulations.

- (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:

Child care centers can participate in the Child and Adult Care Food Program independently or through a sponsoring organization, that accepts full administrative and financial responsibility for the program. The Child and Adult Care Food Program (CACFP) partners with childcare centers, daycares, Head Starts, family child-care homes to provide healthy meals to Kentuckians. The CACFP contributes to the wellness, healthy growth, and development of young children by providing institutions monetary reimbursement for serving healthy meals. This USDA program, administered by the Kentucky Department of Education, provides teaching the principles of good nutrition throughout the state.

- (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:

DCBS works in collaboration with the McKinney-Vento State Coordinator housed in the Kentucky Department of Education to identify children experiencing homelessness and prioritize services to those families. Those experiencing homelessness applying for child care assistance are eligible for expedited services. They are entitled to immediate approval and enrollment with a child care provider. Families experiencing homelessness

have up to three calendar months from the date of application to return all other verification.



(REQUIRED) State/territory agency responsible for employment services and workforce development. Describe the coordination goals and process:

The Department for Workforce Investment, Office of Employment and Training connects clients to employment, workforce information, education and training. This agency refers clients for DCBS and child care assistance services. Additionally, Kentucky's Resource and Referral Network utilizes regional workforce development specialists to provide training, skill development, and consultation for small business.



(REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program. Describe the coordination goals and process:

The agency responsible for the Temporary Assistance for Needy Families program is also within DCBS. The Division of Family Support is responsible for administering and determining eligibility through benefind, a single access point for the Supplemental Nutrition Assistance Program (SNAP), the Kentucky Transitional Assistance Program (K-TAP), Kentucky Works Program (KWP), Medicaid, and Child Care Assistance Program (CCAP). Division of Child Care staff have daily interaction and coordination of services with the Division of Family Support.



(REQUIRED) Agency responsible for Medicaid and the state Children's Health Insurance Program. Describe the coordination goals and process:

DCBS coordinates with the Department for Medicaid Services and the Department of Public Health to include access to comprehensive services to children in child care settings. Both agencies are organized within CHFS and work closely together on a daily basis. As noted above, eligibility for Medicaid programs is also determined in conjunction with eligibility determination for all other public assistance programs, including child care.



(REQUIRED) State/territory agency responsible for mental health. Describe the coordination goals and process:

DCBS and Department for Behavioral Health, Developmental and Intellectual Disabilities work cooperatively to ensure effective delivery of behavioral health, developmental and intellectual disability services to Kentuckians. The Division of Child Care coordinates with this agency through shared training, information exchange, and joint steering committees with common goals.

- (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:

CHFS contracts with the University of Kentucky's Interdisciplinary Human Development Institute (UK-HDI) to provide coordination and leadership to support the professional development of child care providers and trainers. These supports include a statewide regional network of Child Care Resource and Referral (CCR&R) services, which at a minimum include CCR&R services designated in [KRS 199.8992](#) and coordination of professional development delivery, attainment, and content initiatives to support CCDF programs. Professional development supports and provides opportunities for early care and education trainers and higher education faculty to have access to knowledge and training to develop and enhance their skills as trainers of adults who work with young children and families. CHFS also coordinates with UK-HDI to provide services regarding child care development programs pertaining to Kentucky Higher Education Assistance Authority (KHEAA) scholarships, non-college scholarships, Commonwealth Child Care Credential, mini-grants and the development of individual professional growth plans for early care and education professionals participating in the scholarship program. Coordination of quality and health/safety initiatives to support the CCDF programs is also accomplished through this partnership.

- (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals and process:

The Division of Child Care collaborates with Kentucky Out of School Alliance (KYOSA) to establish afterschool quality standards as well as professional development training targeted to providers in afterschool settings. This collaboration with KYOSA seeks to establish afterschool quality standards as well as professional development training targeted to providers in afterschool settings.

- (REQUIRED) Agency responsible for emergency management and response. Describe the coordination goals and process:

Kentucky's Division of Emergency Management is responsible for coordinating the state's emergency management and response. The Lead Agency partners with Emergency Management to ensure state and county level planning efforts are reviewed and updated in regular intervals.

Kentucky's Division of Emergency Management Authority: [KRS39A.050 2\(c\)](#) designates responsibility for coordinating disaster and emergency services.

Planning guidance ensures that local, regional and state emergency operations plans meet minimum federal and state requirements for standard content, format and usability in the development and integration of Emergency Operations Plans.

- [County ESF and EOP](#)
- [State ESF and EOP](#)

Both the Division of Emergency Management and the Department for Public Health staff emergency operation centers during these times and coordinate with the lead agency for emergency social services, child care, and public assistance as needed.

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 Kentucky Department of Education (KDE), in collaboration with the State Board of Education, ECAC, the Child Care Advisory Council, and CHFS, is pleased to announce a new grant program to be designed to incentivize cooperative public/private partnerships between public school districts and child care providers to develop full-day, high-quality programs for at-risk children. The incentive grant program represents an opportunity for school districts and child care providers to improve the quality of services in their communities.

- State/territory institutions for higher education, including community colleges. Describe: The Lead Agency coordinates with institutions for higher education and community colleges across the state to provide opportunities for early childhood education professional development opportunities.

- Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services. Describe:

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

Efforts between DCBS and Department for Public Health- Division of Maternal and Child Health are geared toward joint screening and training of practitioners. Home visitors are also provided updates to child care rules and regulations as a means of helping first-time parents choose quality arrangements for their children.

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

DCBS coordinates with the Department for Medicaid Services and the Department of Public Health to include access to comprehensive services to children in child care settings. These agencies are internal to CHFS.



State/territory agency responsible for child welfare. Describe:

The Division of Protection and Permanency (DPP), also within the Department for Community Based Services, coordinates the state's child welfare and violence prevention efforts to prevent or intervene in child maltreatment. Preventive and protective child care assistance is provided statewide on a case-by-case basis as referred by DPP personnel to Division of Child Care for approval processing.



State/territory liaison for military child care programs. Describe: n/a



Provider groups or associations. Describe: DCBS leadership have regular meetings with provider advocacy groups to receive input to improve the quality of child care in the state and meet provider and family needs.



Parent groups or organizations. Describe: n/a



Other. Describe:

The 2015 Legislative session passed House Bill 429, an act establishing the Kentucky Child Care Advisory Council, which has been codified as KRS 199.8983. Members appointed by the Governor serve a term of three (3) years meeting quarterly. The council advises on matters affecting the operations, funding, and licensing of child-care centers and family child-care homes with recommendations address availability, affordability, accessibility and quality to the Department for Community Based Services, Division of Child Care.

The 18 members include:

- Commissioner of the department, or designee;
- Four (4) members appointed by the Governor representing licensed child-care centers;
- Two (2) members appointed by the Governor representing certified family child-care home;
- Three (3) members appointed by the Governor who are parents and/or guardians receiving services in licensed centers or certified homes;
- Three (3) members appointed by the Governor from the private sector who are knowledgeable about education, health, and development of children;
- Director of the Division of Child Care within the department, or designee;
- Commissioner of education, Education and Workforce Development Cabinet, or designee;
- Executive director of the Governor's Office of Early Childhood, or designee;
- Commissioner of the Department for Public Health within the cabinet, or designee;
- State fire marshal, Public Protection Cabinet, or designee.

Unlike the Early Childhood Advisory Council, this statute includes child care providers and parents among membership to offer their expertise and guidance from working as a provider in the field of early child care. The Child Care Advisory Council convened for the first time in October 2017 and meets quarterly.

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 funding for CCDF child care services with funding for any of the required programs listed 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, homeless children, and children in foster care (658E(c)(2)(O)(ii)). Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams to expand and/or enhance services for 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 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 the 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).

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

No.

Yes. If yes, describe at a minimum:

a) How you define “combine”

CHFS, the grant’s lead agency, defines “combine” as the comingling of state, federal and general funds into one child care-funding stream.

b) Which funds you will combine

Kentucky's Master Tobacco Settlement Agreement funds, State General Funds, Temporary Assistance for Needy Families block grant (TANF), and Child Care Development Funds (CCDF)

- 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.

Continued outcomes, as funds are available, include:

- Ensure access to childcare services for homeless children;
 - Maintain qualifications and reliability training for licensing inspectors;
 - Maintain a system for annual inspection of child-care providers to ensure compliance with licensing standards and regulations;
 - Provide a comprehensive criminal background checks for child-care providers and childcare staff members;
 - Continue to enhance current quality activities that relate to improving the quality of care for infants and toddlers;
 - Maintain recent addition of initial 90-day job search to support workforce development and self-sufficiency of families; and
 - Maintain a graduated phase-out of assistance for families whose income has increased at the time of redetermination.
- d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?

The DCBS-Division of Administration and Financial Management (DAFM) supports and oversees DCBS' budgeting accounting functions. DAFM prepares the Comprehensive Annual Financial Report and components of the CHFS Cost Allocation Plan, manages grants and payments, performs audits, and conducts contract development, maintenance, and monitoring.

- e) How are the funds tracked and method of oversight

CHFS tracks funds through a system of internal controls within the accounting and policy organizational structure of DCBS and its CHFS-level partners, the Division of General Accounting and the Office of Finance and Budget. Within the State's financial management system, the enhanced Management Administrative Reporting System (eMARs) tracks and provides accountability for federal and state fund disbursements,

<http://finance.ky.gov/internal/eMARS/>.

The State Auditor of Public Accounts annually assesses the lead agency internal controls.

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 child care program (98.55(f)).

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)? Check all that apply.

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

- 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:
Kentucky's Master Tobacco Settlement Agreement funds, State General Funds, restricted funds (motor vehicle)
 - If known, identify the estimated amount of public funds that the Lead Agency will receive: \$ unknown at this time.
- 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)).

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)).

CHFS has committed to ongoing endeavors to encourage the private sector to meet employee needs for child care. KRS 199.8992 charges CHFS with stimulating employer involvement in improving the affordability, availability, safety, and quality of child care for their employees and for the community. DCC, through subcontracts with Kentucky's Child Care Resource and Referral Network, has conducted several outreach activities targeted at local businesses, inclusive of a marketing plan with material and information to employers on the importance of high quality child care to the business community. CCDF-funded programs regularly meet with private, faith based, and community-based organization to strategize ways to collaborate and minimize duplication of service delivery.

Community Early Childhood Councils (CECC) created under KRS 200.707 to improve the quality and availability of child care, especially in low resource or high need areas, are a vehicle for bringing together community members to support issues of importance to children and families. CECCs provide a mechanism for attracting and assessing the unique local early care and education needs of a community. CECCs may apply for additional resources to meet these needs, as well as afford citizens the opportunity to provide input to state policy makers and planners.

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 section 7.6 to address how quality set-aside funds, if applicable, are used to support a statewide CCR&R system.

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

No. The state/territory does not fund a CCR&R system 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 system?

The Kentucky Partnership for Early Childhood Services, housed at the University of Kentucky Human Development Institute, is funded through a contract with CHFS to provide coordination and administration of statewide Child Care Resource and Referral (CCR&R) network of services. The contract deliverable is to ensure adequate supply of quality child care programs and services are available in each regional hub covering the Area Development District. DCBS- Division of Child Care, through its CCR&R contract, works actively to meet the needs of families, provide referral information to families seeking child care, increase family knowledge of the characteristics of high quality early care and education services, and increase provider access to training and/or professional development opportunities.

b) How the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated.

The CCR&R regional network of services include eight Regional Child Care Administrators, five Content Area Coordinators, one Technical Assistance (TA) Specialist for Health/Safety, four Technical Assistance QRIS Specialists, 24 Quality Coaches, four Technical Assistance Health/Safety Coaches, four Training Coaches, and 13 Professional Development Coaches. Although services are divided by region to be responsive to local needs, there is central oversight for the entire network of services to ensure consistency.

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)).

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:

In the 2011 Regular Session, a new Kentucky statute was created that required licensed child-care centers to create and maintain evacuation plans, inclusive of a reunification component and considerations of children with special needs, and share those plans annually with local emergency management personnel and parents. In the 2012 Regular Session, this statute was amended to also apply to certified family child-care homes, providers serving a smaller number of children in the provider's home. Enforcement of the statute began in 2012 following better than a year of collaborative work with the Kentucky Department of Public Health and Division of Emergency Management to include the development of a free, online evacuation plan template and training for child care providers, and enhanced awareness on the part of local emergency management. On September 13, 2012, DCBS formally proposed six administrative regulations to incorporate the evacuation plan requirement within the standards for all child care providers in Kentucky, including registered providers in CCAP (i.e., family, friend, or neighbor providers). The administrative regulations were adopted into law March 8, 2013.

In child care, every employee of a licensed, certified, or registered child care provider with care responsibilities is required to have a six-hour orientation training within the first 90 days of

employment. An entire section of the training is devoted to emergency procedures. This section was modified in 2010 to address evacuation of children with special needs and emphasize the importance of knowing community emergency response plans.

The Child Care Resource and Referral Agencies (represented statewide) are members of Child Care Aware (CAA) and provide ongoing training and technical assistance on emergency preparedness through their websites and other continuing education and professional development opportunities.

The Child Care Health Consultation for Healthy Start in Child Care Program, through the Department for Public Health, provides training and technical assistance to child care providers utilizing the Caring for Our Children Resource as a basis for "best practice".

Emergency procedures and plans are embedded throughout the Resource. Kentucky child care preparedness resources can be accessed at http://training.chfs.ky.gov/Child_Care_Preparedness/html/index.html.

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:

DCBS continues to gain more in-house expertise with continuity of operations planning and emergency preparedness. DCBS staff participates in trainings, conferences, webcasts, and informational calls to the extent agency priorities and resources allow.

DCBS Central Office, in partnership with its regional offices and service agents, can mobilize staff from surrounding counties/regions and other resources to ensure service coverage for a local office with compromised capabilities as a result of a disaster or an emergency. In addition to resources within the agency, DCBS is able to access additional communication and a technology resource through sister state agencies and has means through these partnerships to better adapt to the scope of an emergency or disaster. DCBS Central Office regularly, if not daily, also participates in debriefings and supports communications among state agency partners when a state/federal disaster or emergency is declared.

Kentucky child care preparedness resources can be accessed:

http://training.chfs.ky.gov/Child_Care_Preparedness/html/index.html

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

DCBS has been able to maintain an understanding of the state's comprehensive disaster and emergency framework and provide input through its ongoing partnerships and collaborations. DCBS provides representation and necessary contacts for statewide disaster/emergency preparedness groups and specialists (e.g., Kentucky Community Crisis Response Board, Kentucky Functional Needs Collaborative, and Kentucky Division of Emergency Management's plan

administrators, Emergency Management Specialist for the Administration for Children and Families-Region IV, and Administrative Office of the Courts). As able, DCBS sends a representative to participate in the Health and Medical Preparedness Advisory Committee and its subcommittee, the Kentucky Functional and Access Needs Collaborative, facilitated by the Department for Public Health. The subcommittee, in particular, focused on populations with special needs during a disaster. The populations include seniors, individuals in congregate care, and individuals with disabilities, English learners, and children. The committee and subcommittee meet no less than quarterly on the same day. The DCBS Commissioner is statutorily a member of the Kentucky Community Crisis Response Board. The Commissioner sends a designee to the board's quarterly meeting as workload allows. The board's website: <http://kccrb.ky.gov/>.

Kentucky has not created a Taskforce on Children in Disasters due to the duplication and possible conflict with ongoing groups' efforts.

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:

KRS 199.895 requires child-care center licensed under KRS 199.896 and a family child-care home certified under KRS 199.8982 shall have a written plan for evacuation in the event of fire, natural disaster, or other threatening situation that may pose a health or safety hazard to the children in the center or home.

The written plan shall include but not be limited to:

- (a) A designated relocation site and evacuation route;
- (b) Procedures for notifying parents of the relocation and ensuring family reunification;
- (c) Procedures to address the needs of individual children including children with special needs;
- (d) Instructions relating to the training of staff or the reassignment of staff duties, as appropriate;
- (e) Coordination with local emergency management officials; and
- (f) A program to ensure that appropriate staff are familiar with the plan's components.

A child-care center and family child-care home are statutorily required to update the evacuation plan by December 31 each year, retain an updated copy of the plan for evacuation, and provide an updated copy to appropriate local emergency management officials. In addition, a copy shall be provided to each parent, custodian, or guardian at the time of the child's enrollment and whenever the plan is updated.

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):

922 KAR 2:090 requires that a child care center shall maintain and document a written record of quarterly practiced earthquake drills, tornado drills, fire drills conducted during the hours of operation detailing the date, time, and children who participated with a written plan and diagram outlining the course of action in the event of a natural or manmade disaster, posted in a prominent place.

Child care facilities are required to notify the cabinet of any incident involving fire, natural disaster within 24 hours and if facility is damaged and requires temporary or permanent closure as soon as practicable.

Licensing surveyor's inspection of child care facilities include review of the written plan to ensure it describes, in detail, how children will be kept safe during a disaster, and ensure the plan includes specific information listed in KRS 199.895. If facility is found not to be in regulatory compliance, the cabinet completes a written statement of deficiency that requires a written plan of correction from the facility.

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

http://training.chfs.ky.gov/Child_Care_Preparedness/html/index.html

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 Describe how the Lead Agency or partners provide outreach and services to eligible families for whom English is not their first language:

CHFS ensures services delivered to families identified as being Limited English Proficient (LEP) with interpreters, availability of essential program forms and documents in other languages, and ability to apply for services online in other languages. CHFS employees receive training on cultural competency, effective communication, and the use of interpreters/translators, as well as the policy and procedures on access to LEP services at no cost and without unreasonable delay.

- 2.1.2 Describe how the Lead Agency or partners provide outreach and services to eligible families with a person(s) with a disability:

The Commonwealth of Kentucky provides, upon request, reasonable accommodations, including auxiliary aids and services necessary to afford an individual with a disability an equal opportunity to participate in all services, programs, and activities. To request materials in an alternative format, each agency's website provides information for contacting the person or persons responsible for providing the service within the agency. Persons with hearing and speech impairments can contact each agency by using the Kentucky Relay Service, a toll-free telecommunication device for the deaf (TDD). For voice to TDD, call 800- 648-6057. For TDD to voice, call 800-648-6056.

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:

Through an intra-agency agreement with Office of the Inspector General (OIG), Division of Regulated Child Care (DRCC) is responsible for conducting onsite visits of all Kentucky licensed child-care centers, certified family child-care homes, and registered providers to determine compliance with applicable licensing, certification, and registered provider regulations. Regional

office staff receive and investigate complaints concerning licensed centers, certified homes and registered providers. A complaint is directed to Division of Regulated Child Care (DRCC) Central Office or its Enforcement Branch located in four regions of the state or the Division of Child Care, which routes to DRCC. The complaint may be submitted in written form, by phone, or email from the parent or other concerned party regarding a licensed child-care center, family child-care home, or registered child care provider, including allegations of operating as an illegal childcare provider within the Commonwealth.

Web link: [Placing a Complaint](#)

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

DRCC Regional Enforcement Branch, upon receipt of a complaint or allegation, conducts an investigation within 30 days using methodology for prioritization of investigations.

The process for screening begins with the intake report information, name of center or provider, name of complainant, description of complaint situation, who the alledged perpetrator(s) are, how the child was affected, witnesses, names of staff or children involved, and what actions were taken by the provider.

Web link: [Placing a Complaint](#)

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

DRCC Regional Enforcement Branch, upon receipt of a complaint or allegation, conducts an investigation within 30 days using methodology for prioritization of investigations.

The process for screening begins with the intake report information, name of center or provider, name of complainant, description of complaint situation, who the alledged perpetrator(s) are, how was the child affected, witnesses, names of staff or children involved, and what action were taken by the provider.

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

DRCC maintains an electronic history of parental complaints within the Kentucky Integrated Child Care System (KICCS). Electronic records are maintained for a period of five years and paper copies for records older than five years are stored in historical archives and may be located through Kentucky Libraries and Archives. The KICCS system contains detailed history notes and results of every inspection report are available to the public through the consumer information portal.

All child care facility inspection reports, including those that were conducted to investigate parent complaints, are located at the public access portal at:

<https://benefind.ky.gov/KCCPS/ChildCare/ChildCareSearch>

- 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:

DRCC's inspection history contains information on the provider renewal inspection and results of any complaint investigations. The public can review the inspection history on all active providers by accessing the benefind public child care search portal link below.

<https://benefind.ky.gov/KCCPS/ChildCare/ChildCareSearch>

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. Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved are considered substantial changes and CCDF Plan Amendments will be required.

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

By interagency agreement, the Office of Administrative Technology Services maintains the Kentucky Integrated Child Care System (KICCS) and Public Child Care Provider Search through the Benefind system, which may be accessed at the following link:

<https://benefind.ky.gov/kccps>

This ensures information is accessible to families and the general public. Parents may search for child care by provider type, age group served, by either home or work county, Quality Rating level, and whether subsidy payments are accepted. The provider summary also includes hours of operation, ages served from infant to school-age, transportation services, and food service permit as well as complaint and inspection reports for parents to make informed decisions in choosing quality child care.

- 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)):

CHFS makes Language Access Services available to persons with Limited English Proficiency. Interpretation is provided free-of-charge to clients of the Cabinet. Language Access staff provide translation of written materials as well as interpreter services for direct communication.

The primary language offered is Spanish, but information is readily available in the top nine most common languages in Kentucky. In the event there is an interpretation need for a less common language, the Language Access staff will assist with identification of interpreters. DCBS and its contractual partners follow the CHFS Office of Human Resource Management's procedures for providing Language Access Services to client with LEP. Other languages common in Kentucky's population include Vietnamese, Somalian, and Russian.

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

DCBS staff in local county offices assist persons, either in the office or through home visits, in application for and selection of child care services. The Division of Developmental and Intellectual Disabilities (DDID) and the 14 Regional Community Mental Health/Intellectual Disability Centers (CMHCs) assist persons with disabilities and their families in locating resources and supports.

- 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:

[Information for Providers Web Landing page](#)

[Potential Child Care Provider Memo](#)

[License Application Instructions](#)

[Certification Application Instructions](#)

[Registered provider information](#)

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

[Standards of Practice Child Care Center Licensure](#)

[Standards of Practice Certified Family Child Care Homes](#)

- 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 5.4.6:

[922 KAR 2:280. Background checks for child care staff members, reporting requirements, and appeals](#)

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 should be searchable by ZIP Code.

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

<https://benefind.ky.gov/kccps>

- b) Which providers are included in the searchable list of child care providers:

- Licensed CCDF providers
- Licensed non-CCDF providers
- 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: **Certified Family Child Care Home Providers**

- c) Describe what information is available in the search results. Specify if the information is different for different types of providers:

Public Child Care Provider Search link: (<https://benefind.ky.gov/kccps>) is accessible to families and the general public. Parents may search for child care by provider type, age group served, by either home or work county, Quality Rating level, and whether subsidy payments are accepted. The provider summary also includes hours of operation, ages served from infant to school- age, transportation services, and food service permit as well as complaint and inspection reports for parents to make informed decisions in choosing quality child care.

- 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
 - Other. Describe:
- b) For what types of providers are quality ratings or other indicators of quality available?
- Licensed CCDF providers. Describe the quality information: **Kentucky All STARS Quality Rating level is identified as 1 to 5 stars, with 3 to 5 stars considered high quality**
 - Licensed non-CCDF providers. Describe the quality information: **Kentucky All STARS Quality Rating level is identified as 1 to 5 stars, with 3 to 5 stars considered high quality**
 - 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: **Certified Family Child-Care Home Providers with Kentucky All STARS Quality Rating level are identified as 1 to 5, with 3 to 5 stars considered high quality**

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.

Certify by describing:

- a) How monitoring and inspection reports are in plain language. Include a website link to a sample monitoring report, or if reports are not in plain language, describe how plain-language summaries are used to meet the regulatory requirements. Include a link to a sample report and summary.

The Kentucky Public Child Care Provider portal search (link <https://benefind.ky.gov/kccps>) is accessible to families and the public to review complete history of investigations and inspections, including the last date of inspection and all history of violations if applicable.

The inspection reports include health and safety requirements as specified in [922 KAR 2:120 Child-care health and safety standards](#).

An example of a monitoring report accessible to the public can be viewed at:

<https://benefind.ky.gov/KCCPS/ChildCare/GetInspectionReport>

- b) How monitoring and inspection reports and/or their plain-language summaries prominently display any health and safety violations, including any fatalities or serious injuries.

Monitoring and inspection reports, including any fatalities or serious injuries, are available to the public at <https://benefind.ky.gov/kccps>.

In accordance with 922 KAR 2:090, a child-care center shall post in a conspicuous place and make available for public inspection each statement of deficiency and civil penalty notice issued by CHFS during the current licensure year and each plan of correction submitted by the child-care center to CHFS during the current licensure year.

In accordance with 922 KAR 2:100, a certified provider shall make available to a parent upon request each statement of deficiency issued by CHFS during the current certification period and each plan of correction submitted by the certified family child-care home to CHFS during the current certification period.

- c) The process for correcting inaccuracies in reports. Provider may submit a written complaint stating the inaccuracies in the inspection or deficiency report within 30 calendar days after the date of the action.
- d) The process for providers to appeal the findings in the reports, including the time requirements.

A provider may request an administrative hearing regarding certification, licensure, or civil monetary penalty through the Office of Inspector General, Division of Regulated Child Care submitting a written complaint within thirty (30) calendar days after the date of the action.

- e) 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.

Timely is consider action completed within 30 working days from date of action imposed.

- f) How many years of reports that the state/territory posts on its website, if any, beyond the required minimum of 3 years, where available (98.33(a)(4)(iv)).

All system information and data on website will remain available indefinitely.

- g) The policy for removing reports after a certain amount of time has passed (e.g., after 7 years).

All system information and data on website will remain available indefinitely.

- 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. The information on serious injuries and deaths should be organized by category of care and licensing status, however, Lead Agencies are not required to breakdown the instances of substantiated child abuse by category of care and licensing status.

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.

Regulation requires provider to report accident or injury requiring medical care within 24 hours from time of incident to the DCBS-Division of Protection and Permanency, DCBS-Division of Child Care, and OIG-Division of Regulated Child Care.

The Child Protection Branch maintains records and prepares the Child Fatality/Near Fatality Annual Report available to inter-departmental agencies and the public.

- b) The definition of “substantiated child abuse” used by the Lead Agency for this requirement.

Substantiated child abuse is the admission of abuse or neglect by the person responsible; or judicial finding of child abuse or neglect; or a preponderance of evidence exists that abuse or neglect was committed.

- c) The definition of “serious injury” used by the Lead Agency for this requirement.

Any injury to a child that requires medical attention and care.

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

Web link: [CCDF Annual Report ACF 800 - Number of Children Fatalities](#)

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:

The lead agency contracts with the University of Kentucky for Child Care Aware Network of Services to provide assistance in referrals throughout the commonwealth.

Information can be accessed through this link:

<https://www.kentuckypartnership.org/Services/child-care-referral>

or by phone at (855) 306-8959

Additional information is provided on how to choose quality child care at <http://www.childcareaware.org/families/choosing-quality-child-care/5-steps-to-choosing-care/>

- 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:

Division of Child Care website landing page (<http://chfs.ky.gov/dcbs/dcc/>) includes links to provider search, Child Care Provider Requirements, state regulations and statutes, information on Head Start and Early Head Start, Child Care and Adult Care Food Program, Child Care Health, state and federal reports, and many others as listed in links below.

[Click on the Child Care Resource Center for valuable information for parents and providers.](#)

- [Public Child Care Provider Search](#)
- [Child Care Provider Requirements](#)
- [State Child Care Regulations/Statutes](#)
- [Child Care Aware](#)
- [Office of Child Care](#)
- [Kentucky Partnership for Early Childhood Services](#)
- [Child Care Aware of Kentucky](#) or call (877) 316-3552
- [Blue Grass Head Start](#)
- [Head Start and Early Head Start](#)
- [Child Care and Adult Care Food \(CACFP\) Program](#)
- [Child Care Health Consultation](#)
- [First Steps Program](#)
- [Special Supplemental Nutrition Program for Women, Infants and Children \(WIC\)](#)

Other Links

- [Kentucky Children's Health Insurance Program\(KCHIP\)](#)
- [Medicaid](#)

State & Federal Reports

- [CCDF ACF-696 Financial Report Qtr. Ending 6/30/17](#)
- [CCDF ACF-696 Financial Report Qtr. Ending 3/31/17](#)
- [CCDF ACF-696 instructions](#)
- [CCDF Annual Report ACF800 form](#)
- [CCDF ACF-800 instructions](#)

[Program Data for the Division of Child Care](#)

- 2.3.11 Provide the website link to the Lead Agency's consumer education website.

<https://benefind.ky.gov/kccps>

<http://chfs.ky.gov/dcbs/dcc/>

2.4 National Website and Hotline

The CCDBG Act of 2014 required the U.S. Department of Health and Human Services to establish a national website at ChildCare.gov, which includes a ZIP Code-based search of available child care providers, provider-specific information about the quality of care and health and safety compliance, referrals to local CCR&R organizations, and information about child care subsidy programs and other financial supports available to families (658L(b)). Lead Agencies must also provide a description of how they will respond to complaints submitted through the national website and hotline (98.16(hh)).

- 2.4.1 Describe how the Lead Agency responds to complaints submitted through the national website and hotline regarding both licensed and license-exempt child care providers.

Once the national website and hotline are established, any complaints received will be routed to DRCC for investigation as described in previous sections.

- 2.4.2 Identify the designee responsible for receiving and responding to complaints submitted through the national website and hotline.

Division of Regulated Child Care

2.5 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 2.5.1 through 2.5.4, certify by describing:

- 2.5.1 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.

Information and the availability of child care services are provided through various methods, including written materials such as brochures, CHFS and DCC websites, quarterly newsletter, provider and public listserv to disseminate important information related to child care services, and through direct communications, such as public forums and direct contact by Kentucky Child Care Aware Coaches through mentoring and coaching. Information about child care assistance is also posted in every local DCBS office in all 120 counties. Each applicant for any type of public

assistance is screened for other types of assistance for which they may qualify, including child care assistance/subsidy.

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

The Early Head Start-Child Care Partnership (EHS-CCP) initiative brings together the best of Early Head Start and child care through layering of funding to provide comprehensive and continuous services to low-income infants, toddlers, and their families. EHS-CCP enhances developmental services and supports for low-income infants and toddlers and their families by providing strong relationship-based experiences and preparing them for the transition into Head Start and preschool.

Partnership for Early Childhood Services at the University of Kentucky provides research, professional learning, and development supporting high quality research, professional learning and development activities focused on young children, their families, and those who serve them.

DCBS also partners with various human services agencies and advocacy groups on the local level to disseminate information about the availability of child care services to families.

- 2.5.3 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: <https://benefind.ky.gov/>
Information is provided at application for assistance for child care
- Head Start and Early Head Start programs:
<https://education.ky.gov/curriculum/conpro/prim-pre/Pages/Head-Start-Full-Utilization.aspx>
Information is provided at application for assistance for child care and Department of Education website.
- Low Income Home Energy Assistance Program (LIHEAP):
<http://chfs.ky.gov/dcbs/dfs/LIHEAP.htm>
Information is provided at application for assistance for child care and Department for Community Based Services web site.
- Supplemental Nutrition Assistance Programs (SNAP)Program: <https://benefind.ky.gov/>
Information is provided at application for assistance for child care and Benefind web site.
- Women, Infants, and Children Program (WIC)program:
<http://www.chfs.ky.gov/dph/mch/Applying+For+WIC.htm>
<http://chfs.ky.gov/dcbs/dcc/>

Information is provided at application for assistance for child care and Department for Public Health and Division of Child Care web site.

- Child and Adult Care Food Program(CACFP):
<https://education.ky.gov/federal/SCN/Pages/CACFPHomepage.aspx>
Information is provided with provider license and certification application and Kentucky Department of Education website.
- Medicaid and Children’s Health Insurance Program (CHIP): <https://benefind.ky.gov/>
Information is provided at application for assistance for child care and Benefind web site.
- Programs carried out under Section 619 and Part C of the Individuals with Disabilities Education Act (IDEA):
<http://chfs.ky.gov/dph/firstSteps/>
<http://chfs.ky.gov/dcbs/dcc/>
Information is provided at application for assistance for child care and Department for Public Health and Division of Child Care web site.

2.5.4 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.

State-level partners include the Governor's Office of Early Childhood, the University of Kentucky Human Development Institute, Eastern Kentucky University, Family Resource and Youth Service Centers, Department for Behavioral Health, Developmental, and Intellectual Disabilities, Department for Public Health, Strengthening Families Kentucky (multidisciplinary group), Kentucky Department of Education, Head Start, Kentucky Partnership for Families and Children, Inc., and numerous independent trainers. National partners include entities such as Zero to Three and Strengthening Families.

Providers and families can be connected to these resources through the website, coaching, or various other methods. The DCBS-Division of Child Care partners with the Governor's Office of Early Childhood and the Division of Regulated Child Care to provide parents, providers, and the general public access to web-based information and electronic newsletters. Parents have access to electronic resources, including newsletters, parent guides, and additional print ready materials with tips and information regarding child development. The DCBS-Division of Child Care partners with the University of Kentucky Human Development Institute to administer the statewide Child Care Aware Resource and Referral Network of Services, which provides technical assistance regarding health and safety and quality child care. The network includes content coordinators who maintain expertise in current best practice in order to equip technical assistance coaches with the resources necessary to encourage providers to share information with parents of the children they serve. Additional partners include Family Resource Youth Services Centers (school based), the Department for Public Health Maternal and Child Health (HANDS Home Visitation and Early Childhood Mental Health), the Department for Behavioral

Health, Developmental and Intellectual Disabilities (Community Mental Health Centers, Early Childhood Mental Health), First Steps (field staff), Head Start, Kentucky Partnership for Families and Children Inc., and independent trainers.

- 2.5.5 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 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.

Kentucky Strengthening Families (KYSF) represents a multi-disciplinary partnership of over 20 national, state and local, and public and private organizations dedicated to embedding six research-based Protective Factors into services and supports for children and their families.

Supporting families is a key strategy to promote school readiness and prevent child abuse and neglect. All families experience times of stress. Research demonstrates that children grow and learn best in families with the supports and skills to deal with those times. By supporting families and building their skills to cope with stressors, we can increase school readiness and reduce the likelihood abuse will occur in families. Kentucky Strengthening Families is part of the nationally recognized Strengthening Families: A Protective Factors Framework initiative coordinated nationally by the Center for the Study of Social Policy.

The DCBS-Division of Child Care partners with the Governor's Office of Early Childhood and the Division of Regulated Child Care to provide parents, providers, and the general public access to web-based information and electronic newsletters. Parents have access to electronic resources, including newsletters, parent guides, and additional print ready materials with tips and information regarding child development. The DCBS-Division of Child Care partners with the University of Kentucky Human Development Institute to administer the statewide Child Care Aware Resource and Referral Network of Services, which provides technical assistance regarding health and safety and quality child care. The network includes content coordinators who maintain expertise in current best practice in order to equip technical assistance coaches with the resources necessary to encourage providers to share information with parents of the children they serve. Additional partners include Family Resource Youth Services Centers (school based), the Department for Public Health Maternal and Child Health (HANDS Home Visitation and Early Childhood Mental Health), the Department for Behavioral Health, Developmental and Intellectual Disabilities (Community Mental Health Centers, Early Childhood Mental Health), First Steps (field staff), Head Start, Kentucky Partnership for Families and Children Inc., and independent trainers.

- 2.5.6 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.

Kentucky Child Care Aware Coaches provide technical assistance to prevent and address discipline issues in child care programs and recommend best practices to develop policies that

support children’s social-emotional and behavioral health to prevent suspension and expulsion from early childhood programs.

2.6 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 Section 619 and Part C of the Individuals with Disabilities Education Act (IDEA),, 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)).

2.6.1 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)).

Kentucky All STARS 5-tiered quality rating system is a hybrid system, including standards under four domains. The Classroom and Instructional Quality Domain includes completing a developmental screening within 90 days of enrollment and making a referral if needed. The system is intended to allow parents the ability to compare quality across all early care and education programs, including child care, public preschool, and Head Start. The lead agency works in close partnership with the Kentucky Child Care Aware coaches to ensure providers have access to resources for conducting developmental screenings, as well as relevant professional development opportunities.

- 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.).

The Kentucky Division of Child Care promotes the referral of children to First Steps Early Intervention System that serves children from birth to age three who may have a developmental delay or a particular medical condition that is known to cause a developmental delay. First Steps services are provided statewide and coordinated by the Kentucky Department for Public Health. The First Steps program provides a variety of services and supports including service coordination, evaluation, assessment,

developmental intervention, occupational therapy, speech therapy, physical therapy, audiology services, vision services, and nutrition counseling. Once determined eligible through comprehensive screening and assessment, families must pay a participation fee based on the family's total household income and household size. No family is denied services due to the lack of insurance or inability to pay.

- 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.

Child Care providers may make referrals to Early Childhood Mental Health (ECMH) consultation services through the Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities and the Department for Public Health within the Cabinet for Health and Family Services. The ECMH Program provides program and child-level consultation on social, emotional, and behavioral issues that serve children birth through age five and their families including evaluation, assessment, and therapeutic services.

- 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 and child care providers have access to multiple agencies and/or programs within CHFS for screening and assessment. These programs include First Steps Early Intervention System, the Early Childhood Mental Health Program, and the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program. Each of these programs accepts referrals from child care providers and/or individuals who may have a developmental and/or cognitive delay.

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

The Kentucky Child Care Aware Network of Services staff provide access to available trainings on screening and assessment at little to no cost to providers.

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

Kentucky All STARS 5-Tiered Quality Rating System will be filed as emergency regulations on April 15, 2018 that outlines screening and assessment.

2.7 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.

2.7.1 Certify by describing:

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

For parent referral services, parents choosing child care have access to provider information from generated informational forms on choosing quality child care given to them at application which includes electronic links to a provider portal:

Benefind Provider Portal at: <https://benefind.ky.gov/kccps/>

Kentucky Partnership-Child Care Aware of Kentucky

<https://www.kentuckypartnership.org/Services/child-care-referral>

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

At application, parents receive forms DCC-112 and DCC-113 for facts about the Child Care Assistance Program, looking for quality child care, and brochures on finding child care.

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

Consumer statement includes how to access and obtain child care, eligibility requirements, reporting changes, income eligibility, what is considered quality child care, and how quality child care promotes school readiness and social-emotional development.

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, 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) to 12 years (through age 12). *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 ages 13 and older but below age 19 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 or mental incapacity: **Means a child who has multiple or severe functional needs requiring ongoing specialized care.**

c) Does the Lead Agency allow CCDF-funded child care for children ages 13 and older but below age 19 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”: **Means eligible children who are living with a parent or parents (by blood, marriage or adoption), including a legal guardian or other person with standing in loco parentis, or a caretaker/relative considered to be "residing with" a family.**

“in loco parentis”: **means a caretaker/relative, a person acting in place of a parent, including a legal guardian, an individual related by blood, marriage, or adoption of a child or non-relative, if the non-relative is pursuing legal custody within one year of application**

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”:

- **Employment means public or private, permanent or temporary work that is performed for a wage, is self-employment, or is unpaid such as student teaching, an internship, or**

practicum, public or self-employment, permanent or temporary work. A combination of employment activities can be used to meet the required number of hours.

- For single-parent families, the requirement is a combined average of 20 hours per week.
- For two-parent families, the requirement is a combined average of 40 hours per week unless one adult is mentally or physically unable to provide care for the children. In those instances, the requirement is an average of 20 hours per week for the adult able to work. The minimum work requirement for one adult in a two-parent family is an average of five hours per week.
- If a two-parent household requests child care assistance and one parent is not working due to being incapacitated, that parent must have a doctor's statement indicating they are unable to care for the child.
- Recipients of Kentucky Transitional Assistance Program (K-TAP), who need child care while they participate in the Kentucky Works Program to meet TANF participation requirements, must be actively involved with activities including employment, education, job preparation activities, job search, or other activities designed to assist the family to attain self-sufficiency.
- Low-income working families, who have suffered loss of employment or a reduction in hours due to no fault of their own, may receive child care services for a subsequent job search to secure new employment for a period not to exceed ninety days.

“Job training”:

Recipients of K-TAP, who need child care while they participate in the Kentucky Works Program to meet TANF participating requirements, must be actively involved with activities, job search, or other activities designed to assist the family to attain self-sufficiency.

“Education”:

Low-income working families may receive child care services while they attend education activities. These families must meet work requirements outlined in previous section. Proof of enrollment from the school or institution is required prior to authorizing child care to cover time spent in educational activities. The DCC-90L, Student Enrollment and Unpaid Work Verification form, is used to obtain enrollment information from the school. Other acceptable verification of enrollment includes a class schedule or a written statement from a school official.

“Attending job training or education” (e.g. number of hours, travel time): n/a

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:

Yes. If yes, define the job-search time limit, keeping in mind a minimum of 3 months is required to be provided when a parent experiences a non-temporary loss or cessation of eligible activity:

Work Requirements for Low Income Working Families - Unpaid work, such as a practicum, clinical, internship, student teaching, and job training related to Unemployment Insurance Benefits (UIB), can be used to meet part or all of the work requirement and must be entered on Benefind in order for technical requirements to be met. The DCC-10,2 We Need Information for CCAP (RFI), will be issued upon application with the DCC-90L, Student Enrollment and Unpaid Work Verification, to be completed and returned within 30 days. The unpaid work must be a requirement to obtain their degree or receive unemployment benefits.

c) Does the Lead Agency consider engaging in a job search or seeking employment an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination (must provide a minimum of 3 months)?

No.

Yes. If yes, describe the policy or procedure.

Work Requirements for Low Income Working Families – Households of One and Two parents may gain initial CCAP eligibility to Job Search for up to three calendar months from the date of application in a twelve-month period without meeting the CCAP work requirement. Households must agree to Work Register to qualify for Job Search.

An unemployed adult, after work registration, must participate in an initial job search activity for up to three calendar months in order to receive child care assistance. The client uses the DCC-90P, CCAP Job Search Documentation form, to capture information. A client MUST have a minimum of 10 contacts to constitute a complete form.

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”: Means an open and active case in which a child protective case file contains appropriate documentation that substantiates child abuse, neglect, dependency or exploitation. This category may include child care services to prevent abuse, neglect, or dependency with appropriate supervisory approval. “Dependency” means the quality of being dependent as defined per KRS 600.020(19): “Dependent child” means any child, other than an abused or neglected child, who is under improper care, custody, control, or guardianship that is not due to an intentional act of the parent, guardian, or person exercising custodial control or supervision of the child.

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

- a) How does the Lead Agency define “income” for the purposes of eligibility at the point of determination? **The money received from statutory benefits, wages, self-employment, rental property, investments, business operations, etc.**
- b) Provide the CCDF income eligibility limits in the table below. 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).
- 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**

	(a)	(b)	(c)	(d)
Family Size	100% of SMI (\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum “Entry” Income Level 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	0	0	0	0

	(a)	(b)	(c)	(d)
Family Size	100% of SMI (\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum "Entry" Income Level 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
2	\$5,052	\$4,294	\$2,165	43
3	\$5,656	\$4,808	\$2,723	48
4	\$7,144	\$6,072	\$3,280	46
5	\$7,967	\$6,772	\$3,837	48

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
https://www.justice.gov/ust/eo/bapcpa/20170501/bci_data/median_income_table.htm
- e) What was the date that these eligibility limits in column (c) became effective? **April 1 2017**
- f) Provide the citation or link, if available, for the income eligibility limits.
<http://chfs.ky.gov/NR/rdonlyres/92641CA3-7745-47FB-8A17-AA6553A4D87B/0/ChildCareAssistanceProgramBrochure.pdf>

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). **The Lead Agency requires families to certify that the family assets do not exceed \$1,000,000 by requiring response to this question during the application process, which may include verification of assets for other public assistance programs.**
- 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, please identify the policy or procedure:

The Lead Agency does not required verification of assets for protection and prevention cases.

3.1.5 Describe any additional eligibility conditions or priority rules applied by the Lead Agency during eligibility determination or redetermination (98.20(b)). The family applying for low income subsidized child care services must have monthly gross countable income which is less than or

equal to the Child Care Income Limits. Families who have been approved for child care services remain income eligible as long as their countable monthly gross income is at or below 85% of the State Median Income. At recertification families who have been approved for child care services remain income eligible as long as their monthly countable gross income is less than or equal to the Child Care Income Limits.

CHFS limits any requirements for reporting changes in income unless the change would make a positive change in the case or that the income is above 85% of the SMI. Families that report a change and their income exceeds the income limits, but do not exceed 85% of the SMI, will remain eligible until recertification.

- 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)). Examples include collaborating with Head Start, prekindergarten, or other high-quality programs to create a package of arrangements that accommodates parent’s work schedules; providing more intensive case management for families with children with multiple risk factors; and including in the eligibility determination process a question about whether a child has an Individualized Education Program or Individual Family Service Plan. Describe the Lead Agency’s policies and procedures that take into consideration children’s development and learning and that promote continuity of care when authorizing child care services.

Licensed child-care centers and certified family child-care homes are required to report ages of children they are able to serve. Efforts are made to ensure that children are placed in settings that will serve all children in the family and will not require children to change placements as they age. Efforts are made to ensure full-day coverage of services for children that includes before- and after-school as needed. Regional needs assessments are conducted to look at child care partnerships and identify barriers to high quality services that meet the developmental needs of all children as well as family needs, including type and hours of care.

- 3.1.7 Graduated phase-out of assistance.

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.

Lead Agencies that establish initial family income eligibility below 85 percent of SMI must provide a graduated phase-out by implementing a two-tiered eligibility threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

- 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)).

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 level at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
 - The Lead Agency sets the second eligibility threshold at 85 percent of SMI.
 - Describe the policies and procedures.
Provide the citation for this policy or procedure.
 - The Lead Agency sets the second eligibility threshold 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 eligibility level for a family of three.
The Lead Agency set the second eligibility level monthly income for household size of three at \$2,808.
 - Describe how the second eligibility threshold:
 - i. Takes into account the typical household budget of a low-income family:
The Lead Agency determines income eligibility based only on monthly gross wages from earned, contract, or self-employment.
 - 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:

The Lead Agency adjusts the income eligibility threshold at 160 percent of the federal poverty level at initial application and at 165 percent of federal poverty level for recertification/recalculation as adjusted annually by the U.S. Department of Health and Human Services for the initial application as funds are appropriated.

- iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption:

The Lead Agency allows for continued child care services without unnecessary disruption if the change is the result of temporary increase or decrease in income.

- iv. Provide the citation for this policy or procedure: **922 KAR 2:160**

- b) 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.
- 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)).

Describe the Lead Agency's policy related to the fluctuation in earnings requirement, including 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.

The benefit Worker Portal income screens and calculations prevent temporary fluctuations in income resulting in loss of eligibility and/or increased copayments. When entering income, such as wages, the worker may enter, but exclude wages that are not representative of ongoing income. The non-excluded wages are averaged to determine initial and ongoing eligibility as well as family copay. Seasonal and irregular income is averaged and only counted for the period the income is intended. Worker Portal assesses the family copay at initial application for the application month and the next month ongoing. Once the family copay is established at initial

application or redetermination, the family copay will not increase during the 12 month eligibility period; however, the copay will decrease if the household reports a change of loss or decrease of 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: **Driver's license, Student I.D., Military I.D., or two other forms of verification**
- Applicant's relationship to the child. Describe: **Birth Index, Birth Records**
- Child's information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe: **Birth Index, Birth Records, School Records**
- Work. Describe: **Work Verification System, PAFS-700 Verification of Employment and Wages check stubs, Federal tax forms**
- Job training or educational program. Describe: **DCC-90L Student Work Verification Form**
- Family income. Describe: **Work Verification System, PAFS -700 Verification of Employment and Wages, check stubs, Federal tax forms.**
- Household composition. Describe: **PAFS-21 Household Information Request or similar statement from someone who knows the family**
- Applicant residence. Describe: **PAFS-21 Household Information Request or similar statement from someone who know the family.**
- 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 (30) days**
- Track and monitor the eligibility determination process
- Other. Describe
- 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: **DCBS - Division of Family Support**

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

“Appropriate child care”: **Means an eligible child care provider as defined in 45 C.F.R. part 98.2**

“Reasonable distance”: **Means the distance customarily available within a locality**

“Unsuitability of informal child care”: **Means care, not regulated under Kentucky law, which does not meet the quality child care needs as defined by the parent or the health and safety requirements applicable to regulated child care in the Commonwealth**

“Affordable child care arrangements”: **Means appropriate child care, at a reasonable distance, which is suitable and charges at or below the maximum provider payment rate under the CCDF Plan.**

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: A TANF recipient receives information from a DCBS worker regarding the exception to the individual penalties associated with work requirements for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under six years of age. Eligibility for TANF recipient is determined by the DCBS Family Support focused staff.

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

<http://www.lrc.ky.gov/kar/921/002/370.htm> **Section 6.**

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 will prioritize or target child care services for the following children and families.

a) How does the Lead Agency define “children with special needs” and include a description of how services are prioritized: **A children with special needs is defined as a child who has multiple or severe functional needs requiring ongoing specialized care with priority given over other CCDF families.**

b) How does the Lead Agency define of “families with very low incomes” and include a description of how services are prioritized:

A family whose income does not exceed 100% of the Federal Poverty Level Families receive priority over other eligible CCDF families.

c) Describe how services are prioritized for children experiencing homelessness, as defined by the CCDF: **Homeless households during an initial application are unique from other eligibility types as the household is entitled to up to three calendar months from the date of application to return verification. This allows the household to return all required documentation gradually, if needed. Homeless cases are approved and enrollment starts when the head of household provides ID. (If a driver’s license is provided, it does not matter if it is expired.) Households that return all required information and are technically and financially eligible at the end of the three calendar month period, will not see a change in the certification period at approval of application. Homeless households must meet all other technical and financial eligibility criteria in order to continue with the program.**

Homeless households can qualify to gain initial eligibility via Job Search if the client does not meet the work requirement and wants to use the once in 12 months Job Search at the time of application. The client must work register and complete the DCC-90P, CCAP Job Search Documentation form, with a minimum of 10 contacts to constitute a complete form.

d) Describe 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)):

TANF families are given priority after special needs children and a priority over families with low incomes. Reference 922 KAR 2:160 Section 12(8)
<http://www.lrc.ky.gov/kar/922/002/160.htm>

3.2.2 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. **Homeless household are eligible for expedited services. They are entitled to immediate approval of cases and pend for lack of verification. During eligibility, homeless hosueholds have a three calendar month period to return all verifications. Households that return all required information at the end of the three calendar month period, will not see a change in their certification as the maximum allowable certification period as assigned based on program rules. Homeless must meet all other technical eligibility criteria in order to continue with the program. If information has not been provided within the three calendar month timeframe, the application will be discontinued.**
- b) Describe the procedures to conduct outreach for children experiencing homelessness (as defined by the CCDF) and their families. **Information regarding the Lead Agency's child care assistance program is provided to entities serving families experiencing homelessness across the state. Regional leads are familiar with resources for families experiencing homelessness and can connect them to supportive services when needed. Through the Child Care Resource and Referral Network of Services, coordinators participate in regular meetings to promote outreach to families experiencing homelessness, such as through the Central Kentucky Housing and Homeless Initiative.**

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)).

3.2.3 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)(l)(i)(l); 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 CCDF). **During eligibility, homeless have a three calendar month period to return all verifications. Households that return all required information at the end of the three calendar month period will not see a change in their**

certification period as the maximum allowable certification period as assigned based on program rules.

Provide the citation for this policy and procedure. [922 KAR 2:160 Section 2\(4\)\(c\)](#)

Children who are in foster care.

Foster care children are not eligible for CCAP subsidies. However, children approved through the DCC-85, P&P Approval for Child Care, as preventive or protective care are eligible for CCAP subsidies. Provide the citation for this policy and procedure. [922 KAR 2:160. Child Care Assistance Program. Section 5](#)

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)). **During eligibility, homeless households are placed in their applicable eligibility, but have a three-calendar month period to return all verifications.**

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

No.

Yes. Describe:

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; any changes in age, including turning 13 years old during the 12-month eligibility period; 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. **If an application is approved for benefits, the certification is valid for 12 months. A family experiencing a temporary change in activity is given a 90-day grace period.**
- b) How does the Lead Agency define “temporary change?” **A “temporary change” includes an absence from employment due to maternity leave or extended medical leave, changes in seasonal work schedule, or if a parent enrolled in training or education program is temporarily not attending class between semesters.**
- c) Provide the citation for this policy and/or procedure. **922 KAR 2:160, Section 4**

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:
 - iii. Provide a summary describing the Lead Agency’s policies and procedures for discontinuing assistance due to a parent’s non-temporary change:
Eligibility staff has 30 calendar days from the date of application to determine eligibility and approve for 12 months. If there were a reported change that

would discontinue the case, a grace period of three months would apply up to the last day of certification period, whichever comes first.

- iv. Describe what specific actions/changes trigger the job-search period.
Income change, job loss, or child age 12 turns age 13
- v. How long is the job-search period (must be at least 3 months)?
After initial eligibility, if a household member reports a job loss, the household member has three months period for job search. The system allows “up to” three months or the last day of the certification period, whichever comes first.
Provide the citation for this policy or procedure. 922 KAR 2:160

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:
 - ii. Provide the citation for this policy or procedure:

A change in residency outside of the state, territory, or tribal service area. Provide the citation for this policy or procedure: 922 KAR 2:160 Section 2(4)

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.

- 1) Misrepresentation of information by making a false statement either orally or in writing to obtain or attempt to obtain services for which they are not eligible.
- 2) Concealment of information to obtain services to which they are not eligible.
- 3) Deliberately withheld information needed to accurately determine eligibility.
- 4) Deliberate failure to report a change timely in order to continue to receive services to which they are not entitled.
- 5) Falsification or alteration of documents to obtain services to which they are entitled.

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:

- 1) Change in an employer;
- 2) Increase or decrease in the number of work hours;
- 3) Increase or decrease in the rate of pay;
- 4) Increase or decrease in recipient members;
- 5) Change in self-employment activities;
- 6) Change in the scheduled hours of care is needed;
- 7) Beginning or ending of an educational activity;
- 8) Change in marital status;
- 9) Beginning or ending of receipt of any type of unearned income; and
- 10) Increase or decrease in any type of unearned income.

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

- 1) Change in address or residence; and
- 2) Unreported change in phone/cell number.

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

Criteria for nonpayment to provider according to 922 KAR 2:160 include:

- Death of child or applicant;
- The family or provider defaults on a payment of claim as outlined in 922 KAR 2:020;
- Family no longer meets the technical or financial eligibility requirements; and

- Provider denies access to child in care to parent of a child in care, CHFS, CHFs' designee, or a representative of an agency with regulatory authority :

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

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.

A temporary change will adversely affect a case after initial or recert approval, if the client is not compliant with work requirements by the end of the three month grace period.

- ii. Provide the citation for this policy or procedure.

<http://www.lrc.ky.gov/kar/TITLE922.HTM>

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 in families 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 that information 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.

- a) Describe 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. List relevant policy citations.

Section 6: <http://www.lrc.ky.gov/kar/922/002/160E.htm>

- b) How are families allowed to submit documentation for redetermination? Check all that apply.

- Mail
- Email
- Online forms
- Fax
- In-person
- 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 3.1.4 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 "Entry" 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 "Entry" 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	0	0	0	0	0	0
2	900.00	40.00	.044	3,699.99	252.00	6.8
3	900.00	40.00	.044	3,699.99	294.00	7.9
4	900.00	40.00	.044	3,699.99	336.00	9.1
5	900.00	40.00	.044	3,699.99	525.00	14.2

- b) What is the effective date of the sliding-fee scale(s)? 07/01/2010
- c) Provide the link to the sliding-fee scale: <http://www.lrc.ky.gov/kar/922/002/160.htm>
- d) If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).

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 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. The poverty level used by the Lead Agency for a family size of 3 is \$.
- 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.

Department for Community Based Services, Division of Protection and Permanency are authorized to waive co-payments for protective and preventive cases and indicate wavier on the DCC-85, Approval for Child Care form. Section 5 of [922 KAR 2:160](#) .
- 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.

3.4.5 Does the Lead Agency 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:
 - a) 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? **When the provider's customary rate exceeds the Kentucky Child Care Maximum Payment Rate, families are responsible for the difference plus their co-pay. A provider cannot charge participants in the CCAP a higher rate for child care than is being charged to the public.**

- b) Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.
Provider Child Care fee/rate information is collected on the DCC-94A and DCC-94B, Licensed, Certified and Registered Provider Information Form. Rate information is entered and maintained in the Kentucky Integrated Child Care System. This information is used to determine the amount charged does not exceed the amount charged to parents of children not receiving CCAP. (Data are pending at the time of this preliminary plan.)
- c) 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.
Without additional budget increases to allow for higher reimbursement of subsidy payments, elimination of additional fees does not appear possible.

3.4.6 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? Check all that apply.

- Limit the maximum co-payment per family. Describe:
The maximum copayment for an eligible family with more than five members shall be \$25.00.
- 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 describe. **Family co-payments are structured so that a family whose income is below 150% of the Federal Poverty Level pays no more than 10% if its gross monthly income for child care**
- 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 3.1.5. Describe:
- Other. Describe:

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.

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 certificate is issued after a provider is selected. To enroll a child with a provider, the DCC-94 Child Care Service Agreement and Certificate, must be signed and dated by the client and the provider. If the client choses a new provider, the DCC-94 is again sent to the client and the provider for signatures. The DCC-94 includes family information, child name, date of birth, care level, notes regarding special needs or need non-tradtional hours for care, start and end date of enffolment, scheduled days of care, daily rate amount for full or part day, amount of daily co-pay, and the rights and responsiblites of parent and provder.

- 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: Information is also available through the Division of Child Care website: <http://chfs.ky.gov/dcbs/dcc/>

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. 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:

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 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

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)).

Parental rights are outlined in KRS 199.898 and include the rights of parents to access their children at all times that the children are in care. The parental rights are distributed to parents and providers when a child care certificate and agreement is issued.

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: **In accordance with 922 KAR 2:180, any person making application to provide care in the child's own home must show proof of photo identification or birth certificate that the individual is a least eighteen years of age.**
 - Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours). Describe:
 - Restricted to care by relatives. Describe:
 - 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: **922 KAR 2:180 section 2 requires in-home providers shall provide verification has obtained six hours of training approved by the cabinet in the areas of:**
 - 1. Health, safety, and sanitation;**
 - 2. Recognition of child abuse and neglect, which may include cabinet-approved pediatric abusive head trauma training in accordance with KRS 199.896(16); and**
 - 3. Developmentally appropriate child care practice.**
 - Other. Describe:

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 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 other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities and (2) organizations representing caregivers, teachers, and directors prior to developing and conducting the MRS or alternative methodology.

Describe how the Lead Agency consulted with the:

- a) State Advisory Council or other state-designated cross-agency body:
- b) Local child care program administrators:

- c) Local child care resource and referral agencies:
- d) Organizations representing caregivers, teachers, and directors:
- e) Other. Describe: The Market Rate Survey is developed in collaboration with the Division of Child Care, University of Kentucky Human Development Institute, and Child Care Aware of Kentucky. The Child Care Advisory Council was recently convened for the first time, with statutory responsibility to consult on issues related to child care funding. This market rate survey was already underway prior to their initial convening. However, they will be consulted regarding the results, and will be involved prior to any future market rate surveys.

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 2017 Kentucky Child Care Market Rate Survey (MRS) sampled three types of child care facilities: Licensed Type I, Licensed Type II, and Certified Family Child-Care Homes.

The Kentucky Division of Child Care (DCC) provided contact information for child care providers. Information included provider name, address, county, telephone number, e-mail address, provider identification number, provider type (licensed Type I, Type II, and Certified Family Home), owner's name, address, telephone number, and e-mail address. The Early Care and Education Training Records Information System (ECE-TRIS), the professional development registry for early care and education professionals in Kentucky, was used to supplement email addresses. When the director email was absent from the DCC list, the email from ECE-TRIS was used.

Data Collection & Quality Assurance Procedures

The survey involved the use of three data collection formats: web-based, paper-based (mail-in), and telephone interviewing.

Web-Based Survey

The web-based survey was replicated from the 2015 Kentucky MRS and included the following changes:

- Identification of number of children the program stopped caring for (removed);
- Identification of number of children the program started caring for (removed);
- Identification of additional services provided on-site or through referrals (removed); and
- Identification of cost categories and their percentile distribution.

As the result, the updated version of the web-based survey included the following sections: 1) facility information; 2) hours of operation; 3) facility enrollment; 4) child care prices; 5) services; 6) child and family information; and 7) projection of costs.

The survey was administered through a web-based software platform Qualtrics®. A multiple-contact approach was used to increase the response rate. In October 2017, using the list of child care facilities and homes, an email containing background information about the survey and a direct survey link was sent to those whose e-mail addresses were available (Group I; Table 1) by the Regional Child Care Administrator. If the e-mail was returned due to an invalid e-mail address, secondary e-mail addresses (where available) were used to contact the provider. In November 2017, providers who had not completed the survey were sent a reminder e-mail from a regional Child Care Aware coach asking them to complete the survey. Two weeks later, coaches sent a second reminder to providers who had not completed their survey, this time using an anonymous link. Regional coaches were selected for the reminder since they generally work closely with providers on licensing and quality processes.

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:

The survey examines daily price. Data were collected and analyzed separately for each age group, facility type, category of care (full- and part-time care), region, and geographical area designation to reflect current market differences.

The geographic distribution of the responses was also examined by calculating region-wide (East, Central, and West) and geographical area-wide (Urban and Rural) response rates for each provider type and among all providers. The overall geographical distribution of survey participants. Regionally, the response rate was higher in the East and West (63% each). Licensed Type II facilities had a 94% statewide response rate

b) Type of provider. Describe:

Licensed Type I Child-Care Center Licensed child care provider or home that offers child care services for four or more children in a non-residential setting, or thirteen (13) or more in a residential setting as designated in 922 KAR 2:090.

Licensed Type II Child-Care Center Licensed child care provider or home that provides child care for at least seven , but no more than 12 children including related children as designated in 922 KAR 2:090.

Certified Family Child-Care Home Certified child care home that serves no more than six unrelated children at any one time, or four related children in addition to six unrelated children for a maximum of 10 hours at any one time as designated in 922 KAR 2:100.

c) Age of child. Describe:

Defined ages for MRS:

Infant - 0 - 12 months

Toddler - 1-2 years of age

Preschool Child - 3-4 years of age

School Age Child 5 years and older

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

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. The Lead Agency must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Lead Agency website. The Lead Agency must describe in the detailed report how the Lead Agency took into consideration the views and comments of the public.

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)).

www.kentuckypartnership.org/mrs

- 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). **3/30/2018**
- b) Date the report containing results was made widely available—no later than 30 days after the completion of the report. **April 1, 2018**
- c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted.

Posting to Division of Child Care website <http://chfs.ky.gov/dcbs/dcc/>

Posting to Kentucky Partnership website
<http://www.kentuckypartnership.org/products/mrs>

- d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report. **The survey conducted with an analysis report through a contract with the University of Kentucky Human Development Institute. No public comments were solicited during the survey and final summary of survey results posted on Division of Child Care website for public view.**

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. If the Lead Agency conducted an MRS (only or in combination with an alternative methodology), also report the percentiles based on the most recent MRS. 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).

- a) Infant (6 months), full-time licensed center care in the most populous geographic region
Rate \$24 per day unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 29th
- b) Infant (6 months), full-time licensed FCC home in the most populous geographic region
Rate \$21 per day unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 37th
- c) Toddler (18 months), full-time licensed center care in the most populous geographic region
Rate \$24 per day unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 35th
- d) Toddler (18 months), full-time licensed FCC care in the most populous geographic region
Rate \$21 per day unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 47th
- e) Preschooler (4 years), full-time licensed center care in the most populous geographic region
Rate \$21 per day unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 30th
- f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region
Rate \$19 per day unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 39th
- g) School-age child (6 years), full-time licensed center care in most populous geographic region
Rate \$20 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile of most recent MRS: 51st
- h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region
Rate \$18 per day unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 46th
- i) Describe how part-time and full-time care were defined and calculated. **Full-day means child care is provided for five or more hours per day.**

- j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). **February 2016**
- k) Provide the citation or link, if available, to the payment rates.
<http://chfs.ky.gov/NR/ronlyres/OEDE7710-AFOF-450D-B946-D0079E51646A/0/DCC300KentuckyChildCareMaximunPaymentRateChart.pdf>
- l) 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: **Licensed or certified providers may also receive an additional one dollar per day to provide child care during non-traditional hours**

Differential rate for *children with special needs*, as defined by the state/territory. Describe: **Licensed, certified, or registered child care providers may receive an additional one dollar per day to serve a child with special needs.**

Differential rate for *infants and toddlers*. Describe: **Rates differ for infants and toddlers accordance with the Market Rate Survey based on region.**

Differential rate for *school-age programs*. Describe: **Rates differ for school-age programs in accordance with the Market Rate Survey based on region.**

Differential rate for *higher quality*, as defined by the state/territory. Describe:

Other differential rates or tiered rates. Describe: **Licensed or certified providers who are accredited by a national organization will receive an additional two dollars per day above the maximum rate of pay.**

DCBS has deliberately established the Kentucky All STARS Tiered Quality Rating and Improvement to incentivize high quality licensed and certified child care providers to serve CCAP-enrolled children.

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 pursuant to 98.30(e)(1) is made available; the extent to which child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices
According to the current 2017 Market Rate Survey, 80.6 of licensed Type I; 84% of licensed Type II; and 80.5% of certified child care home providers in Kentucky report serving families and children who are receiving CCDF assistance. Approximately 20% of providers across the state do not accept CCDF assistance payments, representing an adequate level of participation.
- b) Describe how payment rates are adequate and have been established based on the most recent MRS or alternative methodology
The most current market rate survey results were received during the writing of this state plan, and payment rates are being reviewed as a result.
- c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF
The market rate survey includes providers who meet licensing and certification requirements as well as provider programs participating in the state's quality rating and improvement system. Rates are calculated based on the Market Rate Study and availability of federal and state funds to meet health, safety, quality, and staffing requirements.
- 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.
The lead agency takes the cost of higher quality into account by paying providers in the CCDF program at the high quality levels a monthly quality incentive per child. This is not a differentiated higher daily rate, but a monthly quality incentive based on their quality level in the QRIS system.
- e) How co-payments based on a sliding fee scale reported in 3.4.1 are affordable (response provided in 3.4.6)
Sliding scale fees are determined based on results of Market Rate Survey, considering regional differences; differences based on age of children served; and, income of family.
- f) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers
The Lead Agency considers provider fees based on results of Market Rate survey and take into consideration regional differences; type of care provided; and rates of programs that do and do not accept CCDF funding
- g) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.
 - Geographic area. Describe: The Lead Agency sets differential rates based on urban and rural designation as set by the state and consideration of regional differences reported in the Market Rate Study.

- Type of provider. Describe: **The Lead agency sets provider rates based on provider type of License Child Care Center Type I, Licensed Child Care Homes Type II, Certified Child Care Home Provider.**
- Age of child. Describe: **The Lead Agency sets differential rates for age designation, The Lead Agency sets differential rates for the following age groups.**
 - Infant** – Child, who is less than one year old
 - Toddler** – Child, who has reached the first birthday up to, but not including, the third birthday.
 - Preschool child** - Child, who has reached the third birthday up to, but not including, the sixth birthday.
 - School-age child** – Child, who has reached the sixth birthday.
- Quality level. Describe:
The Lead Agency sets differential rates for higher quality centers in form of monthly quality incentive payments based on number of children receiving CCDF payments
- Other.
- h) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access:
 - Payment rates are set at the 75th percentile or higher of the most recent survey. Describe:
Rates are yet to be determined based on results from the 2017 Market Rate survey.
 - Feedback from parents, including parent surveys or parental complaints. Describe:
 - Other. Describe:

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 describing the payment practices 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. If implemented describe the policy or procedure.

Paying within no more than 21 calendar days of the receipt of a complete invoice for services. If implemented describe the policy or procedure.

The Lead Agency policy is to issue payment within 10 days of receipt of a completed invoice for prior month services.

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:

Paying based on a child's enrollment rather than attendance. If implemented describe the policy or procedure.

Providing full payment if a child attends at least 85 percent of the authorized time. If implemented describe the policy or procedure.

Providing full payment if a child is absent for 5 or fewer days in a month. If implemented describe the policy or procedure. Licensed and certified providers may receive payment for up to five absences per month. Payments for more than five excused absences per child per month may be approved if the absence meets the following criteria for an extraordinary absence. An extraordinary absence is defined as: a) a death in the family; b) illness of the child or applicant; or c) a disaster verified by utility, local, state or federal government.

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.

c) Reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies, which 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)).

Child care providers cannot charge families receiving CCDF subsidies more than the rate charged to the public.

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). **Payment rates are based on a full day, which is defined as care five or more hours per day, or part day defined as less than five hours of care per day.**

Paying for reasonable mandatory registration fees that the provider charges to private-paying parents. Describe the policy or procedure. **Enrollment fees are paid to Licensed Type I and Type II and Certified Family Child-Care Homes who charge enrollment fees to the public for recipients receiving Kentucky Transitional Assistance Program (K-TAP) or having a referral under child protection and prevention .**

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:

Family and provider both sign a service agreement for child care services detailing the daily payment rate, copay payment amount, and child schedule. It also includes appeal process.

e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could affect 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: **Changes that reduce benefits, such as removing a child from the assistance case or income change resulting in an increase or decrease in co-pay and/or provider subsidy rate, require 10 days advanced notice prior to case action being processed.**

f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe: **An administrative hearing is a formal process by which an applicant, recipient or provider may appeal an action or inaction taken by the agency with which they do not agree. A client or provider must appeal a claim within 30 days of the date the claim was established.**

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)).

4.61 For each of the following types of providers, identify any shortages in the supply of quality child care providers, the data sources used to identify shortages, and the method of tracking progress to support equal access and parental choice. MARY

a) Children in underserved areas:

The Lead Agency assessed child care shortages across the state by calculating estimates based on census data and looking at child care spots available to help highlight areas where child care deserts might exist.

b) Infants and toddlers:

The Lead Agency designated regional staff to respond to expressed shortages and are available to assist in targeted recruiting efforts through community partnerships

c) Children with disabilities (include the Lead Agency definition in the description):

Lead Agency defines children with disabilities with multiple or severe functional needs requiring ongoing specialized care.

Designated regional staff respond to expressed shortages and are available to assist in targeted recruiting efforts through community partnerships. Child Care Aware staff are employed and supported by the Human Development Institute/University of Kentucky. Because HDI is a University Center for Excellence in Developmental Disabilities, staff have access to support providers working with children with disabilities and work to ensure access to quality care for this population

d) Children who received care during non-traditional hours:

Lead Agency designated regional staff respond to expressed shortages and are available to assist in targeted recruiting efforts to increase availability to care during non-traditional hours.

e) Other. Please describe any other shortages in the supply of high-quality providers.

Shortages in supply of high-quality providers have been identified in specific areas of the state with high unemployment and no sustainability industry.

4.6.2 Based on the analysis in 4.6.1, describe what method(s) is used to increase supply and to improve quality for the following.

a) Infants and toddlers. Check all that apply.

Grants and contracts (as discussed in 4.1.3)

Family child care networks

Start-up funding

Technical assistance support

Recruitment of providers

Tiered payment rates (as discussed in 4.3.2)

Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging

Other. Describe:

b) Children with disabilities. Check all that apply.

- Grants and contracts (as discussed in 4.1.3)
- Family child care networks
- Start-up funding
- Technical assistance support
- Recruitment of providers
- Tiered payment rates (as discussed in 4.3.2)
- Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
- Other. Describe:

The Lead Agency, through contractual services provided by the Child Care Resource and Referral Network, provides regional coaching, technical assistance, and resources to support prospective and current child care providers. Coaches deliver CHFS-approved training as a requirement of licensure. This training includes information pertinent to the successful operation of a child care program to deliver quality child care including, but not limited to, fiscal management, human resource management, risk management, public relations and communication.

c) Children who receive care during non-traditional hours. Check all that apply.

- Grants and contracts (as discussed in 4.1.3)
- Family child care networks
- Start-up funding
- Technical assistance support
- Recruitment of providers
- Tiered payment rates (as discussed in 4.3.2)
- Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging

Other. Describe: Licensed child-care centers and certified family child-care homes providing non-traditional care (i.e. non-traditional hours of evening and nights) receive technical assistance regarding Health, safety and quality child care.

d) Other. Check and describe:

- Grants and contracts (as discussed in 4.1.3). Describe:
- Family child care networks. Describe:
- Start-up funding. Describe:
- Technical assistance support. Describe: Kentucky Child Care Aware Coaches provide technical assistance to licensed, certified, and registered providers across the Commonwealth.

- Recruitment of providers. Describe: **Kentucky Child Care Aware Regional Associates conduct analysis on supply and demand within their regional area to determine recruitment needs.**
- Tiered payment rates (as discussed in 4.3.2)
- Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging. Describe: **Kentucky Child Care Aware Professional Development and Training Coaches provide technical assistance to licensed, certified, and registered providers to access training for best practices and components of the Kentucky ALL STARS domains require business and management training.**
- 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?

The Lead Agency refers to current census data and Kentucky unemployment rates reported by Bureau of Labor Statistics to compare with regional populations to determine the areas with greatest concentration of poverty and unemployment.

- 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.

The Lead Agency focuses on targeted recruitment and retention of high quality programs in areas of high poverty and with high unemployment rates. This includes regional focus on outreach to local government and small business to enhance knowledge of quality child care and benefit of this service to help retain a stable workforce.

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 child care services in the state/territory. States and territories may allow licensing exemptions, but they must describe how such exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care. Lead Agencies also must certify that there are in effect health and safety requirements applicable to providers serving CCDF children. 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 to ensure that providers are complying with the health and safety requirements.

This section covers licensing requirements, health and safety requirements and training, and monitoring and enforcement procedures to ensure that child care providers comply with

licensing and health and safety requirements (98.16(n)) as well as exemptions (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)). Criminal background check requirements are included in this section (98.16(o)).

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 CCDF 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); 98.409(a)(2)(iv)).

- 5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory and note if 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)).

Kentucky child care providers must meet the minimum regulatory requirements in accordance with 922 KAR 2:090 - Child-care center licensure, 922 KAR 2:100 - Certification of family child-care homes, and 922 KAR 2:180 - Requirements for registered child care providers in the Child Care Assistance Program, in addition to minimum health and safety requirements specified in 922 KAR 2:120 - Child-care health and safety standards.

Kentucky Administrative Regulation, 922 KAR 2:090, provides limited exemptions from child care licensing. The programs exempt from child care licensing and regulations are typically regulated by another agency, such as the Kentucky Department of Education. These exemptions do not endanger the health, safety, and welfare of children, because in the majority of cases, the programs require background checks and have infectious disease requirements for participation. In Kentucky, per statutorily established exemption in KRS 199.896, programs that operate for less than 20 hours per week, in which children attend less than 10 hours, shall be exempt from child care licensing requirements.

DCBS ensures exemptions do not endanger the health, safety, and welfare of children. 922 KAR 2:090, Section 3, outlines the exempt child care settings:

"The following child-care settings shall be exempt from licensure requirements of this administrative regulation, 922 KAR 2:110, and 922 KAR 2:120:

- (1) Summer camps certified by the cabinet as youth camps which serve school-age children;
- (2) Kindergarten through grade 12 in private schools while school is in session;
- (3) All programs and preschools regulated by the Kentucky Department of Education governed by KRS Chapter 157;

- (4) Summer programs operated by a religious organization, which a child attends no longer than two (2) weeks;
- (5) Child care provided while parents are on the premises, other than the employment and educational site of parents;
- (6) Child care programs operated by the armed services located on an armed forces base;
- (7) Child care provided by educational programs that include parental involvement with the care of the child and the development of parenting skills;
- (8) Facilities operated by a religious organization while religious services are being conducted; and
- (9) A program providing instructional and educational programs:
 - (a) That operates for a maximum of twenty (20) hours per week; and
 - (b) Which a child attends for no more than ten (10) hours per week." Reference: <http://www.lrc.ky.gov/kar/922/002/090E.htm>
KRS 199.896(19) and (20) grants additional partial or full exemption from licensure: <http://www.lrc.ky.gov/Statutes/statute.aspx?id=44071>.

5.1.2 Which providers in your state/territory are subject to licensing under this CCDF category? Check all that apply and provide a citation to the licensing rule.

- Center-based child care. Provide a citation: 922 KAR 2:090 and KRS 194A.050(1)
- Family child care. Provide a citation: 922 KAR 2:100 and KRS 194A.050(1)
- In-home care. Provide a citation: 922 KAR 2:180 and KRS 194A.050(1)

5.1.3 Are any providers in your state/territory that fall under this CCDF category exempt from licensing (98.40(2)(i) through (iv))? If so, describe exemptions based on length of day, threshold on the number of children in care, or any other factors applicable to the exemption.

- Center-based child care. If checked, describe the exemptions.
- Family child care. If checked, describe the exemptions.
- In-home care. If checked, describe the exemptions.

5.1.4 Describe how any exemptions identified above do not endanger the health, safety, or development of children in:

- a) Center-based child care if checked in 5.1.3.
- b) Family child care if checked in 5.1.3e.
- c) In-home care if checked in 5.1.3.

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.

a) Licensed CCDF center-based care

1. Infant

- How does the State/territory define infant (age range): **a child who is less than 12 months of age**
- Ratio: **1 staff for 5 children**
- Group size: **10**
- Teacher/caregiver qualifications: **922 KAR 2:090, Section 11**

2. Toddler

- How does the State/territory define toddler (age range): **child the age of twelve (12) months and thirty-six (36) months**
- Ratio: **1 staff for 6 children**
- Group size: **12**
- Teacher/caregiver qualifications: **922 KAR 2:090, Section 11**

3. Preschool

- How does the State/territory define preschool (age range): **child between the ages of two and five**
- Ratio: **preschool age two-three years, one staff for 10 children; preschool age three-four years, one staff for 12 children; preschool age four-five years, one staff for 14 children.**
- Group size: **preschool two-three years, max group size 20; preschool age three-four years, max group size 24; preschool age four-five, max group size 28**
- Teacher/caregiver qualifications: **922 KAR 2:090, Section 11**

4. School-age

- How does the State/territory define school-age (age range): **child attending kindergarten, elementary and secondary education**
- Ratio:
One staff for 15 children for school-age 5-7 years.
One staff for 25 children (for before and after school) for school-age 7 and older
One staff for 20 children (in full day care) for school-age 7 and older
- Group size: **School age 5 – 7 years maximum group 30**
- Teacher/caregiver qualifications: **922 KAR 2:090, Section 11**

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers. **n/a**

6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups. **The age of the youngest child in the group shall determine the staff to child ratio and maximum group size.**
 7. Describe the director qualifications for licensed CCDF center-based care.
922 KAR 2:090 Section 11
- b) Licensed CCDF family child care provider
1. Infant
 - How does the State/territory define infant (age range):
A child who is less than 12 months of age
 - Ratio: **1 staff for 4**
 - Group size: **Maximum number of unrelated children in the care of a certified family child-care home provider shall not exceed six at any one time. A provider may care for four related children in addition to six unrelated children for a maximum child care capacity of 10 at any one time.**
 - Teacher/caregiver qualifications: **922 KAR 2:100 Section 2 Certification Process**
 2. Toddler
 - How does the State/territory define toddler (age range):
Child the age of 12 months and 36 months
 - Ratio: **1 staff for 10 children**
 - Group size: **10 maximum**
 - Teacher/caregiver qualifications:
922 KAR 2:100 Section 2 Certification Process
 3. Preschool
 - How does the State/territory define preschool (age range):
Child between the ages of two and five
 - Ratio: **1 staff for 10 children**
 - Group size: **10 maximum**
 - Teacher/caregiver qualifications: **922 KAR 2:100 Section 2 Certification Process**
 4. School-age
 - How does the State/territory define school-age (age range): **child-attending kindergarten, elementary and secondary education**
 - Ratio: **1 staff for 10 children**
 - Group size: **10 maximum**

- Teacher/caregiver qualifications: 922 KAR 2:100 Section 2 Certification Process
5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes. *n/a*
- c) In-home CCDF providers:
1. Describe the ratios.
During hours of operation, a registered child care provider shall not care for more than three children receiving CCAP per day; or six children receiving CCAP per day, IF those children are part of a sibling group; and related to the provider; or total of eight children inclusive of the provider's own children.
 2. Describe the group size.
 3. *During hours of operation, a registered child care provider shall not care for more than three children receiving CCAP per day; or six children receiving CCAP per day, IF those children are part of a sibling group; and related to the provider; or total of eight children inclusive of the provider's own children.*
 4. Describe the threshold for when licensing is required.
Eight (8) children inclusive of the provider's own children.
 5. Describe the maximum number of children that are allowed in the home at any one time. *Maximum of eight inclusive of the provider's own children.*
 6. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size.
 7. *During hours of operation, a registered child care provider shall not care for more than three children receiving CCAP per day; or six children receiving CCAP per day, IF those children are part of a sibling group; and related to the provider; or total of eight children inclusive of the provider's own children.*
 8. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day. *none*

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)).

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.)
A staff person suspected of being infected with a communicable disease shall:
(a) Not perform duties that may allow for the transmission of the disease until the infectious condition can no longer be transmitted; and
(b) Provide a statement from a health professional, if requested.
- List the citation for these requirements. 922 KAR 2:120 Section 3
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
No variations by category of care or provider types
- Describe any variations based on the age of the children in care.
No variations based on the age of the children in care
- Describe if relatives are exempt from this requirement.
Relatives are not exempt from health and safety regulatory requirements.

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.)
Sleeping and Napping Requirements. An infant shall sleep or nap on the infant's back unless the infant's health professional signs a waiver that states the infant requires an alternate sleeping position.
For an infant an individual non-tiered crib that meets Consumer Product Safety Commission standards established in 16 C.F.R. 1219-1220.
- List the citation for these requirements. 922 KAR 2:120 Section 6
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). No variations
- Describe any variations based on the age of the children in care.
Rest time shall not exceed two hours for a preschool-age child unless the child is attending the child-care center during nontraditional hours.
- Describe if relatives are exempt from this requirement.
Relatives are not exempt from health and safety regulatory requirements.

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.)
Kentucky regulations require that programs obtain written permission from the child's parent/guardian and included the following.
 - Name of medication;
 - Dose to be given;
 - Route (how to give the medication – orally, topically, etc.);
 - Time (when medication should be given and the time the last dose was given prior to the child arriving at the program); and

- Parent signature.

Programs should also have the following information prior to administering any medication:

- Purpose of medication;
- Side effects to watch for;
- Any special instructions;
- Any known medication allergies of the child; and
- Name and phone number of prescribing doctor.

- List the citation for these requirements.

922 KAR 2:120, Section 7

Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). Licensed and Certified programs must keep a medication administration log (written record) of when, how much, and who administered the medicine.

- Describe any variations based on the age of the children in care. Providers are required obtaining and maintaining written documentation when administering medication regardless of child age.
- Describe if relatives are exempt from this requirement. Relatives are not exempt from health and safety regulatory requirements.

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.)

All staff should be notified of food allergies and allergic reactions that are reported by parents.

- Allergies and intolerances should be documented by a physician. An allergy is an immune response, and an intolerance is a metabolic response (e.g., a lactase deficiency for lactose intolerant children).
- If parent/guardian has given written permission, a child's allergy may be posted in sight for all staff.
- Be alert to unexpected encounters with allergic substances.
- Be sure to get written instructions and training from the child's doctor for how to respond to a child's allergic reactions, including any medication needed or emergency treatment (including training in the use of epinephrine, e.g., an EpiPen[®], for a child with a history of allergic reactions).

- List the citation for these requirements.

922 KAR 2:120, Section 7

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

No variations between provider types

- Describe any variations based on the age of the children in care.
No variations based on child age.
 - Describe if relatives are exempt from this requirement.
Relatives are not exempt from health and safety regulatory requirements.
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.)
All provider types per regulation must complete orientation training covering Health, Safety & Sanitation.
- Safety First:**
- (1) Closely supervise children;
- Be alert. Know where children are at all times.
 - Position yourself strategically so that you can see all of the children.
 - Circulate throughout the room.
 - Be close enough to intervene if necessary.
 - Establish clear, simple and positive safety rules. For example:
 - *We walk inside. Running is for outside.*
 - *Our toys are for playing.*
 - Remain within range of voice so that you can hear the children and they can hear you.
 - Maintain child/staff ratios at all times
- (2) Recognize, remove, and/or limit potential safety hazards.
- Falls;
 - Drowning;
 - Burns;
 - Choking, suffocation, and strangulation;
 - Poisoning; and
 - Vehicle-related injuries.
- List the citation for these requirements.
922 KAR 2:120, Section 4
 - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **No variations**
All early care and education professionals, regardless of provider type licensed or licensed exempt, must comply with state regulations, professional standards health, safety standards, and practices to prevent injuries.
Regulations are minimum standards that all programs must follow in order to operate legally. The three types of regulated child care programs in Kentucky are: 1) licensed child-care centers, 2) licensed family child-care homes, and 3)

registered child care providers.

- Describe any variations based on the age of the children in care.
At each stage of a child's development, certain types of injuries are more likely to occur. Knowing and understanding how children develop will help to predict and prevent most injuries.
- Describe if relatives are exempt from this requirement.
Relatives are not exempt from health and safety regulatory requirements.

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.)
Pediatric Abusive Head Trauma (PAHT), or previously referred to as Shaken Baby Syndrome, describes the constellation of signs and symptoms resulting from violent shaking or shaking and impacting the head of an infant or small child birth to five years of age.

Legislation mandates education on the identification and prevention of Pediatric Abusive Head Trauma for various groups in the state who work with or care for young children. This training will help caregivers recognize early signs of maltreatment, which can prevent escalation to Pediatric Abusive Head Trauma. Caregivers will learn effective strategies for dealing with a crying infant—the most common trigger for Pediatric Abusive Head Trauma. All employees and owners of child-care centers are required to take a minimum of 1.5 hours of training on PAHT once every five years as a part of their continuing education requirements and counts towards the required annual training total.

- List the citation for these requirements.
922 KAR 2:090. Child-care center licensure;
922 KAR 2:100. Certification of Family Child-Care Homes; and
922 KAR 2:180. Requirements for registered child care providers in the Child Care Assistance Program
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
No variations by category of care or provider type
- Describe any variations based on the age of the children in care.
No variations based on age of child(ren)
- Describe if relatives are exempt from this requirement.
Relatives are NOT 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.)

A child-care center licensed under KRS 199.896 and a family child-care home certified under KRS 199.8982 shall have a written plan for evacuation in the event of fire, natural disaster, or other threatening situation that may pose a health or safety hazard to the children in the center. The plan shall include but not be limited to:

- A designated relocation site and evacuation route;
- Procedure for notifying parents of the relocation and ensuring family reunification;
- Procedures to address the needs of individual children including children with special needs;
- Instructions relating to the training of staff or the reassignment of staff duties, as appropriate;
- Coordination with local emergency management officials; and
- A program to ensure that appropriate staff is familiar with components of the plan.

Resources available to providers include instructions and templates for developing policy and procedures.

- List the citation for these requirements.

The Kentucky Revised Statutes

- KRS 199.895 Evacuation Plan;
- KRS 199.896 Child Care Center Licensed; and
- KRS 199.8982 Certified Family Child Care Home.

The Kentucky administrative regulations for child care requiring components of emergency disaster preparedness planning are:

- 922 KAR 2:090, Child-care center licensure;
- 922 KAR 2:100, Certification of family child-care homes;
- 922 KAR 2:120, Child-care center health and safety standards; and
- 922 KAR 2:180, Requirements for registered child-care providers in the Child Care Assistance Program.

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

No variations by category of care or provider type

- Describe any variations based on the age of the children in care.

No variations based on age of children in care

- Describe if relatives are exempt from this requirement. Relatives are not exempt from this requirement.

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.)
Child Care regulation requires toys and furnishing be free from sharp points or corners, splinters, protruding nails or bolts, loose or rusty parts, hazardous small parts, lead-based paint, poisonous material, and flaking or chalking paint. Administrative regulations also requires solid waste kept in a suitable receptacle in accordance with local, county and state law.
- List the citation for these requirements.
922 KAR 2:120, Section 11 and KRS 211.350 to 211.380
- 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

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.)
A center providing transportation is required to maintain a written record detailing type of transportation, scheduling, staffing, route, daily inspection, roster of children transported, valid driver's license, maintain full coverage auto insurance, and background check of driver.

603 KAR 5:072 pertains to the inspection required for vehicles designed and used for carrying nine or more passengers, including the driver. This inspection is to be conducted by the Transportation Cabinet, Department of Vehicle Regulations or its designee.

List the citation for these requirements.

- 922 KAR 2:090. Child-care center licensure
- 922 KAR 2:100. Certification of family child-care homes
- 922 KAR 2:120. Child-care center health and safety standards - Transportation
- 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
If transportation is provided by a registered child care provider, the provider shall:
 - (a) Have written permission from a parent or guardian to transport the child;
 - (b) Have a vehicle equipped with seat belts; and
 - (c) Comply with KRS 189.125 regarding child restraint and seating.
- Describe any variations based on the age of the children in care.

Comply with KRS 189.125 regarding child restraint and seating

- Describe if relatives are exempt from this requirement.
n/a

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.)
Certified family child care providers must be certified in infant/child CPR and first aid. In Type I and II licensed programs, at least one person on duty is required to be certified in infant/child CPR and first aid.
- List the citation for these requirements.
922 KAR 2:090, Section 11
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
922 KAR 2:090, Section 11 -
For a child-care center licensed for infant, toddler, or preschool-age children, at least one (1) person on duty and present with the children shall be currently certified by a cabinet-approved training agency in the following skills: infant and child cardiopulmonary resuscitation; and infant and child first aid.
For a child-care center licensed for school-age children, at least one (1) person on duty and present with the children shall be currently certified by a cabinet-approved training agency in the following skills: adult cardiopulmonary resuscitation; and first aid.
- Describe any variations based on the age of the children in care.
Staff must be trained in pediatric CPR in order to properly administer CPR to children.
- Describe if relatives are exempt from this requirement n/a

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.)
Kentucky child care providers and staff are identified as mandated reports in Kentucky law. Staff are required to identify at least five physical or behavioral indicators of child abuse and neglect, including at least two ways to distinguish accidental injury from abuse.
- List the citation for these requirements.
 - 922 KAR 2:090. Child-care center licensure
 - 922 KAR 2:100. Certification of family child-care homes
 - 922 KAR 2:120. Child-care center health and safety standards - Transportation
 - 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
- 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

a) The Lead Agency may also include optional standards related to the following:

1. Nutrition

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
Licensed child-care programs in Kentucky must follow meal requirements developed in consultation with the Child and Adult Care Food Program (CACFP) administered by the Kentucky Department of Education. Child Care programs receive consultation and financial support through CACFP program, which provides aid to child and adult care institutions and family or group day care homes for the provision of nutritious foods that contribute to the wellness, healthy growth, and development of young children, and the health and wellness of older adults and chronically impaired disabled persons. Programs that participate in CACFP typically exceed licensing standards. For child care programs that do not participate in CACFP, Kentucky has licensing standards that include food and nutrition requirements.
- List the citation for these requirements.
922 KAR 2:120, Section 9
922 KAR 2:100, Section 14
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
Registered providers do not participate in the CACFP.
- Describe if relatives are exempt from this requirement. n/a

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.)
A program of activities that provides experience to promote the individual child's physical, emotional, social, and intellectual growth and well-being; and developmentally appropriate for each child served.
- List the citation for these requirements.
922 KAR 2:120, Section 2
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
922 KAR 2:100, Section 12
- Describe if relatives are exempt from this requirement. n/a

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.)
Providers who care for a child with a special need shall be consistent with the nature of the need as documented by the child's health professional. The child care center must obtain written information regarding a child with special needs and keep that documentation on file. A therapist, physician or other health professional

could provide a child’s health information for specific care. The child care center staff should be aware of a child’s documented special needs and should ensure those needs are met while the child is at the child care center.

- List the citation for these requirements.
922 KAR 2:120, Section 2
922 KAR 2:100, Section 12
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). none
- Describe if relatives are exempt from this requirement.
n/a

4. Any other areas determined necessary to promote child development or to protect children’s health and safety (98.44(b)(1)(iii)). Describe: n/a

- Provide a brief summary of how the standard(s) is defined (i.e., what is the standard, content covered, practices required, etc.)
- List the citation for these requirements.
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
- Describe if relatives are exempt from this requirement.

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)(l)(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: **6**
2. Licensed FCC homes: **6**
3. In-home care: **3**
4. Variations for exempt provider settings: n/a

b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer) **Orientation training must be completed within three months of employment.**

- c) 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.
922 KAR 2:090. Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No
 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices
 - Provide the citation for this training requirement.
922 KAR 2:090. Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No
 3. Administration of medication, consistent with standards for parental consent
 - Provide the citation for this training requirement.
922 KAR 2:090. Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No
 4. Prevention and response to emergencies due to food and allergic reactions
 - Provide the citation for this training requirement.

922 KAR 2:090.Child-care center licensure

922 KAR 2:100. Certification of family child-care homes

922 KAR 2:120. Child-care center health and safety standards - Transportation

922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No
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.
922 KAR 2:090.Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No
6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
- Provide the citation for this training requirement.
922 KAR 2:090.Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No
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.
922 KAR 2:090.Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No
8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Provide the citation for this training requirement.
922 KAR 2:090. Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No
9. Appropriate precautions in transporting children (if applicable)
- Provide the citation for this training requirement.
922 KAR 2:090. Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No
10. Pediatric first aid and CPR certification
- Provide the citation for this training requirement.
922 KAR 2:090. Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No
11. Recognition and reporting of child abuse and neglect

- Provide the citation for this training requirement.
922 KAR 2:090. Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No

12. Child development (98.44(b)(1)(iii))

- Provide the citation for this training requirement.
922 KAR 2:090. Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No

13. Describe other requirements

- Provide the citation for other training requirements.
- Does the state/territory require that this training topic(s) be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 Yes
 No

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: **15**
- b) Licensed FCC homes: **9**
- c) In-home care: **3**
- d) Variations for exempt provider settings: **n/a**

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.
922 KAR 2:090.Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
- How often does the state/territory require that this training topic be completed?
 - Annually.
 - Other. Describe Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours.

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

- Provide the citation for this training requirement.
922 KAR 2:090.Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
- How often does the state/territory require that this training topic be completed?
 - Annually.
 - Other. Describe Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours.

3. Administration of medication, consistent with standards for parental consent

- Provide the citation for this training requirement.
922 KAR 2:090.Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
- How often does the state/territory require that this training topic be completed?
 - Annually.
 - Other. Describe

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours.

4. Prevention and response to emergencies due to food and allergic reactions

- Provide the citation for this training requirement.
922 KAR 2:090.Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
- How often does the state/territory require that this training topic be completed?
 Annually.
 Other. Describe

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours.

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.
922 KAR 2:090.Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
- How often does the state/territory require that this training topic be completed?
 Annually.
 Other. Describe

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours.

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

- Provide the citation for this training requirement.
922 KAR 2:090.Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program

- How often does the state/territory require that this training topic be completed?
 - Annually.
 - Other. Describe **Kentucky requires all staff to complete one and one-half (1 ½) hours of pediatric abusive head trauma (previously called shaken baby syndrome) training completed once every five years.**
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.
 - 922 KAR 2:090.Child-care center licensure**
 - 922 KAR 2:100. Certification of family child-care homes**
 - 922 KAR 2:120. Child-care center health and safety standards - Transportation**
 - 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program**
 - How often does the state/territory require that this training topic be completed?
 - Annually.
 - Other. Describe **Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours.**
8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants
- Provide the citation for this training requirement.
 - 922 KAR 2:090.Child-care center licensure**
 - 922 KAR 2:100. Certification of family child-care homes**
 - 922 KAR 2:120. Child-care center health and safety standards - Transportation**
 - 922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program**
 - How often does the state/territory require that this training topic be completed?
 - Annually.
 - Other. Describe **Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours.**
9. Appropriate precautions in transporting children (if applicable)
- Provide the citation for this training requirement.
 - 922 KAR 2:090.Child-care center licensure**
 - 922 KAR 2:100. Certification of family child-care homes**

922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program

- How often does the state/territory require that this training topic be completed?
 Annually.
 Other. Describe

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours.

10. Pediatric first aid and CPR certification

- Provide the citation for this training requirement.
922 KAR 2:090.Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
- How often does the state/territory require that this training topic be completed?
 Annually.
 Other. Describe

Renewal of pediatric first aid and CPR Certification is completed per national requirements and does not count toward annual training hours for regulatory compliance.

11. Recognition and reporting of child abuse and neglect

- Provide the citation for this training requirement.
922 KAR 2:090.Child-care center licensure
922 KAR 2:100. Certification of family child-care homes
922 KAR 2:120. Child-care center health and safety standards - Transportation
922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program
- How often does the state/territory require that this training topic be completed?
 Annually.
 Other. Describe

Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours.

12. Child development (98.44(b)(1)(iii))

- Provide the citation for this training requirement.
922 KAR 2:090.Child-care center licensure

922 KAR 2:100. Certification of family child-care homes

922 KAR 2:120. Child-care center health and safety standards - Transportation

922 KAR 2:180 Requirements for registered child-care providers in the Child Care Assistance Program

- How often does the state/territory require that this training topic be completed?
 - Annually.
 - Other. Describe
 - Orientation covering these health and safety topics are required within first three months of initial employment and may be taken as an individual training topic with hours countable toward the 15 annual training hours.

13. Describe other requirements.

- Provide the citation for other training requirements.
- How often does the state/territory require that this training topic be completed?
 - Annually.
 - Other. Describe

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.

The Office of the Inspector General (OIG) enforces minimum operating standards for child-care centers and homes according to state statutes and regulations. OIG conducts onsite inspections of child-care centers and homes to ensure compliance with state and local health and safety requirements. OIG receives complaints and investigates allegations of non-compliance and take proper action to correct non-compliance.

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.

Providers must meet 922 KAR 2:120 governing child-care center health and safety standards, along with state fire marshal and the local zoning laws.

2. Describe your state/territory’s requirements for annual, unannounced inspections of licensed CCDF child care center providers.

Providers must meet 922 KAR 2:120 governing child-care center health and safety standards, along with state fire marshal and the local zoning laws.

3. Identify the frequency of unannounced inspections:



Once a year



More than once a year. Describe

DRCC shall receive complaints from the public and other state agencies regarding allegations of noncompliance within the regulatory requirements and investigate within 30 days using a methodology for prioritization of investigation. DRCC shall conduct unannounced on-site visit to investigate allegations of non-compliance and ensure appropriate actions are taken to correct any regulatory deficiencies discovered.

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.

DRCC shall ensure that all child-care centers are licensed annually.

Prior to licensure approval, DRCC staff conduct at least one unannounced on-site inspection to determine whether the childcare applicant meets the Kentucky Administrative Regulations 922 KAR 2:090, 922 KAR 2:120, and 922 KAR 2:280; and one follow-up inspection during the preliminary period prior to issuance of a regular license.

DRCC shall notify in writing the child-care center if there is a finding of noncompliance with the regulatory requirements. The center has an opportunity to submit plans for correcting cited deficiencies. Notwithstanding any plan of

correction or other response submitted by a center, DRCC may initiate adverse action as needed.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers
Providers must meet 922 KAR 2:120 along with state fire marshal and the local zoning laws.

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.
Providers must meet 922 KAR 2:100 along with written documentation from the local authority showing compliance with local zoning requirements.
2. Describe your state/territory's requirements for at least annual, unannounced inspections of licensed CCDF family child care providers.
An unannounced inspection of the home occurs prior to renewal pursuant to 922 KAR 2:100 certification of family child-care homes regulation.
3. Identify the frequency of unannounced inspections:

Once a year

More than once a year. Describe

DRCC shall receive complaints from the public and other state agencies regarding allegations of noncompliance within the regulatory requirements and investigate within 30 days using a methodology for prioritization of investigation. DRCC shall conduct unannounced on-site visit to investigate allegations of non-compliance and ensure appropriate actions are taken to correct any regulatory deficiencies discovered.

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.

DRCC shall ensure that all family child-care homes are licensed every two years.

Prior to certification approval, DRCC staff conduct at least one unannounced onsite inspection to determine whether the childcare applicant meets the Kentucky Administrative Regulations 922 KAR 2:100, 922 KAR 2:280, and one follow-up inspection during the preliminary period prior to issuance of certification.

DRCC shall notify the family child-care home in writing if the home is determined to be noncompliant with regulatory requirements. The home has an opportunity to submit plans for correcting cited deficiencies. Notwithstanding any plan of correction or other response submitted by a home, DRCC may initiate adverse action as needed.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers

Providers must meet 922 KAR 2:100 along with state fire marshall and the local zoning laws.

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

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.

If a registered provider provides child care in the provider's home, the cabinet or its designee shall complete an initial or an annual home inspection of the registered child care provider in accordance with 42 U.S.C. 9858c(c)(2)(K)(i)(IV) and 922 KAR 2:180.

2. Describe your state/territory's requirements for at least annual, unannounced inspections of licensed CCDF in-home child care providers.

DRCC surveyors conduct an annual home visit at the registered providers home if the provider is not a relative to the child. The initial home visit shall be conducted within the first 90 days of the registered provider's application and completion of the DCC 107A, Registered Provider Home Safety Checklist.

3. Identify the frequency of unannounced inspections:



Once a year



More than once a year. Describe

DRCC shall receive complaints from the public and other state agencies regarding allegations of noncompliance within the regulatory requirements and investigate within 30 days using a methodology for prioritization of investigation. DRCC shall conduct unannounced onsite visit to investigate allegations of noncompliance and ensure appropriate actions are taken to correct any regulatory deficiencies discovered.

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.

DRCC inspects all providers caring for an unrelated child or children who receive CCDF subsidies annually to ensure regulatory compliance

Prior to registered provider approval, DRCC staff conduct at least one unannounced on-site inspection to determine whether the applicant meets 922 KAR 2:180 and 922 KAR 2:280. DRCC may conditionally approve an individual who made a notice and application pursuant to Section 2(1) and (4) of 922 KAR 2:180, to provide child care services to a child under a provisional approval for 90 calendar days.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers
<http://www.lrc.ky.gov/kar/922/002/180reg.htm>

- d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers.

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- 5.3.3 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.

Kentucky does not have any license-exempt center-based child care providers.

Provide the citation(s) for this policy or procedure.

- 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.

Kentucky does not have any license-exempt family child care CCDF providers.

Provide the citation(s) for this policy or procedure. *n/a*

- 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.

Kentucky does not have any license-exempt in-home child care providers.

Provide the citation(s) for this policy or procedure. *n/a*

- 5.3.4 The Lead Agency 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, and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). The state/territory may determine if exempt relative providers (as described in section (658P(6)(B)) do not need to meet this requirement. At a minimum, the health and safety requirements to be inspected must address the standards listed in 5.1.4 (98.41(a)). To certify, describe the policies and practices for the annual monitoring of:

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. **Kentucky does not have any license exempt center based child care providers.**

Provide the citation(s) for this policy or procedure.

- d) 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. **Kentucky does not have any license exempt family child care providers.**

Provide the citation(s) for this policy or procedure. **n/a**

- e) 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. **n/a**

Kentucky does not have any license exempt in-home child care providers.

- f) Provide the citation(s) for this policy or procedure. **n/a**

5.3.5 Licensing inspectors.

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors 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)).

- a) To certify, describe how the Lead Agency ensures that licensing inspectors 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)).

Division of Regulated Child Care current and new licensing surveyors are required to complete the following online training modules per contract deliverable:

- **Introduction to Licensing and Regulation;**
- **Orientation (Health & Safety, Recognizing & Reporting Child Abuse and Neglect and Developmentally appropriate child care practice);**
- **Online Orientation through ECOOL for all DRCC Licensing Surveyors; and**
- **Licensing and Certification Standards of Practice (SOP).**

- b) Provide the citation(s) for this policy or procedure.

Policy citation is not available. The contract with Office of Inspector General, Division of Regulated Child Care (DRCC) requires DRCC Licensing Surveyors current and new hires complete the Child Care Standards of Practice training within the first 90 days of employment and/or prior to surveying independently and completing surveys or making decisions on surveys. DRCC shall monitor surveyor staff and provide ongoing training to assure consistency of regulation enforcement statewide.

5.3.6 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 providers 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.

Kentucky's ratio of licensing surveyors to child care facilities is 1:50.

- b) Provide the policy citation and state/territory ratio of licensing inspectors.

Excerpt from contract with Office of Inspector General, Division of Regulated Child care requirements for Staffing and Professional Development:

DRCC shall monitor monthly to assure its ratio of dedicated child-care licensing surveyor positions is one surveyor for each 50 child-care centers and family child-care homes, including two surveyors to conduct registered provider home visits to the extent that funding is available.

DRCC shall ensure that all newly hired surveyors complete the Child Care Standards of Practice training within the first 90 days of employment and/or prior to surveying independently and completing surveys or making decisions on surveys.

DRCC shall monitor surveyor staff and provide ongoing training to assure consistency of regulation enforcement statewide.

DRCC shall ensure that all staff are meeting contractual timeframes as listed within each deliverable, including professional, clerical, and administrative duties necessary for the licensure, certification and registration.

- 5.3.7 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.

A family determined eligible for the Child Care Assistance Program (CCAP) may choose a private individual, such as a relative or neighbor, to care for their children. In order to be paid CCAP funds for providing child care services, these individuals must meet minimum health, safety, and training requirements and be registered with the state. If a family chooses a relative to care for their child, the relative is exempt from inspection as long as the provider is only providing care

for related children. A relative provider is required meet all other regulatory requirement and submit to background checks in accordance with 922 KAR 2:280.

- 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

5.4.1 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 and apply for the time-limited waiver by responding to questions 5.4.1a through 5.4.1h below.

As a reminder, 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 providers 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). 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. 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. This requirement does not apply to individuals who are related to all children for whom child care services are provided.

A criminal background check must include 8 specific components, which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks:

1. Criminal registry or repository using fingerprints in the current state of residency (in-state);
2. Sex offender registry or repository check in the current state of residency (in-state);
3. Child abuse and neglect registry and database check in the current state of residency (in-state);
4. FBI fingerprint check (national);
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (national);

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 (inter-state);
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years (inter-state); and
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years (inter-state).

Milestone Prerequisites for Time-Limited Waivers

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 45 CFR 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.

If the milestone prerequisites are met, then time-limited waivers may be requested for the components as outlined in the table below.

Background Check Components	If milestone is met, time-limited waiver allowed for:
1) In-state criminal w/fingerprints	Conducting background checks on backlog of current (existing) staff only
2) In-state sex offender registry	
3) In-state state-based child abuse and neglect registry	
4) FBI fingerprint check	
5) NCIC National Sex Offender Registry (NSOR)	Establishing requirements and procedures AND/OR Conducting background checks on all new (prospective) child care staff AND/OR Conducting background checks on backlog of current (existing) staff
6) Inter-state state criminal registry	
7) Inter-state state sex offender registry	
8) Inter-state child abuse and neglect registry	

States and Territories will apply for the initial waiver for a one-year period (starting October 1, 2018 and ending September 30, 2019) as part of the submission of this Plan. 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. Additional 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 renewal deadline (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Use questions 5.4.1a through 5.4.1d below to describe achievement of the milestone components, use questions 5.4.1e through 5.4.1h to provide the status for the remaining checks, and as applicable, use questions 5.4.1a through 5.4.1h to request a time-limited waiver for any allowable background check requirement.

- a) Briefly summarize the requirements, policies and procedures for the search of the state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.

922 KAR 2:280 requires child care staff members (current employees as well as new hires) to submit to the National Background Check Program (NBCP) by September 30, 2018.

- Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).
922 KAR 2:280 establishes background check requirements for all child care staff members, reporting requirements, and appeals. Child care providers will be required to submit anyone meeting the federal definition of "child care staff member" to background checks in accordance with this administrative regulation. Federal law and related federal waiver mandate the background checks be performed on new hires and existing child care staff members no later than September 30, 2018.
- 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 and 98.16(o).
Kentucky does not have any license exempt CCDF eligible providers.
- Has the search of the state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?
 Yes.

No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. **September 30, 2018** Describe the status of conducting the search of the state criminal registry or repository, with the use of fingerprints for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care. Key challenges to implementation will be the designated fingerprint scan locations' ability to accommodate a significant increase in volume. Another challenge will be law enforcement's ability to accommodate the increase in volume.

Background Check Submission and Fingerprinting Month	Renewal Month of the Child Care Provider's License, Certification, or Registration
March 2018	June, July
April 2018	August
May 2018	September or October
June 2018	November or December
July or August 2018	January, February, or March
September 2018	April or May

iv. List the citation:

922 KAR 2:280

b) Briefly summarize the requirements, policies and procedures for the search of the state sex offender registry or repository in the state where the staff member resides.

Providers must search the Kentucky State Police Sex Offender Registry public site prior to submitting an application. The system will not allow the application to continue until the search has been completed. Once this is completed, the application can be submitted for fingerprinting. This initial step saves the cost of fingerprinting if a disqualifying offense is identified from the registry.

- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o). The National Background Check Program (NBCP) will not allow providers to move through the system without completing a search of the public websites. This is required of all licensed, regulated, and registered providers.
- 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 and 98.16(o).

Kentucky does not exempt any licensed provider receiving CCDF from compliance with NBCP fingerprinting requirements. There are no license-exempt CCDF providers.

- iii. Has the search of the state sex offender registry or repository been conducted for all current (existing) child care staff?
 - Yes
 - No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. **September 30, 2018** Describe the status of conducting the search of the state sex offender registry or repository for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:
A schedule for all providers was developed to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule was shared with all providers, professional development and training coaches, and the Division of Regulated Child Care. It is also included in the regulation 922 KAR 2:280.

- iv. List the citation:
922 KAR 2:280.
- c) Briefly summarize the requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in the state where the staff member resides.

922 KAR 2:280 requires child care staff members (current employees as well as new hires) to submit to the National Background Check Program (NBCP) by September 30, 2018. The NBCP contains an auto-match feature of the state's child abuse/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 and 98.16(o). **922 KAR 2:280 applies to a child care staff member age 18 or older, including an owner, operator, or employee of a child care provider, child-care center licensee or director, an adult household member of a Type II child-care center, family child-care home, or provider registered in accordance with 922 KAR 2:180, an employee who is present during the time a child is receiving care, any person with supervisory or disciplinary control over a child in care; and any person having unsupervised contact with a child in care.**

Describe how these requirements apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o).

Kentucky does not exempt any licensed provider receiving CCDF from compliance with NBCP fingerprinting requirements. There are no license-exempt providers receiving CCDF funding.

- ii. Has the search of the state-based child abuse and neglect registry and database been conducted for all current (existing) child care staff?
 - Yes
 - No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. **September 30, 2018** Describe the status of conducting the search of the state-based child abuse and neglect registry and database for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care.

iii. List the citation:

922 KAR 2:280

d) Briefly summarize the requirements, policies and procedures for the FBI fingerprint check using Next Generation Identification.

922 KAR 2:280 requires child care staff members (current employees as well as new hires) to submit to the National Background Check Program (NBCP) by September 30, 2018. Once the applicant's or staff member's information is entered into the NBCP, and the state's sex offender and child abuse/neglect registries have been cleared, paperwork is generated for the applicant to take to one of the 80 "live scan" locations across the state. Staff verify the identity of the individual using driver's license or other approved photo identification and ensure it matches the preprinted paperwork. Fingerprints are submitted through the Kentucky State Police to the FBI using Next Generation Identification.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o). 922 KAR 2:280 administrative regulation applies to a child care staff member age 18 or older, including an owner, operator, or employee of a child care provider, child-care center licensee or director, an adult household member of a Type II child-care center, family child-care home, or provider registered in accordance with 922 KAR 2:180, an employee or volunteer who is present during the time a child is receiving care, any person with supervisory or disciplinary control over a child in care; and any person having unsupervised contact with a child in care.

ii. Describe how these requirements apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o).

There are no license-exempt providers delivering CCDF services.

iii. Has the search of the FBI fingerprint check using Next Generation Identification been conducted for all current (existing) child care staff?

Yes



No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. **September 30, 2018** Describe the status of conducting the FBI fingerprint check using Next Generation Identification for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to

date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, as well as the Division of Regulated Child Care. Key challenges to implementation will be the designated fingerprint scan locations sites being able to accommodate an increase in volume. Another challenge will be law enforcement's ability to accommodate an increase in volume.

iv. List the citation: **922 KAR 2:280**

e) Describe the status of the requirements, policies and procedures for the search of the NCIC's National Sex Offender Registry.

Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the search of the NCIC's NSOR check on all new and existing child care staff.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered childcare providers, in accordance with 98.43 and 98.16(o).

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 and 98.16(o).

iii. List the citation:

In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. **September 30, 2018** describe the status of implementation of requirements, policies and procedures for the NCIC's National Sex Offender Registry. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all prospective and existing licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

A schedule was developed for all providers to follow to ensure all current staff and new hires submit to the National Background Check Program by September 30, 2018. The schedule has been shared with all providers, professional development and training coaches, and the Division of Regulated Child Care. Key challenges to implementation will be the designated fingerprint scan locations sites' ability to accommodate an increase in volume. Another challenge will be law enforcement's ability to accommodate an increase in volume.

f) Describe the status of the requirements, policies and procedures for the search of the criminal registries or repositories in other states where the child care staff member resided during the preceding 5 years, with the use of fingerprints being optional in those other states.

Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the inter-state state criminal registry check on all new and existing child care staff.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

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 and 98.16(o).

iii. List the citation:

In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. **September 30, 2018.** Describe the status of implementation of requirements, policies and procedures for the search of the criminal registries or repositories in other states where the child care staff member resided during the preceding 5 years, with the use of fingerprints being optional in those other states. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all providers eligible to provide care for children receiving CCDF; 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

922 KAR 2:280 Section 5. Checks of Other States. (1) In accordance with 45 C.F.R. 98.43(b)(3), a prospective child care staff member who resides in or has resided in another state within the last five (5) years shall:

(a) Request from each state of current or prior residency, in accordance with the state's laws, policies, and procedures, with a courtesy notice to the cabinet:

1. An in-state criminal records check by:

- a. Means of fingerprints for the state of residence; or
- b. Any means accepted by a state of prior residency;

2. A check of the state's sex offender registry or repository; and

3. A check of the state-based child abuse and neglect registry and database; and

(b) Direct results of the checks required in paragraph (a) of this subsection to the Department for Community

Based Services, Division of Child Care, 275 East Main Street, 3C-F, Frankfort, Kentucky 40601.

(2) If the prospective child care staff member's current or prior state of residency participates in the FBI's National Fingerprint File Program, a prospective child care staff member shall be exempt from the requirements of subsection (1)(a)1. of this section.

(3) In accordance with KRS 336.220, a child care provider shall pay any fee charged by another state for a background check as permitted pursuant to 45 C.F.R. 98.43(f) for a prospective child care staff member.

(4) If another state fails to respond to a check submitted in accordance with subsection (1) of this section within thirty (30) calendar days from the date of the background check's request as verified by the child care staff member, the cabinet shall:

(a) Process a child care staff member's background checks and issue notice to the child care provider in accordance with Section 4(5) of this administrative regulation to ensure compliance with 45 C.F.R. 98.43(e); and

(b) Send notice in accordance with Section 4(5) of this administrative regulation if:

- 1. Another state provides requested background check results at a later date; and
- 2. A disqualifying background check result is identified.

(5) A child abuse and neglect central registry check in accordance with 922 KAR 1:470 may be requested by a:

- (a) Parent or legal guardian in accordance with KRS 199.466; or
- (b) Child care staff member in another state.

g) Describe the status of the requirements, policies and procedures for the search of the state sex offender registry or repository in each state where the staff member resided during the previous 5 years.

Fully implemented for all required child care providers (all licensed, regulated or registered; and all (prospective and existing) child care providers eligible to provide care for children receiving CCDF assistance). This means that the State/Territory has requirements and procedures in effect, and has conducted the inter-state state sex offender registry check on all new and existing child care staff.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

ii. Describe how these requirements, policies and procedures apply to all providers eligible to care for children receiving CCDF, in accordance with 98.43 and 98.16(o).

iii. List the citation:

In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. **September 30, 2018**. Describe the status of implementation of requirements, policies and procedures for the search of the state sex offender registry or repository in each state where the staff member resided during the previous 5 years. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all providers eligible to provide care for children receiving CCDF; 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

922 KAR 2:280 Section 5. Checks of Other States. (1) In accordance with 45 C.F.R. 98.43(b)(3), a prospective child care staff member who resides in or has resided in another state within the last five (5) years shall:

(a) Request from each state of current or prior residency, in accordance with the state's laws, policies, and procedures, with a courtesy notice to the cabinet:

1. An in-state criminal records check by:

a. Means of fingerprints for the state of residence; or

b. Any means accepted by a state of prior residency;

2. A check of the state's sex offender registry or repository; and

3. A check of the state-based child abuse and neglect registry and database; and

(b) Direct results of the checks required in paragraph (a) of this subsection to the Department for Community Based Services, Division of Child Care, 275 East Main Street, 3C-F, Frankfort, Kentucky 40601.

(2) If the prospective child care staff member's current or prior state of residency participates in the FBI's National Fingerprint File Program, a prospective child care staff member shall be exempt from the requirements of subsection (1)(a)1. of this section.

(3) In accordance with KRS 336.220, a child care provider shall pay any fee charged by another state for a background check as permitted pursuant to 45 C.F.R. 98.43(f) for a prospective child care staff member.

(4) If another state fails to respond to a check submitted in accordance with subsection (1) of this section within thirty (30) calendar days from the date of the background check's request as verified by the child care staff member, the cabinet shall:

(a) Process a child care staff member's background checks and issue notice to the child care provider in accordance with Section 4(5) of this administrative regulation to ensure compliance with 45 C.F.R. 98.43(e); and

(b) Send notice in accordance with Section 4(5) of this administrative regulation if:

1. Another state provides requested background check results at a later date; and

2. A disqualifying background check result is identified.

(5) A child abuse and neglect central registry check in accordance with 922 KAR 1:470 may be requested by a:

(a) Parent or legal guardian in accordance with KRS 199.466; or

(b) Child care staff member in another state.

h) Describe the status of the requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in each State where the staff member resided during the previous 5 years.

- Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the state-based child abuse and neglect registry check on all new and existing child care staff.
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).
 - 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 and 98.16(o).
 - iii. List the citation:

In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. **September 30, 2018**. Describe the status of implementation of requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in each State where the staff member resided during the previous 5 years. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

922 KAR 2:280 Section 5. Checks of Other States. (1) In accordance with 45 C.F.R. 98.43(b)(3), a prospective child care staff member who resides in or has resided in another state within the last five (5) years shall:

- (a) Request from each state of current or prior residency, in accordance with the state's laws, policies, and procedures, with a courtesy notice to the cabinet:**
 - 1. An in-state criminal records check by:**
 - a. Means of fingerprints for the state of residence; or**
 - b. Any means accepted by a state of prior residency;**
 - 2. A check of the state's sex offender registry or repository; and**
 - 3. A check of the state-based child abuse and neglect registry and database; and**
- (b) Direct results of the checks required in paragraph (a) of this subsection to the Department for Community Based Services, Division of Child Care, 275 East Main Street, 3C-F, Frankfort, Kentucky 40601.**

(2) If the prospective child care staff member's current or prior state of residency participates in the FBI's National Fingerprint File Program, a prospective child care staff member shall be exempt from the requirements of subsection (1)(a)1. of this section.

(3) In accordance with KRS 336.220, a child care provider shall pay any fee charged by another state for a background check as permitted pursuant to 45 C.F.R. 98.43(f) for a prospective child care staff member.

(4) If another state fails to respond to a check submitted in accordance with subsection (1) of this section within thirty (30) calendar days from the date of the background check's request as verified by the child care staff member, the cabinet shall:

(a) Process a child care staff member's background checks and issue notice to the child care provider in accordance with Section 4(5) of this administrative regulation to ensure compliance with 45 C.F.R. 98.43(e); and

(b) Send notice in accordance with Section 4(5) of this administrative regulation if:

1. Another state provides requested background check results at a later date; and

2. A disqualifying background check result is identified.

(5) A child abuse and neglect central registry check in accordance with 922 KAR 1:470 may be requested by a:

(a) Parent or legal guardian in accordance with KRS 199.466; or

(b) Child care staff member in another state.

5.4.2 A child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective child care staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter. A prospective child care staff member may begin to work on a provisional basis for a child care provider after completing either a Federal Bureau of Investigation (FBI) fingerprint check or a search of the state/territory criminal registry or repository using fingerprints (in the state/territory where the staff member resides. However, the child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

5.4.3 Does the state/territory allow prospective staff members to begin work on a provisional basis (if supervised at all times) after completing the FBI fingerprint check or a fingerprint check of the state criminal registry or repository in the state where the child care staff member resides?

No.

Yes. Describe: 922 KAR 2:280 Section 3

A prospective staff member shall not be left unsupervised with a child in care pending the completion of the background checks in accordance with this administrative regulation; and be dismissed or relocated from the residence if the person is found to have a disqualifying background check result.

To assure timely processing of background checks and organize background checks of existing child care staff members, the cabinet shall prioritize the processing of background checks for an individual who is a:

- (a) New hire on or after April 1, 2018; or
- (b) Child care staff member before April 1, 2018, using the following schedule:

Background Check and Fingerprinting Month	Renewal Month of the Child Care Provider's License, Certification, or Registration
March 2018	June, July
April 2018	August
May 2018	September or October
June 2018	November or December
July or August 2018	January, February, or March
September 2018	April or May

- 5.4.4 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.
- 5.4.5 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)).

The Division of Child Care Core Services Section will respond to any written requests for searches of Kentucky's child abuse/neglect registry and the State Sex Offender Registry. Requests for a search of the State's criminal repository will be directed to Administrative Office of the Courts.

- 5.4.6 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)).

5.4.7 Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(h)?

No.

Yes. Describe: 922 KAR 2:280 Section 6 outlines all disqualifying offenses.

1. Meets a criterion specified in 45 C.F.R. 98.43(c);
2. Has been convicted of, or has entered an Alford plea, a plea of guilty, or a plea of nolo contendere to, a:
 - a. Drug-related felony, and five (5) years has not elapsed since the person was fully discharged from imprisonment, probation, or parole;
 - b. Sex or violent crime pursuant to KRS 17.165; or
 - c. A felony offense under:
 - (i) KRS Chapter 506, inchoate offenses;
 - (ii) KRS Chapter 511, burglary and related offenses;
 - (iii) KRS Chapter 515, robbery;
 - (iv) KRS Chapter 520, escape and other offense related to custody;
 - (v) KRS Chapter 525, riot, disorderly conduct, and related offenses;
 - (vi) KRS Chapter 527, offense relating to firearms and weapons;
 - (vii) KRS Chapter 529, prostitution offenses; or
 - (viii) KRS Chapter 530, family offenses;
3. Is listed on the:
 - a. Central registry established in accordance with 922 KAR 1:470; or
 - b. Another state's state-based child abuse and neglect registry or database;
4. Has been convicted of, or has entered an Alford plea, plea of guilty, or a plea of nolo contendere to, an offense under a criminal statute of the United States or of another state similar to an offense specified in this paragraph;
5. Has an open warrant;
6. Has a criminal background check result indicating that the individual should be approached with caution by authorities;

5.4.8 The state/territory has a process for a child care staff member to appeal 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)).

922 KAR 2:280 Section 7 Notice of a Disqualifying Background Check Result and Appeals.

Pursuant to 45 C.F.R. 98.43(e)(3), a prospective or current child care staff member who receives notice of having a disqualifying background check result in accordance with Section 6 of this administrative regulation may:

(a) Challenge the accuracy of the cabinet's determination by submitting a written request for informal review, including any information the individual wishes to be considered, to the Department for Community Based Services, Division of Child Care, 275 East Main Street, 3C-F, Frankfort, Kentucky 40621, within ten (10) calendar days of the date of notice in accordance with subsection (1) of this section; or

(b) Request a rehabilitative review pursuant to Section 9 of this administrative regulation.

(4) Upon completion of an informal review upon request pursuant to subsection (3)(a) of this section, the cabinet shall provide written notice of the cabinet's decision to uphold or rescind the notice of disqualifying background check result to the prospective or current child care staff member.

(5) A prospective or current child care staff member may appeal the results of an informal review or a rehabilitative review pursuant to Section 9 of this administrative regulation and 45 C.F.R. 98.43(e)(3), in accordance with 922 KAR 2:260.

(6) If a prospective or current child care staff member wishes to challenge the accuracy of a criminal background check, the cabinet shall refer the individual to the appropriate state or federal law enforcement agency.

(7) If a prospective or current child care staff member challenges the finding that he or she is the true subject of the results from a registry or repository check, the cabinet shall refer the individual to the agency responsible for maintaining the registry or repository.

- 5.4.9 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)).

922 KAR 2:280 Section 4. Procedures and Payments

In accordance with KRS 199.8965(8), 336.220, and 45 C.F.R. 98.43(f), a child care provider shall submit payment via credit or debit card for a state and national fingerprint-supported criminal history background check performed by the Department of Kentucky State Police (KSP) and the Federal Bureau of Investigation (FBI), including the rap back system. If a child care staff member's rap back has not expired, a new fingerprint check shall not be needed.

(b) A child care provider enrolled in the Kentucky NBCP shall pay a fee not to exceed twenty-five (25) dollars in addition to any fees charged in accordance with paragraph (a) of this subsection for the actual cost of processing a fingerprint-supported state and national criminal background check and for providing rap back services.

(3) To the extent funds are available, the:

(a) Race to the Top-Early Learning Challenge Grant in accordance with Pub. L. 112-10 shall cover the cost of background checks performed in accordance with subsection (1) of this section until close of the grant or exhaustion of grant funds, whichever occurs first; or

(b) Cabinet shall absorb, in whole or in part, fees using funding in accordance with 42 U.S.C. 9857-9858q.

(4)(a) Upon submission of payment in accordance with subsections (2) and (3) of this section, the child care provider shall print a copy of the DCC-504, Applicant Child Care Staff Member Live Scan Fingerprinting Form, from the NBCP portal and provide the form to the child care staff member.

5.4.10 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 relatives, as defined by CCDF, must meet. *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.

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)). 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 Describe how the state/territory developed its training and professional development. Each State or Territory must describe their professional development framework for training, professional development, and post-secondary education, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care. 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. Describe how the state/territory's framework for training and professional development addresses the following required elements:

- State/territory professional standards and competencies. Describe:
The Kentucky Early Childhood (EC) Core Content is defined as the specific knowledge, competencies, and characteristics needed by early childhood practitioners to work effectively with young children and families. EC Core Content is the foundation for determining training content, college coursework content, and competency standards for professional performance. The EC Core Content includes seven essential competency subject areas of early childhood education that are organized into five levels of increasing mastery. Individuals planning early childhood education and training programs can use the EC Core Content to correlate program content with the expected skill levels and desired competency outcomes of the participants. The Kentucky Professional Development Framework can be found at <http://bit.ly/2FQgl8g>
- Career pathways. Describe:
The Kentucky Professional Development (PD) Framework includes a mechanism for linking various EC training and education programs, allows for multiple pathways for entering EC education, and promotes and supports continuous professional development. The EC core competencies are organized from basic to high-level skills across five levels that build on each other with increasing knowledge and skills attained at each level.
- Advisory structure. Describe: The Governor's Office of Early Childhood Professional Development Sub-Committee is charged with formulating and submitting recommendations to the Early Childhood Advisory Council (ECAC) for professional development to support and promote quality standards, while responding to federal and state mandates and increasing capacity through workforce development. This Committee includes representation from the DCC, the state's professional ECE registry, the Child Care Resource and Referral Network, and other system-level partners that represent early childhood projects and initiatives.

- **Articulation. Describe:** The PD Framework includes a process which blends the system for credentialing and training of early childhood professionals. It includes five levels of competency, each of which articulate into the next level. At lower levels of competency, the completion of a particular credential, program, or certificate can be transferred into college credit between secondary schools, community and technical colleges, training programs, and four-year institution Interdisciplinary Early Childhood Education programs of study.
- **Workforce information. Describe:** The Child Care Resource and Referral Network conducts a workforce study that collects and analyzes child care provider educational preparation, experience, professional development, wages, benefits, and retention efforts. Findings are used to inform policy and promote quality improvement.
- **Financing. Describe:** Based on annual availability of funds, early childhood development scholarships, incentives, and related expense reimbursement is available to support programs seeking accreditation (e.g., NAEYC, NAFCC, and COA) and individual providers pursuing credentials and degrees.

The following phrases 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:
Kentucky's ECE credentialed trainers design and deliver state-approved high quality professional development that results in the transfer of knowledge to promote quality and support better outcomes for children and families. Professional development activities delivered by non-credentialed trainers are submitted to DCC for review and approval. The Early Care and Education Training Records Information System (ECE-TRIS) provides a centralized database to track and store individual training records for early care and education professionals. ECE-TRIS is free to providers and supports DCC in meeting regulatory requirements and managing professional development data. (<http://tris.eku.edu/ece>).
- Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework. Describe:
Higher education representatives participate in the Governor's Office of Early Childhood Professional Development Sub-Committee to formulate and submit recommendations to the Early Childhood Advisory Council (ECAC) for professional development. The Child

Care Resource and Referral Network collaborates with higher education to support providers participating in early care and education programs of study.

Other. Describe:

- 6.1.2 Describe how the state/territory developed its training and professional development requirements in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or with another state or state-designated cross-agency body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.

The Kentucky Early Childhood Professional Development (PD) Framework has been endorsed by the ECAC, which is the state authority charged with coordination and collaboration of a high-quality system of early care and education.

- 6.1.3 Identify how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)). Check and describe all that apply.

- Financial assistance to attain credentials and post-secondary degrees. Describe:

Based on annual available funding, the Early Childhood Development Scholarship provides financial assistance to individuals pursuing credentials and degrees through college and non-college programs of study. Incentives for milestones and education related expenses are also available as funds permit.

- Financial incentives linked to educational attainment and retention. Describe:

Based on available funding, financial incentives awarded for attainment of credentials and degrees. Related educational reimbursement is also provided as funding permits.

- Financial incentives and compensation improvements. Describe:

- Registered apprenticeship programs. Describe:

- Outreach to high school (including career and technical) students. Describe:

The Division of Child Care and the Child Care Resource and Referral Network collaborates with the Kentucky Department of Education to coordinate and deliver the Secondary Education ECE Career and Technical Program which allows students to graduate career ready through the completion of a planned program of instruction.

- Policies for paid sick leave. Describe:

Kentucky's Quality Rating Improvement System (Kentucky All-STARS) promotes standards of quality that include paid sick leave as a best Administrative and Leadership practice.

- Policies for paid annual leave. Describe:

Kentucky's Quality Rating Improvement System (Kentucky All-STARS) promotes standards of quality that include paid annual leave as a best Administrative and Leadership practice.

Policies for health care benefits. Describe:

Kentucky's Quality Rating Improvement System (Kentucky All-STARS) promotes standards of quality that include health care benefits as a best Administrative and Leadership practice.

Policies for retirement benefits. Describe:

Kentucky's Quality Rating Improvement System (Kentucky All-STARS) promotes standards of quality that include retirement benefits as a best Administrative and Leadership practice.

Support for providers' mental health, such as training in reflective practices and stress-reduction techniques and health and mental health consultation services. Describe:

Other. Describe:

6.2 Training and Professional Development Requirements

The state/territory must develop training and professional development requirements, including pre-service or orientation training (to be completed within 3 months) and ongoing requirements designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF 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 requirements (98.44(b)(2)(ii)).

The Division of Child Care developed and approved orientation curriculum, which is revised as needed to support adherence to current regulatory requirements. The curriculum addresses core competencies in the area of Health, Safety, and Sanitation; Child Abuse and Neglect; and Developmentally Appropriate Child Care Practices. This training is delivered by approved ECE credentialed trainers. Child Care Health Consultants (e.g., Registered Nurses, Health Educators, and Early Childhood Mental Health Specialists) are available for program and child-level consultation regarding specific issues including, but not limited to, health, nutrition, social, emotional, and behavioral health needs.

6.2.2 Describe how the state/territory's training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)). N/A

6.2.3 Describe how the state/territory will recruit and facilitate the participation of providers with limited English proficiency and persons with disabilities (98.16(dd)).

The Division of Child Care through contractual services provided by Child Care Resource and Referral Network, and in consultation with the Cabinet for Health & Family Services (CHFS) Office of Human Resource Management Language Access Program and the Human Development Institute, provide regional coaching, technical assistance, and resources to support providers with limited English proficiency and persons with disabilities.

6.2.4 If the Lead Agency provides information or services to providers in other non-English languages, please identify the three primary languages offered or specify that the State has the ability to have translation/interpretation in primary and secondary languages.

The CHFS Office of Human Resource Management Language Access Program provides accurate, quality interpretation services for providers predominantly in Spanish and other Indo-European languages identified through a statewide assessment. In addition, information is available to families through the Benefind system, in the top eight most common languages spoken in Kentucky, other than English.

6.2.5 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 Division of Child Care, through contractual services provided by Child Care Resource and Referral Network of Services, provide regional coaching, technical assistance, and resources to support providers who care for children receiving child care subsidies, including children of different age groups. State approved training agencies and independent credentialed trainers develop and deliver training based on early care core content that equips providers to respond to the unique needs of these children and their families.

6.2.6 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving homeless children and families (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).

Priority status is applied to identify homeless children and families to ensure compliance with this provision of the law. Homeless policies and procedures for prioritizing access to child care for homeless children and families through coordination of services ensuring

families have information on all available programs and services, such as HANDS, Head Start, and child mental health and other appropriate services.

- b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving homeless children and their families (connects to question 3.2.2).

The Division of Child Care, through contractual services provided by the Child Care Resource and Referral Network, provides regional coaching, technical assistance, and training to support the needs of providers serving children experiencing homelessness and their families. These resources and relevant trainings are based on consultation with the state McVinney-Vento Coordinator for Homeless Education.

- 6.2.7 The 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
- The type of check-ins, including the frequency. Describe:
- Other. Describe: Child Care Aware Network of Services Coaches conduct follow-ups with providers for TA and Training to providers ensure program integrity and accountability.

- 6.2.8 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) Identify the strategies that the state/territory is developing and implementing for training and TA.

The Division of Child Care, through contractual services provided by the Child Care Resource and Referral Network of Services, provides regional coaching, technical assistance, and resources to support prospective and current child care providers. A DCC developed and approved training is delivered by coaches as a requirement of licensure. This training includes information pertinent to the successful operation of a child care program to deliver quality child care.

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 Early Childhood Advisory Council (ECAC), Division of Child Care (DCC), Child Care Resource and Referral Network of Services, and Kentucky Department of Education (KDE), in collaboration with other ECE system-level partners, continuously monitor early learning standards to ensure alignment with evidence-based practices that promote quality and support better outcomes for children and their families.

b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry.

The Kentucky Early Childhood standards are designed as a framework to assist parents, early care, intervention, and education professionals, administrators, and others in understanding what children are able to know and do from birth through four years of age.

- c) Check the domain areas included in the state/territory's early learning and developmental guidelines. Check all that apply.

- Cognition, including language arts and mathematics
- Social development
- Emotional development
- Physical development
- Approaches toward learning
- Other. Describe: **Communication**

- 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 other state or state-designated cross-agency body if there is no SAC.

The Cabinet for Health and Family Services (CHFS), the Kentucky Department of Education (KDE), Child Care Resource and Referral Network of Services, and the Early Childhood Advisory Council (ECAC) along with other partnerships with public and private organizations ensure dissemination across various disciplines and agencies.

- 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.

The Cabinet for Health and Family Services (CHFS) works to ensure early learning and developmental guidelines are continuously updated and maintained based on current evidence based practices.

- f) Provide the Web link to the state/territory's early learning and developmental guidelines.

<https://kidsnow.ky.gov/families/readiness/Pages/standards.aspx>

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.

Kentucky's Early Childhood Standards and research-based indicators were used to develop and expand the unified five-star quality rating and improvement system serving all early care and education programs – including childcare centers, Head Start and public preschool – that receive public funding

- 6.3.3 If quality funds are used to develop, maintain, or implement early learning 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)).

Kentucky's credentialed trainers provide Kentucky Early Learning Guidelines (ELG) training to child care providers across the state. Child care providers training records are tracked in ECE-TRIS (Early Care and Education Training Records Information System) which provides training data for analysis to evaluate training progress in relation to change in the providers Kentucky All STARS TQRIS level.

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)).

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)).

The current Kentucky's STARS for Kids Now 4 STAR rating system is in transition to Kentucky All STARS expanded five-star tiered quality rating and improvement system. The unified system serves all early care and education programs that receive public funding including child care centers, Head Start and public preschool recognizes programs that have made a commitment to continuous quality improvement.

Kentucky analyzes program data quarterly from an initial rating to track movement between quality levels to determine the penetration rates, across the state.

- 7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.

Governor's Office of Early Childhood (GOEC) contracted with an independent evaluation and research group to conduct the validation study of All STARS, Kentucky's 5-level Quality Rating and Improvement System. The goal of the validation study is to assess the extent to which Kentucky's five rating levels capture meaningful differences in quality and performance.

The findings from the validation study will be useful for improving program areas, informing decisions and validate program effectiveness of Kentucky All STARS standards and domains of the hybrid tiered five (5) level rating system.

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
- 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
- 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
- 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
- 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
- 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

- 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
- 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
- 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
- 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

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.

DCC supports and promotes best practices in professional development and associated activities (e.g., training, quality assurance, etc.), through contractual agreements with the University of Kentucky's employment of Content Coordinators (CCs). These CCs provide recommendations that guide the development and delivery of training and support the establishment of a trained cadre of credentialed trainers. DCC also contracts with Eastern Kentucky University to manage the Cabinet-approved early care and education training record information system (ECE-TRIS) that maintains data regarding child care providers' professional development. DCC has an informal relationship with training agencies throughout the state that deliver training to child care providers in local communities.

- 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:

The Cabinet for Health and Family Services Department of Community Based Services and the Child Care Aware CCR&R Network of Services Coaches are available to assist providers in assessing needs and match them with resources, which are provided in face to face, online, and via hybrid training options.

Connect the Dots is a joint collaboration between multiple early education and behavioral health professionals across Kentucky. This collaboration addresses the need for a high impact skills- based training for early childhood professionals teaching the basics of social emotional best practices. There are three modules: one for Preschool teachers, one for Infant-Toddler, and for parents.

- 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 5 for such behaviors. (See also section 2.5.) Describe:

The Child Care Resource and Referral Network Regional Coaches are available to all Licensed and Certified child care providers with assistance on the early learning and development of children birth through school age to reduce challenging behaviors .

- 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:

Kentucky Strengthening Families (KYSF) represents a multi-disciplinary partnership between state and local, and public and private organizations dedicated to embedding six research-based Protective Factors into services and supports for children and their families. Supporting families is a key strategy for promoting school readiness and preventing child abuse and neglect. All families experience times of stress, and research demonstrates that children grow and learn best in families who have the supports and skills to deal with those times. By supporting families and building their skills to cope with stressors, we can increase school readiness and reduce the likelihood abuse that may occur in families.

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:
Kentucky's early care and education professional development system is the foundation of developing and maintaining a qualified workforce across the commonwealth. Composed of high school graduates who earn their credentials within Family and Consumer Sciences Early Care and Education Coursework, college graduates with certification as well as those who entered the field from non-related fields. On-going professional development allows workers to move through this career lattice and obtain their long-term goals in the field of early care and education.

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:
The Cabinet for Health and Family Services coordinates with the Department for Public Health to develop and disseminate training and technical assistance to practitioners on the local level to promulgate effective evidence based practices and comprehensive services to children in child care settings. Parental engagement is a key component in this work. This is an agency internal to CHFS.

Using data to guide program evaluation to ensure continuous improvement. Describe:
Across (8) eight regional Child Care Aware Training Coaches monitor trainings offered in their area to ensure professional development opportunities are available that cover all core content subject areas and levels that allow child care providers to readily attain relevant, quality training to meet child care regulatory requirements. These activities tracked through ECE-TRIS (Early Care and Education Training Records Information System), the CHFS designated database for all Early Care and Education practitioners in the state. Training Coaches submit quarterly gap analyses to set training priorities for each region to the Regional Child Care Administrators for evaluation and project planning.

Data from providers' environmental rating visits is also used to guide quality improvement efforts.

Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe:
Regulations governing CCAP require participation in the Kentucky All STARS Tiered Quality Rating and Improvement System. As community-based child care providers migrate to the new Tiered Quality Rating and Improvement System, Kentucky's Child Care Aware CCR&R Network of Services utilize Coaches and specialists to provide

access to training and skill development, analysis of geographic areas identified as child care deserts in effort to increase access to quality child care services.

Caring for and supporting the development of children with disabilities and developmental delays. Describe:

Child Care providers receive screening and assessment training, which provides families access to identify potential development issues for referral to early intervention system for available services to children with developmental disabilities or delays.

Supporting the positive development of school-age children. Describe:

The Division of Child Care in collaboration with Kentucky Strengthening Families (KYSF) support and promote the embedding six research-based Protective Factors into services and supports for children and their families. Supporting families is a key strategy for promoting positive development of school-age children to during times of stress, and providing skills to deal with those times.

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.

DCC conducts monthly and quarterly analysis of child care programs movement in Kentucky All STARS TQRIS to measure progress of movement in rating level based on review of the domains and standards accessed by providers. Significant progress has been made in supporting providers to move to high quality during the pilot phase of the new QRIS, now exceeding 45% of providers at the high quality levels which was the goal of the grant initiative.

7.4 Quality Rating and Improvement System

7.4.1 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.

7.4.2 Does your state/territory have a quality rating and improvement system?

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.

Kentucky All STARS developed and implemented with Race to the Top Early Learning Challenge funds and will replace STARS for Kids Now, Kentucky's QRIS since 2001, on April 15, 2018. This QRIS is administered by the Division of Child Care with technical assistance provided through contract with the University of Kentucky. www.kentuckyallstars.ky.gov

- 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.
- If Yes, 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.
- No, but the state/territory is in the QRIS development phase.
- No, the state/territory has no plans for QRIS development.

7.4.3 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 at any level is satisfactory for providers of children receiving subsidy. However, providers who participate at higher quality, Level 3-5, receive additional quality initial and annual incentive payment calculated by percentage of enrolled subsidy children compared to center capacity.

- Initial Achievement Award for a first time provider for achieving a Kentucky All STARS Rating.

- Annual Achievement Award for a provider who maintains a Kentucky All STARS Rating (Level 3 – 5). Eligibility for award is determined during Licensure Anniversary Month.
- Additional quality incentives for high quality providers serving children in the subsidy program.

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:

7.4.4 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 7.4.7.

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).
- Other. Describe:
- None.

7.4.5 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:
 - Not linked.

7.4.6 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:
- None

7.4.7 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. **Describe:**

Data analysis include measuring and evaluating program's standards and environmental rating scales and comparing to the movement between TQRIS levels.

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.

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.

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:

Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe:

Training topics, specific to developmentally appropriate practices of infant and toddler conducted in collaboration with regional training agencies and statewide credentialed trainers. Child Care Aware collaborates with the Governor's Office of Early Childhood to host

infant toddler related sessions at their annual Early Childhood Institute and at a potential 2019 Infant Toddler Institute.

- 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: **Child Care Aware Quality Coaches trained in infant-toddler recommended practice and reliable on the Infant Toddler Environment Rating Scale provide ongoing technical assistance to providers on quality infant-toddler care.**
- 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: **QRIS Rating staff reliable on various scales including the Infant/Toddler Environment Rating Scale (ITERS-R) use this scale during an environment-rating visit. The results of the environment rating scale(s) and level requirements determine the program approved level. In addition, data indicates that infant-toddler ratios are lower at higher levels of quality.**
- 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: **Consumer education materials geared towards the specific needs infants, toddlers and their families are available in hard copy brochures and on the Child Care Aware website.**
- 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:
- 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 Kentucky Early Care and Education Training Records Information System (ECE-TRIS) provides detailed reports of the number of providers trained in early learning standards, infant and toddler and related topics, number of trainings offered, and number of active trainers across the state.

The Kentucky Integrated Child Care System identifies and tracks all staff working in a licensed, certified child care facility.

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.

Data analysis assists in identification of trends and progress in program areas to assist management with regulatory and programing decisions. Data analyzed for trends and measures of progress may include number of families and children served by type of provider, review of demographic location, type of care such as non-tradtional hours and care for special needs. Census data may also be used in conjunction with provider data to determine areas of greatest need for recruitment of additional child care providers. Measurable outcomes can be established based on identified needs, and progress toward outcome attainment then measured accordingly. Kentucky captures data from various sources such as:

- Kentucky Integrated Child Care System
- Benefind – Assistance & Support Programs for Kentuckians
- Kentucky Early Care and Education Training Records Information System (ECE-TRIS)
- eMARS - Enhanced Management Administrative Reporting System

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:

Health and Safety Coaches provide technical assistance to child care providers around regulatory compliance and work with Level 1 and 2 programs in Kentucky's QRIS system.

Coaches assist providers in preparing for annual licensing and certification inspections and provide technical assistance on Plan of Corrections to statement of deficiency found during inspection. Health and Safety Coaches will locate training when requested by the providers to address health and safety issues. Coaches follow standards for inspection and monitoring for consistent technical assistance delivery across the state.

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:

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.

Measurable indicators of progress relevant to the use of funds for technical assistance and coaching would include analysis of licensing data regarding deficiencies, and progress of providers in increasing quality level in the state's QRIS.

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 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.

Quality Rating staff who are reliable on ITERS-R, ECERS-R, ECERS-3, SACERS-U, and FCCERS-R use these scales to measure the level of quality in these environments. Providers receive a score, which factors into their final QRIS rating level.

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 within the state/territory and the data on the extent to which the state or territory has met these measures.

Measurable indicators of progress include increased number of providers at the high quality levels in the QRIS. Aggregate data from the environmental ratings can also be used to measure trends in quality.

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. 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.

The Division of Child Care administers grants to support programs seeking accreditation from the Council on Accreditation, National After-School Association, National Association for the Education of Young Children, and the National Association for Family Child Care. Child Care Aware Professional Development Coaches are available to provide technical assistance to child care programs preparing for accreditation.

Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide. Describe:

No, but the state/territory is in the accreditation development phase.

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.

Measurable indicators of progress include compilation of data on use of this type of assistance, as well as data on number of providers achieving accreditation.

7.10 Program Standards

7.10.1 How does the state/territory support state/territory or local efforts to develop or adopt high-quality program standards relating to:

Health. Describe the supports:

The Lead Agency in collaboration with Early Childhood Development Branch provides active leadership in achieving the health goals of the state's early childhood initiatives through HANDS (Health Access Nurturing Development Services), CCHC Child Care Health Consultation for Healthy Start in Child Care, ECMH Early Childhood Mental Health, and First Steps - Kentucky's Early Intervention System.

Mental health. Describe the supports:

Early Childhood Mental Health (ECMH) specialists are responsible for the oversight of services and supports for children and youth who have or are at-risk of developing

behavioral health concerns (including both mental health and substance use), and their families. This includes assisting child care providers and families with accessing training and coaching in a variety of evidence- based and promising approaches.

Nutrition. Describe the supports:

Child Care Health Consultants (CCHC's) provide consultation on health, safety and nutrition to child care providers. Trained child care consultants from the local health departments participate in joint activities with the Child Care Aware Network of Services located in their area to ensure collaboration and coordination regarding health, safety and nutrition issues affecting the quality of child care.

Physical activity. Describe the supports:

Licensed Type I and Type II facilities are required as a condition of licensing to maintain either an indoor or outdoor gross motor space, which allows each child a minimum of 60 square feet of play space for large muscle activities. In addition, Licensed Type I, Licensed Type II and certified family child care homes are required to develop and post a daily schedule and weekly lesson plan for each age group, which includes gross motor play. The OIG-Division of Regulated Child Care conducts annual licensing surveys to ensure providers are meeting regulatory requirements.

Physical development. Describe the supports:

The Kentucky Health Access Nurturing Development Services (HANDS) program is a voluntary home visitation program for any new or expectant parents. HANDS support families as they build healthy, safe environments for the optimal growth and development of children.

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.

Data regarding each of these standards and supports can be analyzed for trends and to determine progress in these areas.

7.11 Other Quality Improvement Activities

7.11.1 List and describe any other activities that the state/territory provides to improve the quality of child care services, which may include consumer and provider education activities, and describe the measureable indicators of progress 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. _____

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.

8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

8.1.1 Describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program are informed and trained regarding program requirements and integrity. Check all that apply.

Issue policy manual

Issue policy change notices

Staff training. Describe:

The Cabinet and Department design training to equip and support staff with the knowledge, skills and professionalism necessary to provide high quality services to families and children within the Commonwealth while adhering to program, regulatory requirements and integrity.

Ongoing monitoring and assessment of policy implementation. Describe:

Management along with program staff routinely assess program policy changes by analyzing data reports, program trends, and public and provider communications.

Other. Describe:

8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices follow generally accepted accounting principles (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, including the following:

Verifying and processing billing records to ensure timely payments to providers. Describe:

The Provider Billing form is system generated and submitted electronically or mail by approved providers for prior month child care services.

The payment section staff process provider-billing payments for the prior month after the 1st day of each month, within ten (10) calendar days of receipt. The timeframe for issuance

of payment reference to KRS Chapter 45.453 Budget and Financial Administrations, Time Period for Payment.

Providers shall receive payment within thirty (30) working days of processing the PBF, except when there are payment discrepancies in the payment amount billed and the amount owed to the provider. In these instances, the Cabinet is not held to the thirty (30) day timeperiod for payment.

Fiscal oversight of grants and contracts. Describe:
The Division of Administration and Financial Management (DAFM), Policy and Program Administration Branch is responsible for fiscal oversight and monitoring of grants and contracts. DAFM administers the Personal Service Contracts (PSC's), Memorandum of Agreements (MOA's), and Memorandum of Understandings (MOU'S); development and issuance of competitive solicitations or RFP's; contract monitoring functions; coordination of federal formula and block grant applications and their electronic archiving; and review of OMB A-133 audit reports from sub recipients of federal funds.

Tracking systems to ensure reasonable and allowable costs. Describe:
The Division of Administration and Financial Management (DAFM) budget staff is responsible for the compilation and submission of the biennial budget for grant programs; monthly monitoring of financial activity; budget modifications and realignments; and contract funding verification.

Other. Describe:

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Activities can include, but are not limited to, the following:

Conduct a risk assessment of policies and procedures. Describe:

Establish checks and balances to ensure program integrity. Describe:

Use supervisory reviews to ensure accuracy in eligibility determination. Describe:
The Child Care Eligibility determination transitioned to benefind online system October 1, 2017. Benefind allows Kentucky's families to easily access public assistance benefits and information 24/7 through an online application and account.

To ensure accuracy in eligibility determination, cases processed by eligibility worker without case decision requires supervisor review. Program policy requires random case reviews to ensure eligibility determination guidelines are applied consistently.

Other. Describe:

8.1.4 Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include intentional and unintentional client and/or provider violations, as defined by the Lead Agency. Administrative errors refer to areas identified through the error-rate review process. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

a) Check which activities that the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.

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)).

Run system reports that flag errors (include types). Describe:

Flag errors fall into one (1) of three (3) categories:

- Intentional Program Violation (IPV)
- Agency Error (AE)
- Inadvertent Error (IE)

Random monthly case reviews conducted to identify potential errors in addition to reports ran to track number of IPV, AE and IE completed each month and annually.

Intentional Program Violation (IPV) - occurs when the claim established by admission, hearing, or a court of law.

This includes claims caused by:

- Misrepresentation of information by making a false statement either orally or in writing to obtain or attempt to obtain services or payments for which they are not eligible;
- Concealment of information to obtain services or payments to which they are not eligible;
- Deliberately withheld information for accurately determine eligibility;
- Deliberate failure to report a change timely in order to continue to receive services to which they are not entitled;
- Falsification or alteration of documents to obtain services or payments not entitled.

Review enrollment documents and attendance or billing records.

Conduct supervisory staff reviews or quality assurance reviews.

Audit provider records.

Train staff on policy and/or audits.

Other. Describe:

b) Check which activities the Lead Agency has chosen to conduct to identify administrative 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).

Run system reports that flag errors (include types). Describe:

Administrative errors are flagged in system reports as Agency Error (AE).

Agency error occurs because of staff action or inaction on a case.

Agency errors causes:

- Worker failed to take prompt action on a reported change.
- Incorrectly computed income due to inadvertent entry error.
- Policies, rules or statutes not applied correctly by worker.

Review enrollment documents and attendance or billing records.

Conduct supervisory staff reviews or quality assurance reviews.

Audit provider records.

Train staff on policy and/or audits.

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. Check and describe any activities that the Lead Agency uses to investigate and recover improper payments due to program violations or administrative errors, as defined by your state/territory.

a) Check activities that the Lead Agency uses to investigate and recover improper payments due to intentional program violations or fraud. 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: **\$25.00**

Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Recover through repayment plans.

Reduce payments in subsequent months.

Recover through state/territory tax intercepts.

Recover through other means.

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Other. Describe:

- b) Describe the results of the Lead Agency activities regarding the investigation and recovery of fraud or intentional program violations.

Once a potential claim is identified, secure all verifications to complete the calculation of the overpayment. If the claim is over \$5000 and suspected fraud, the case is referred to OIG and the worker takes no further action.

- c) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. 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: **\$25.00**
- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).
- Recover through repayment plans.
- Reduce payments in subsequent months.
- Recover through state/territory tax intercepts.
- Recover through other means.
- Establish a unit to investigate and collect improper payments. Describe:
- Other. Describe:

- d) Check any activities that the Lead Agency will use to investigate and recover improper payments due to administrative errors.

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: **\$25.00**
- Coordinate with and refer to the other state/territory agency(ies) (e.g., state/territory collection agency, law enforcement agency).
- Recover through repayment plans.
- Reduce payments in subsequent months.
- Recover through state/territory tax intercepts.
- Recover through other means.
- Establish a unit to investigate and collect improper payments and describe the composition of the unit below.
- 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?

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

In accordance with 922 KAR 2:020, the cabinet initiates an administrative disqualification hearing upon the establishment of an Intentional Program Violation (IPV). The recipient household may attend with representation. All substantiated IPV's are subject to the following disqualification periods from Child Care Assistance Program:

1. Three (3) months disqualification for a first occurrence of IPV;
2. Six (6) months disqualification for a second occurrence of IPV; and
3. Permanent disqualification for a third occurrence of IPV.

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

Providers are subject to the same administrative hearing/appeal rights and disqualification periods as recipients.

In accordance with 922 KAR 2:020, the cabinet initiates an administrative disqualification hearing upon the establishment of an Intentional Program Violation (IPV). The provider may attend with representation. All substantiated IPV's are subject to the following disqualification periods from Child Care Assistance Program:

1. Three (3) months disqualification for a first occurrence of IPV;
2. Six (6) months disqualification for a second occurrence of IPV; and
3. Permanent disqualification for a third occurrence of IPV.

- Prosecute criminally.

- Other. Describe:

Certification(s) and Assurance(s) are completed upon official federal submission. These documents were not made available in the preprint of the state plan.