



**Child Care and Development Fund (CCDF) Plan**

**for**

**State/Territory New York State**

**FFY 2016-2018**

This Plan describes the CCDF program to be administered by the State/Territory for the period 6/1/2016 – 9/30/2018. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

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

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## Introduction and How to Approach Plan Development

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

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

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

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

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

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

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

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

**CCDBG Implementation Deadlines.** In some cases, the CCDBG Act of 2014 specifies a particular date when a provision is effective. Where the law does not specify a date, the new requirements became effective upon the date of enactment and States/Territories have until September 30, 2016 to implement the new statutory requirement(s). ACF has determined that when a State or Territory cannot certify compliance with a specific requirement at the time of CCDF plan submission (March 1, 2016), the grantee must provide a State/Territory-specific implementation plan for achieving compliance with such provision(s). The implementation plan must provide sufficient information to support approval of the Plan for funding.

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

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

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

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

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

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

**CCDF Plan Submission.** States and Territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions in the ACF-118 site may be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities (see <http://www.section508.gov/> for more information). Until the final draft is approved, States and Territories may use the draft CCDF Plan preprint templates as they work to implement the new law.

In responding to questions, States and Territories are asked to provide brief, specific summary text and/or bullet points only. Do not use tables or copy and paste charts, attachments or manuals into the Plan.

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

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

## **1 Define CCDF Leadership and Coordination with Relevant Systems**

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

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

### **1.1 CCDF Leadership**

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable

Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E(c)(1))

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

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

Name of Lead Agency: New York State Office of Children and Family Services

Address of Lead Agency: 52 Washington St., Rensselaer, NY 12144

Name and Title of the Lead Agency Official: Sheila J. Poole, Acting Commissioner

Phone Number: (518) 474-6666

E-Mail Address: [Sheila.Poole@ocfs.ny.gov](mailto:Sheila.Poole@ocfs.ny.gov)

Web Address for Lead Agency (if any): [www.ocfs.ny.gov](http://www.ocfs.ny.gov)

1.1.2 Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information.

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: Janice M. Molnar, Ph.D.

Title of CCDF Administrator: Deputy Commissioner, Division of Child Care Services

Address of CCDF Administrator: 52 Washington Street, Room 309S, Rensselaer, NY 12144

Phone Number: (518) 474-9454

E-Mail Address: [janice.molnar@ocfs.ny.gov](mailto:janice.molnar@ocfs.ny.gov)

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

Name of CCDF Co-Administrator: N/A

Title of CCDF Co-Administrator: N/A

Phone Number: N/A

E-Mail Address: N/A

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any): (518) 474-9454

Web Address for CCDF program (for the public) (if any):

<http://ocfs.ny.gov/main/childcare/default.asp>

Web address for CCDF program policy manual: (if any):

<http://ocfs.ny.gov/main/policies/external/>

<http://ocfs.ny.gov/main/childcare/stateplan/default.asp>

Web address for CCDF program administrative rules: (if any):

[http://ocfs.ny.gov/main/childcare/daycare\\_regulations.asp](http://ocfs.ny.gov/main/childcare/daycare_regulations.asp)

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

Outreach and Consumer Education (section 2):

- Agency/Department/Entity: New York State Office of Children and Family Services, Division of Child Care Services, Regional Office Support Unit
- Name of Lead Contact: Kathleen Pickel

Subsidy/Financial Assistance (section 3 and section 4)

- Agency/Department/Entity: New York State Office of Children and Family Services, Division of Child Care Services, Child Care Subsidy Unit
- Name of Lead Contact: Rhonda Duffney

Licensing/Monitoring (section 5):

- Agency/Department/Entity: New York State Office of Children and Family Services, Division of Child Care Services, Regional Office Support Unit
- Name of Lead Contact: Kathleen Pickel

Child Care Workforce (section 6):

- Agency/Department/Entity: New York State Office of Children and Family Services, Division of Child Care, Regional Office Support Unit
- Name of Lead Contact: Kathleen Pickel

Quality Improvement (section 7):

- Agency/Department/Entity: New York State Office of Children and Family Services, Division of Child Care Services
- Name of Lead Contact: Janice Molnar

Grantee Accountability/Program Integrity (section 8):

- Agency/Department/Entity: New York State Office of Children and Family Services, Bureau of Audit and Quality Control
- Name of Lead Contact: Christopher Covas

## 1.2 CCDF Policy Decision Authority

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

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

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

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

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

State/Territory

County. If checked, describe the type of eligibility policies the county can set \_\_\_\_\_

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

Other. Describe: \_\_\_\_\_

Sliding fee scale is set by the:

State/Territory

County. If checked, describe the type of sliding fee scale policies the county can set: The local department of social services (LDSS) indicates the family share percentage it will use (10% to 35%). The state's sliding fee scale for the weekly family share of child care is calculated by applying the family share percentage to the excess of the family's gross annual income over the State Income Standard, divided by 52. LDSSs report their family share in their Child and Family Services Plan, which is submitted to the New York State Office of Children and Family Services (OCFS). The plan is a multi-year plan that is updated annually.

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

Other. Describe: \_\_\_\_\_

Payment rates are set by the:

State/Territory

County. If checked, describe the type of payment rate policies the county can set \_\_\_\_\_

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

Other. Describe: \_\_\_\_\_

Other. List and describe (e.g., quality improvement systems, payment practices) \_\_\_\_\_

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

a) Who determines eligibility?

CCDF Lead Agency

TANF agency. Describe. \_\_\_\_\_

Other State/Territory agency. Describe. \_\_\_\_\_

Local government agencies such as county welfare or social services departments. Describe: OCFS monitors how LDSSs administer the child care subsidy program through the Child and Family Services Plan, which is submitted to OCFS. This plan is a multi-year plan that is updated annually. Included in it is the requirement that LDSS commissioners sign assurances that their district will comply with all federal and state requirements related to CCDF. Regional trainings on the child care subsidy program requirements are given to eligibility workers and supervisors. Additionally, OCFS responds to problems and complaints as they come up.

Child care resource and referral agencies. Describe. Two of the state's 35 Child Care Resource and Referral (CCR&R) Agencies work on behalf of their respective LDSSs in doing initial eligibility assessment of prospective subsidy recipients.

Community-based organizations. Describe. \_\_\_\_\_

Other. Describe: \_\_\_\_\_

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

CCDF Lead Agency

TANF agency. Describe. \_\_\_\_\_

Other State/Territory agency. Describe. \_\_\_\_\_

Local government agencies such as county welfare or social services departments. Describe. LDSSs are required to give families who receive Temporary Assistance for Needy Families (TANF) and who are unable to locate child care that is appropriate and accessible, a list of names, addresses, and telephone numbers of eligible providers. LDSSs must provide all child care subsidy applicants with information about the various child care services available and the child care providers with which the LDSS has arrangements for the provision of child care services.

Child care resource and referral agencies. Describe. New York State's network of 36 CCR&Rs plays an extensive role in providing information and referral on a daily basis to parents. Information is provided through their websites, via phone calls, and at their offices.

Community-based organizations. Describe.

Other. Describe. OCFS maintains a Memorandum of Understanding (MOU) with the State University of New York and the City University of New York to subsidize child care services for low-income students enrolled in either of these two higher education systems. Further, through an MOU with the New York State Department of Agriculture and Markets, funds are provided to a network of child care agencies that serve the children of migrant workers and other farm workers. These entities assist parents in locating care.

c) Who issues payments?

CCDF Lead Agency

TANF agency. Describe. \_\_\_\_\_

Other State/Territory agency. Describe. \_\_\_\_\_

Local government agencies such as county welfare or social services departments. Describe. In New York State (NYS), the child care subsidy program is state supervised and locally administered. LDSSs issue payments. They then submit claims against their child care subsidy allocation to the NYS Office of Temporary and Disability Assistance. Payments to providers are made in accordance with the NYS market rate regulations, such that providers are paid for the cost of care up to the applicable market rate.

Child care resource and referral agencies. Describe.

Community-based organizations. Describe.

Other. Describe.

### 1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government. (658D(b)(2)) General purpose local governments is defined by the U.S. Census at [https://www.census.gov/newsroom/cspan/govts/20120301\\_cspan\\_govts\\_def\\_3.pdf](https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf)

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

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

[REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns Describe: OCFS emailed the January CCDF Plan Pre-Print to all LDSS commissioners and invited them to attend a phone conference to give them an opportunity to provide input, share comments and ask questions. On February 23, 2015, representatives from 17 LDSSs participated in the phone conference to discuss the Pre-Print and the new provisions set forth in the CCDBG Act of 2014. On May 7, 2015, at an in-person convening of LDSS commissioners, OCFS staff did a formal presentation on the provisions of the CCDBG Act and its assumed implications for New York State. On August 11, 2015, OCFS provided LDSS commissioners with an overview of the fiscal implications of the CCDBG Act, along with some proposed strategies for implementing the subsidy provisions of the law. Finally, on December 8, 2015, LDSS commissioners were once again asked for their input on the Lead Agency's proposed strategies.

On January 15, 2016, LDSSs were invited to testify at one of the state's three public hearings (January 26 in Albany, January 27 in Rochester, and January 29 in New York City), and/or to submit written comments directly to OCFS. On January 15, 2016, they were sent a link to the draft Plan.

[REQUIRED, IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe: New York State's Early Childhood Advisory Council (ECAC) meets on a quarterly basis. New York's Child Care Administrator made update presentations at each of the 2015 ECAC meetings (March 19, June 4, September 24, and December 10). In addition, on August 17, 2015, members of the ECAC or their designees participated in a CCDF Planning Day, during which attendees – through participation in four facilitated small-group sessions focused on four of the ECAC's working group topics (Promoting Healthy Development, Quality Improvement, Strong Families, and Workforce Development) – prioritized activities for inclusion in the NYS CCDF plan.

- If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?
  - Yes
  - No.
- If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy \_\_\_\_\_

[REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes. Describe, including which Tribe(s) you consulted with: Key elements of the Plan were presented to a delegation of tribal nation representatives at a Tribal Consultation meeting on May 21, 2015. Representatives from the Shinnecock Nation, Onondaga Nation and the Seneca Nation of Indians were present. One outcome of that meeting was to commit to deepening communication between the tribal nations and OCFS about child care issues (as described in 1.5.1).

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

State/Territory agency responsible for public education. Describe \_\_\_\_\_

State/Territory agency/agencies responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool). Describe \_\_\_\_\_

State/Territory institutions for higher education, including community colleges. Describe \_\_\_\_\_

State/Territory agency responsible for child care licensing. Describe: The CCDF Lead Agency is the State agency responsible for child care licensing.

State/Territory office/director for Head Start State collaboration. Describe: The New York Head Start Collaboration Director has shared resources that have been developed for Head Start programs that can be useful to local districts in their efforts to identify families who are homeless and to providers who serve children who are homeless. In addition, the Lead Agency and the Head Start Collaboration Director continue to work together on supporting implementation of the Early Head Start-Child Care Partnership grants.

State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe \_\_\_\_\_

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

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

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 \_\_\_\_\_

Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe. In New York State, Medicaid/EPSTD is administered by the New York State Department of Health, Office of Health Insurance Programs. OCFS has consulted with the New York State Department of Health regarding procedures for providing information on and referring families to existing resources and services related to Medicaid.

McKinney-Vento State coordinators for Homeless Education. Describe. OCFS has consulted with New York State's McKinney-Vento liaison to discuss how OCFS can best outreach and increase access to homeless children. Ideas were generated in order to prioritize homeless families for child care subsidies, and to help child care providers better meet the developmental needs of children who are homeless.

State/Territory agency responsible for public health. Describe \_\_\_\_\_

State/Territory agency responsible for mental health. Describe \_\_\_\_\_

State/Territory agency responsible for child welfare. Describe \_\_\_\_\_

State/Territory liaison for military child care programs. Describe. New York is one of 13 states participating in the U.S. Department of Defense Military Child Care Liaison Project. OCFS has met with the liaison assigned to New York to assist in identifying current state efforts, priorities, and quality initiatives that impact the ability of military families to access high quality of installation child care services in their communities. OCFS will collaborate with the liaison to coordinate efforts in the planning and development of priorities and quality initiatives of mutual interest.

State/Territory agency responsible for employment services/workforce development. Describe \_\_\_\_\_

State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe. OCFS shared the CCDF draft pre-print with the New York State Office of Temporary and Disability Assistance (OTDA). OTDA provided OCFS with information about the following programs: TANF, HEAP, SNAP, WIC, and New York's State of Health Market Place.

State/community agencies serving refugee or immigrant families. Describe \_\_\_\_\_

Child care resource and referral agencies. Describe. The January CCDF Plan Pre-Print was shared with the statewide network of CCR&Rs to give them an opportunity to provide input into the development of the plan. CCR&R's in New York State are a well-established statewide service delivery system that supports and provides leadership, education and technical assistance to child care/early learning programs. They are also the community resource that provides consumer education regarding quality child care, assistance in developing a child care plan, and referrals to community supports (including child care subsidies) that help strengthen families in their local communities. CCR&Rs have been in the forefront of working with businesses, chambers of commerce, and economic development entities in making the connection that high-quality early care and education programming benefits families, children and employers because this one community asset supports child development, school readiness, family financial health, and workforce stability.

Provider groups or associations. Describe. After School Works: New York School-Age Network (ASW:NYSAN), a public-private partnership of organizations throughout the state dedicated to building a youth-serving system that increases the quality and availability of afterschool and expanded learning programs, submitted comments and recommendations that were incorporated into the plan.

In addition, interactive sessions on the new provisions of the CCDBG Act were held at various association conferences: the Family Child Care Association of New York State on March 20, 2015; and the New York State Association for the Education of Young Children on April 12, 2015.

Worker organizations. Describe. \_\_\_\_\_

Parent groups or organizations. Describe \_\_\_\_\_

Other. Describe \_\_\_\_\_

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

- a) Date(s) of notice of public hearing Notice of the public hearings was posted to the OCFS website on January 6, 2016. The posted to the OCFS Facebook and Twitter pages on January 15, 2016. **Reminder** - Must be at least 20 calendar days prior to the date of the public hearing.
- b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice. Public notices were posted to the OCFS website and on the OCFS Facebook and Twitter pages. In addition, information about the hearings was emailed to the New York State network of CCR&Rs, the state's 58 LDSSs, and other stakeholder groups. The Plan was posted to the OCFS website on January 15, 2016 (see <http://ocfs.ny.gov/main/childcare/stateplan/default.asp>).  
The Plan is posted in Adobe Acrobat in a PDF format and can be viewed by visually impaired users via JAWS software.
- c) Date(s) of public hearing(s) January 26, January 27, and January 29, 2016 **Reminder** - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.
- d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed: Public hearings were held:  
January 26, 2016 in Albany, NY – The state capital, Albany is in the middle of the eastern part of the state.  
January 27, 2016 in Rochester, NY – Rochester is about half way in between, and easily accessible, to Buffalo in the far western part of the state and Syracuse, in the center of the state.  
January 29, 2016 in New York, NY -- The New York City location is reasonably convenient to the two counties on Long Island and the northern metro counties and New York City suburbs.
- e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s) A draft of the plan was posted on the OCFS website on January 15, 2016.

- f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? All comments were carefully reviewed. As appropriate and feasible, ideas and suggestions were integrated into New York's Plan.

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

- Working with advisory committees. Describe. OCFS emailed the link to the CCDF Plan, and information about the hearing dates and locations, to the Early Childhood Advisory Council (ECAC) co-chairs and asked that it be shared with all ECAC members.
- Working with child care resource and referral agencies. Describe. OCFS emailed the link to the CCDF Plan, and information about the hearing dates and locations, to the Early Care and Learning Council (ECLC), and asked that it be shared with all of its CCR&R members. In addition, the host site for the Rochester hearing is the local CCR&R, the Child Care Council.
- Providing translation in other languages. Describe \_\_\_\_\_
- Making available on the Lead Agency website. List the website <http://ocfs.ny.gov/main/childcare/stateplan/default.asp>
- Sharing through social media (Twitter, Facebook, Instagram, email, etc.). Describe Information was posted to the OCFS Facebook and Twitter pages with a link to where the Plan could be found.
- Providing notification to stakeholders (e.g., provider groups, parent groups). Describe. OCFS emailed the link to the CCDF Plan, and notification of the hearing dates and locations, to the Family Child Care Association of New York State, the New York State Association for the Education of Young Children, and the two unions that represent family-based providers, and asked that it be shared with each respective organization's members.
- Other. Describe \_\_\_\_\_

#### 1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

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

1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families. (658E(c)(2)(O)) Please describe the goals of this coordination, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school, enhancing and aligning quality of services, linking

comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. NOTE that this list appears similar to the list provided in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however, this list includes entities required by law, along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.

[REQUIRED] Programs operating at the Federal, State and local levels for children in pre-school programs (e.g., state or locally -funded pre-k, Head Start, school-based programs, public and private preschools, programs serving preschool children receiving special education services, etc.). Describe. At least ten percent of state-funded Pre-K in New York State must be in community-based programs, such as child care centers. This creates a natural incentive for both OCFS, which regulates child care centers, and the State Education Department, which administers the Pre-K programs, to work together to support each other's programming. So, for example, OCFS collaborated with the State Education Department to adopt an approach that gives credit points in grants for Pre-K services to programs offering wrap-around programming to Pre-K students, and thus more continuity of care.

To reinforce their partnership, OCFS and the State Education Department hold monthly conference calls. The agenda includes issues shared between both agencies as they affect pre-school programs.

[REQUIRED, IF APPLICABLE] Tribal early childhood programs. Describe, including which Tribe(s) coordinating with The OCFS regional offices interact regularly with tribal members – sometimes in a regulatory capacity, sometimes to help problem solve on other related issues and also to provide technical assistance. OCFS regulates two St. Regis Mohawk tribal nation child care programs (one child care center serving infants and preschoolers, and one Head Start program serving preschoolers). Being operated by a sovereign nation, these programs do not require licensure by New York OCFS; however, they have chosen to do so voluntarily. Both are located on the St. Regis reservation in Akwesasne in Franklin County. OCFS also licenses and provides technical assistance to two child care programs operated by the Seneca Nation of Indians; and has been advising the Shinnecock Indian Nation, which is building a new child care center. As issues arise, OCFS regional office staff work directly with child care center administration and at times seek resources from the OCFS Buffalo Regional Office Native American Services liaison.

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

[REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities. Describe. OCFS continues to collaborate with legal advocates, child care councils, unions (Civil Service Employees Association (CSEA) & United Federation of Teachers (UFT)), advocates for early childhood education, staff from not-for-profit child care centers, and pediatricians on revising the existing special needs administrative directive.

Research work has been completed on how other states prioritize families that have a child with special needs, and their reimbursement rates; and a Special Needs Application has been drafted.

In an effort to link comprehensive services to children in child care settings, OCFS has supported production of e-learning training for providers on the topic of behavior management and early intervention services. In addition, OCFS posted a video titled Early Intervention Services to its Child Care Website for parents seeking guidance concerning developmental screening. The video can be found at [http://ocfs.ny.gov/main/childcare/early\\_intervention\\_video.asp](http://ocfs.ny.gov/main/childcare/early_intervention_video.asp). OCFS is also participating in a project led by the New York State Council on Children and Families titled *The New York State Pyramid Model Partnership* with other public and private agencies such as the NY Department of Health, NY State Education Department, NY Office of Mental Health, Docs for Tots, the Early Childhood Advisory Council, Head Start Region II, NY Center for Child Development, NYC Administration for Children Services, NYS Association for the Education of Young Children, NYC Department of Education, NYS Association for Infant Mental health, NYS Parenting Education Partnership, NYS United Teachers, Prevent Child Abuse, Professional Development Institute at the City University of New York (CUNY), and the Professional Development Program at the State University of New York (SUNY) to better support and teach young children and families social and emotional skills and to create a network of assistance for child care providers and parents concerning early intervention, and the limitation of suspension and expulsion from early education programs.

OCFS is in partnership with both the State Department of Health and the Office of Mental Health, which are coordinating the efforts of a Joint Task Force on Social Emotional Development that has been established by both the Early Intervention Coordinating Committee and the Early Childhood Advisory Council that have been developing a guidance document which will focus on the social-emotional developmental needs of young children from birth to 36 months of age. OCFS will also work with our partners, especially, the State Education Department, to address the social-emotional needs of preschool-age children, some of whom may be eligible for preschool special education.

[REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney-Vento Homeless Education Assistance Act). Describe. OCFS contracts with ASW:NYSAN to provide technical assistance to school-age child care (SACC) providers around quality services. ASW:NYSAN provides resources on effectively serving homeless children and their families (<http://www.nysan.org/program-providers/homeless-youth-families/>), and will offer at least one additional webinar on working with homeless children during 2016. ASW:NYSAN is collaborating with the New York State Technical and Education Assistance Center for Homeless Students (NY-TEACHS) on how to best to provide SACC providers with information on rights and resources their homeless students may have access to under the McKinney-Vento Homeless Assistance Act.

In addition, OCFS expects that through coordination with New York State's McKinney Vento Homeless Education Coordinator and local liaisons that it will reach homeless families with

children in shelters and help connect them with available child care resources. OCFS will also work with New York's CCR&R's to target homeless shelters for child care referrals; include homeless and domestic violence shelters on our lists for child care-related mailings; and share our Child Care Options video, currently in development, with homeless shelters.

[REQUIRED] Early childhood programs serving children in foster care. Describe. Some child care programs in New York State applied for and were awarded grants for the Early Head Start Partnership. Many of these programs have set a priority to serve children in foster care. In addition, OCFS has a Public/Private Partnership contract with the Jewish Board of Family and Children's Services, which provides psychotherapy and coordinates services for 30 families with children birth to age 3 who have been placed in foster care and are court-referred.

State/Territory agency responsible for child care licensing. Describe The CCDF Lead Agency is the state agency responsible for child care licensing.

State/Territory agency with Head Start State collaboration grant. Describe. In order to more fully inform local social services districts about the Partnership grants opportunity and encourage them to participate, the New York State Head Start Collaboration Office, the New York State Early Childhood Advisory Council, and the Lead Agency co-sponsored a webinar. This webinar was held on July 8, 2014, and focused on the role of the LDSSs in the Early Head Start-Child Care Partnership initiative. Representatives from 19 LDSSs attended. A Q&A document was sent to all webinar participants as follow-up to the webinar. OCFS continues to work with the New York Head Start Collaboration director to problem solve issues on the local district level, in an effort to expand access to Early Head Start through the Partnership grant.

State Advisory Council authorized by the Head Start Act. Describe. Expanding accessibility and continuity requires additional resources for the child care subsidy program. New York State's Early Childhood Advisory Council (ECAC), of which the Lead Agency is a member, includes representatives from a number of different advocacy groups and other organizations that give voice to the need for more dollars for child care. They provide testimony at legislative hearings and roundtables, and make the case to elected officials on both the state and national levels that increasing access to high-quality child care costs money. They also educate the public about what constitutes quality child care.

State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe

McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons. Describe. OCFS reached out to the McKinney-Vento coordinator at the State Education Department who then made the linkage to NY-TEACHS, described earlier. Discussions are ongoing regarding ways to support providers serving children who are homeless.

Child care resource and referral agencies. Describe. OCFS contracts with CCR&Rs to provide core services, including parent referrals to child care providers and programs, information on what constitutes quality child care, and technical assistance to child care providers and programs.

State/Territory agency responsible for public education. Describe \_\_\_\_\_

State/Territory institutions for higher education, including community colleges. Describe. OCFS maintains memoranda of understanding (MOUs) with SUNY and CUNY to subsidize child care services for low-income students enrolled in either of these two higher education systems. Additionally, LDSSs may elect to pay for child care services while a parent or caretaker attends an educational program. Educational programs include: GED, high school, vocational programs, associate's and bachelor's degrees.

State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe. OCFS continues to work with the NYS Department of Health, the state agency responsible for CACFP. This collaboration has resulted in a change to child day care regulations which now require that child care centers and school-age child care programs be in compliance with the USDA CACFP meal standards and that only healthy beverages may be served in all child day care programs. Healthy beverages are described as: fluid milk, 100% juice and water. When milk is served as a beverage, low-fat or fat-free milk (1% fat or less) must be served to children 2 years of age or older.

In 2015, New York State provided \$250,000 of state funds to expand outreach and increase awareness of the CACFP program. In November, OCFS released a Request for Proposals for the purpose of increasing the number of day care center/home or after-school providers participating in CACFP. The funding amount of \$250,000 will be awarded through a competitive bid process to a not-for-profit organization that demonstrates the ability to implement this outreach initiative on a statewide basis.

In addition, CRR&Rs are required under Social Services law § 410-q to assure access to the United States Department of Agriculture's Child and Adult Care Food Program (CACFP) for providers in their service areas.

State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe. OCFS continues to collaborate with the NYS Department of Health, the NYS Council on Children and Families, other state agencies, and interested parties on obesity prevention in child care programs. Additional child care regulations were adopted in an effort to reduce screen time, require physical activity on a daily basis, and set a standard for nutrition.

OCFS will work with the Department of Health to distribute brochures and information to all providers about the benefits of breastfeeding and breast milk that will also encourage and support women who breastfeed. Information will be shared on the OCFS website and in written communication to providers as well.

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 Childhood Home Visitation programs grant. Describe \_\_\_\_\_
- Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe. OCFS will be partnering with the NYS Department of Health regarding procedures for providing information on and referring families to existing resources and services for health insurance and developmental screening.
- State/Territory agency responsible for public health. Describe \_\_\_\_\_
- State/Territory agency responsible for mental health. Describe \_\_\_\_\_
- State/Territory agency responsible for child welfare. Describe \_\_\_\_\_
- State/Territory liaison for military child care programs. Describe An MOU was signed between OCFS and the Navy (Mid-Atlantic Region) concerning oversight of family day care programs that are dual licensed and operating outside the Saratoga, NY military base. The MOU is in effect until 2018.
- State/Territory agency responsible for employment services/workforce development. Describe \_\_\_\_\_
- State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe. OCFS continues to meet regularly with OTDA, the agency responsible for the TANF program, to discuss strategies that will assist families receiving public assistance with also receiving child care; with choosing to receive child care in lieu of public assistance; and with receiving child care while transitioning from public assistance.
- State//Territory community agencies serving refugee or immigrant families. Describe \_\_\_\_\_
- Provider groups or associations. Describe \_\_\_\_\_
- Worker organizations. Describe. As already noted, family-based child care providers are represented by one of two unions: the United Federation of Teachers in New York City and the Civil Service Employees Association in the rest of the state. For both unions, state general funds have been appropriated to support the improvement of program quality, both through quality grants (individual grants that go directly to providers to help them pay for things like health and safety items; developmentally appropriate books, toys and other materials for the children they serve; First Aid/CPR training expenses, general supplies; and children’s furnishings, such as cribs, mats, changing tables and the like) and dollars to support professional development and training.
- Parent groups or organizations. Describe \_\_\_\_\_
- Other. Describe \_\_\_\_\_

## 1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O))(ii) Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high quality care that meets the needs of children and families. For example, State/Territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a State/Territory may allow county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits

([https://www.whitehouse.gov/omb/circulars/a133\\_compliance\\_supplement\\_2014](https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014)), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

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

Yes. If yes, describe at a minimum:

- How do you define “combine”: \_\_\_\_\_
- Which funds will you combine \_\_\_\_\_
- Goal(s) of combining funds (why?) and expected outcomes, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations \_\_\_\_\_
- Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?) \_\_\_\_\_

- How are the funds tracked and method of oversight \_\_\_\_\_

No

## 1.6 Public-Private Partnerships

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

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

OCFS has partnered with public and private agencies, including the NY Department of Health, NY State Education Department, NYS Office of Mental Health, Docs for Tots, the Early Childhood Advisory Council, Head Start Region II, NY Center for Child Development, NYC Administration for Children’s Services, NYS Association for the Education of Young Children, NYS Council on Children and families, NYC Department of Education, NYS Association for Infant Mental Health, NYS Parenting Education Partnership, NYS United Teachers, Prevent Child Abuse, SUNY, and CUNY in a project titled *The New York State Pyramid Model Partnership*. The purpose of this project is to set a foundation for social and emotional well-being for the development and learning of infants, toddlers, and young children. The Early Childhood Advisory Council – the members of which include experts in child care, education, health care, family support and mental health – have identified the critical need to better support and teach young children and families social and emotional skills. In response, the New York State Council on Children and Families has taken the lead in bringing together a team of public and private agencies to form a new partnership to provide more early childhood professional development opportunities. This

new partnership, called the New York State Pyramid Model Partnership, will promote the statewide use of the Pyramid Model, an evidence-based framework proven to be an effective approach to building social and emotional competence in early care and education programs. One activity gaining some ground at this time is soliciting participants in the field of early childhood education who will be trained as coaches and resources to child care providers on social and emotional behaviors in children.

In addition, OCFS partners with The Early Care and Learning Council (ECLC), a not-for-profit organization that is the primary resource on issues affecting New York State's CCR&Rs. ECLC is a valuable conduit of information from the state to the CCR&Rs, focusing on such areas as increasing the supply of child care providers and enhancing the quality of child care programs. OCFS places a priority on quality improvement and, with CCDF funds, has supported development of Best Practices criteria and a system of certification for the state's CCR&R network. In addition to the NYS Best Practices Certification, which was successful in moving all CCR&Rs in the network to meet higher standards, OCFS also invested in the National Association of Child Care Resource and Referral Agencies's (NACCRRA, now Child Care Aware) Quality Assurance process to encourage CCR&Rs to reach a higher national standard for CCR&R services. NACCRRA Quality Assurance has enabled CCR&Rs and state networks to improve quality and strive for excellence just as accreditation and quality rating and improvement systems do for child care providers.

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

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

- Provide families with information on a full range of child care options (including faith-based, community-based child care centers and family child care homes, nontraditional hours and emergency child care centers) in their local area or region
- To the extent practicable, work directly with families who receive child care assistance to offer the families support and assistance in making an informed decision about child care options in an effort to ensure families are enrolling their children in the most appropriate child care setting to suit their needs and that is of high quality as determined by the State/Territory
- Collect data and provide information on the coordination of services and supports, including services provided through the Individuals with Disabilities Education Act for children with disabilities

- Collect data and provide information on the supply of and demand for child care services in local areas or regions of the State/Territory and submit such information to the State/Territory
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care centers and family child care homes providers, to increase the supply and quality of child care services in the State/Territory
- As appropriate, coordinate their activities with the activities of the Lead Agency and/or local agencies that administer CCDF.

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

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

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

Describe the State/Territory's written agreement or contract with the CCR&R, what services are provided through the CCR&R, and any other activities for which the State partners with the CCR&Rs. OCFS has entered into performance-based contracts with 31 CCR&Rs to provide statewide coverage of services that include referrals to child care providers and programs, information on what constitutes quality child care, and technical assistance to child care providers and programs. In New York State, CCR&Rs are a critical link between the state's efforts to oversee and strengthen the child care system and local child care market realities. At their best, CCR&R agencies help the child care market work more effectively and provide both better services to families and higher-quality developmental experiences to children. NYS CCR&Rs work with families to help them create a child care plan that meets their unique and complex family needs. They provide families with a full range of child care options that meet the criteria of the parent's choice. Parents call their offices for consultation, referrals, and parents receive a packet of information that they customize according to their expressed need. If a parent is seeking referrals, they will receive a customized child care profile with the referrals as discussed between the parent and parent counselor. CCR&Rs use a database, NACCRRAware, in which all data regarding a family's expressed need is captured, including a child's individual needs. The parent counselor updates the data monthly and then comprehensively once a year. Programs can update by phone, email, postal service, whatever meets their needs. When a parent calls the CCR&R for referrals, the counselor takes all their information and puts it into the database, which then generates a "child care profile;" again, this profile would include any special needs a child may have. CCR&Rs then try to provide no fewer than three referrals. In cases where parents are seeking child care for children with disabilities,

CCR&Rs ask parents if their child requires any services or supports, and they contribute their data to the state report on the number of parent-identified special needs requests. They offer technical assistance and resource materials to providers who have questions or challenges related to children in care, and work cooperatively with Early Intervention to facilitate services in child care settings. It is important to note that CCR&Rs consider state programs that serve children with disabilities, like Early Intervention or Pre-School Special Education or federally funded Head Start to be partners in trying to provide services to families.

Also, 24 CCR&Rs work on behalf of LDSSs to register (i.e., license) family day care and school-age child care programs.

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

## 1.8 Disaster Preparedness and Response Plan

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

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

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

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan. See attached plan.

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

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

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

## **2 Promote Family Engagement through Outreach and Consumer Education**

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

The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to “promote involvement by parents and family members in the development of their children in child care settings.” States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children’s teacher and advocate. Key new provisions include:

1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
  - a) the availability of child care assistance,
  - b) the quality of child care providers (if available),

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

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

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care assistance services.

(658E(c)(2)(E)(i)(1))

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

- a) How does the State/Territory identify populations and areas of potentially eligible families (e.g., using available federal, State/Territory and local needs assessments to identify potentially eligible families?) New York State is a state-supervised, locally administered state. Local social services districts are the agencies that identify potentially eligible families.
- b) What partners help with outreach? For example, child care resource and referral agencies, home visitors, pediatricians, faith-based services, State/Territory or local agencies and organizations or other familiar and safe access points serving vulnerable or low-income

populations. OCFS has contracts with CCR&Rs across the state to assist families in locating providers. LDSSs also provide families with information about child care providers.

- c) What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach)? The OCFS website provides parents with information about how to get help paying for child care and how to select a child care provider. Families can search for providers by zip code, school district, facility type and program name.

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

Electronically via online application, mobile app or email. Provide link \_\_\_\_\_

In-person interview or orientation. Describe agencies where these may occur. Families may apply for child care at the LDSS in the county in which they reside.

Phone. NYS has 58 LDSSs; their addresses and phone numbers can be found on the OCFS website: <http://ocfs.ny.gov/main/localdss.asp>.

Mail

At the child care site

At a child care resource and referral agency

Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations. Describe \_\_\_\_\_

Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time). Describe Families can apply for multiple benefits using the LDSS-2921 statewide application <https://otda.ny.gov/programs/applications/2921.pdf>.

Other strategies. Describe Families residing in New York City, Albany, Rensselaer, Saratoga, Oneida, Onondaga, and Monroe counties may apply for child care assistance at Facilitated Enrollment Pilot Programs. The pilot program assists working families in applying for child care with completing the application and obtaining the documentation needed to determine eligibility for child care assistance. Completed applications are then submitted by the Facilitated Enrollment Pilot Program to the LDSS where the applicant resides. The LDSS determines eligibility. In addition, OCFS has MOUs with SUNY and CUNY to provide child care assistance to eligible parents attending these institutions.

## 2.2 Consumer and Provider Education Information

The CCDBG Act of 2014 added a purpose of the child care program “to promote involvement by parents and family members in the development of their children in child care settings.”

(658A(b)(3)) The consumer education requirements address multiple topics that parents and family members need in order to make informed choices and act as their most important teacher

and advocate. Lead agencies must certify that they will collect and disseminate the following information through resource and referral agencies or other means. (658E(c)(2)(E))

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

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

Yes. The State/Territory certifies as of March 1, 2016 that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.7 below.

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

- Overall Target Completion Date (no later than September 30, 2016) September 30, 2016.
- Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) See 2.2.2 through 2.2.7 below.
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable

- Substantially implemented: Information about the availability of the full diversity of child care services (see 2.2.2 below for details); information about other services (see 2.2.4 and 2.2.5 below for details).
    - Partially implemented: Information about the quality of child care providers (see 2.2.3 below for details); dissemination of research and best practices in child development (see 2.2.7 below for details).
  - Unmet requirement - Identify the requirement(s) to be implemented): Policies regarding the social-emotional/behavioral development of children, including policies on expulsion of preschool-aged children in early childhood programs receiving CCDF (see 2.2.7 below for Current Status).
- **Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)**
  - (a) Information about the availability of the full diversity of child care services: In addition to what is described in 2.2.2 below, OCFS is using CCDF quality funds to support development of a set of five 2- to 3-minute video segments describing the full range of child care options available to families; including regulated legally-exempt, licensed, and registered care, and non-regulated illegal care. The focus is to highlight the benefits of regulated, high-quality care (e.g., required standards of care, background checks, and help paying for child care). Filming has been completed; editing is underway. When completed, these videos will be available for download on parents’ smart phones. In addition, OCFS will then offer the short clips to hospitals, clinics, obstetricians, pediatricians, state offices, and other venues that may be used by the targeted audience.
    - Projected start date for each activity: July 1, 2015
    - Projected end date for each activity: August 31, 2016
    - Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Family Services
    - Partners – Who is the responsible agency partnering with to complete implementation of this activity: Professional Development Program, State University of New York; and the New York Chapter of the American Academy of Pediatrics
  - (b), (d), and (e) Information about other services: As noted in 2.2.4 and 2.2.5 below, the OCFS website includes information about how to access each of the benefits listed. Still to come: a broader dissemination of the information through partnering with New York’s CCR&Rs and other stakeholders.

- Projected start date for each activity: July 1, 2015
  - Projected end date for each activity: June 2016
  - Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Family Services
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity: The Early Care and Learning Council, among others.
- (c) Information about the quality of child care providers (if available): As noted in Sections 2.2.3 and 7.6.2, below, New York is in the process of creating a system of quality indicators in order to capture the elements of a child care program’s characteristics above and beyond regulatory compliance. Development and pilot testing are projected to be completed in 2016, with rollout expected to begin in January 2017. We expect that every child care program under the regulatory authority of OCFS will be rated (although providers will be able to choose not to have their ratings made public) by the end of 2017.
- Projected start date for each activity: July 1, 2015
  - Projected end date for each activity: December 31, 2017
  - Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Family Services
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity: Research Institute for Key Indicators
- (f) Dissemination of research and best practices in child development: Training on principles of child development is one of New York’s statutory requirements for licensed and registered child care programs and staff. As described in more detail in 6.1.2 below, through its contract with the Professional Development Program at the State University of New York, the Lead Agency supports live, webcast videoconference trainings, as well e-learning courses on principles of child development.
- Projected start date for each activity: July 1, 2015
  - Projected end date for each activity: Ongoing. Expect to continue to update training materials as new research findings become available.
  - Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Family Services
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity? Professional Development Program, State University of New York

- (g) Policies regarding the social-emotional/behavioral development of children, including policies on expulsion of preschool-aged children in early childhood programs receiving CCDF: As described in 1.4.1 above and 2.2.7 below, OCFS is partnering with other public and private agencies to promote the statewide use of the Pyramid Model, an evidence-based framework proven to be an effective approach to building social and emotional competence in early care and education programs. In addition, as part of the NYS Pyramid Partnership, OCFS has participated in the training of 50 master trainers of the Pyramid Model, which promotes social emotional competence. These trainers will work statewide to 'train the trainers' all over the state so that training may be obtained by providers, as well as, parents. Information will be forthcoming on the OCFS website, in written communication to providers, and in flyers distributed statewide.

Policies on expulsion will be developed by September 2016 once the data are collected regarding current practice. The partnership distributed a survey to over 15,000 child care providers in NYS in February of 2016; results of the survey will be analyzed and utilized during policy development. In addition, the *Statement on Positive Behavior Guidance in Pre-K for All and EarlyLearn NYC Programs* issued by the New York City Administration for Children's Services and New York City Department of Education has been reviewed and will be utilized as OCFS develops its own policy.

- Projected start date for each activity July 1, 2015
- Projected end date for each activity September 30, 2016
- Agency – Who is responsible for complete implementation of this activity? New York State Council on Children and Families
- Partners – Who is the responsible agency partnering with to complete implementation of this activity? The NYS Department of Health, NY State Education Department, NYS Office of Mental Health, Docs for Tots, the Early Childhood Advisory Council, Head Start Region II, NY Center for Child Development, NYC Administration for Children Services, NYS Association for the Education of Young Children, NYC Department of Education, NYS Association for Infant Mental health, NYS Parenting Education Partnership, NYS United Teachers, Prevent Child Abuse, Professional Development Institute at the City University of New York, Professional Development Program at the State University of New York.

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

- a) Describe how the State/Territory makes information about the full diversity of child care services available to 1) parents of eligible children, 2) providers and 3) the general public. The OCFS website search engine allows families to search for child care providers in a variety of ways such as by: facility zip code, county, school district, facility type, care provided during non-traditional hours, and whether or the program is allowed to administer medication. In addition to the OCFS website, parents can seek help locating child care providers from their local CCR&R agency or through their LDSS.
- b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) On the OCFS website, families are provided with general information, which can be printed out, in over 90 different languages. It includes information about early intervention services, “What you should know about child care,” frequently asked questions, and the toll-free complaint line. There is also information about New York’s quality rating and improvement system, QUALITYstarsNY; information about health insurance for children and families and small businesses; and resources for families. On the OCFS website parents can view a video called “Thinking About Child Care and Continuity of Care.” OCFS has printed brochures available in English and Spanish such as: “As you think about child care for your school-age child...make a visit... ask questions...then decide,” and “Looking for an In-Home Child Care Provider?” [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp).
- c) Describe who you partner with to make information about the full diversity of child care choices available OCFS contracts with the CCR&R’s to help inform families of the various types of care available. In addition, at the time of application, the local districts must inform the applicant of the various child care services programs available, the child care providers with which the local department of social services has a contract, and the recipient’s option to choose among any eligible provider.
- 2.2.3 Describe how the State/Territory makes information about the quality (such as through a quality rating and improvement system, if available, nationally-recognized accreditation, or other means) of child care services available to the public, including consumer-friendly strategies such as messages that are designed to engage intended audiences and are easy to understand.
- a) Describe how the State/Territory makes information about child care quality available to 1) parents of eligible children, 2) providers and 3) the general public. The OCFS website contains the inspection history. Inspection dates and associated violations are kept on the website for two years.
- b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.). OCFS posts to its website the substantiated violation history of all licensed and registered programs. The violation history contains the date of inspection, the findings and whether the violation has been corrected. Violation history includes the most recent two-year period. In addition to posting violations to the website, New York State law requires programs to physically post the latest inspection results in the program in a conspicuous place. The posting includes contact information, should the parent want

additional information. The website also informs the user if a program has been subject to an enforcement action in the most recent five-year period. Web users are prompted to call the OCFS regional office for more information on violations or enforcements.

- c) Describe who you partner with to make information about child care quality available. Child care providers themselves. They are required by New York State statute to post their compliance history in a prominent place for all parents to review.

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

- a) Temporary Assistance for Needy Families (TANF): Applicants can prescreen on-line for this benefit using the myBenefits tool. MyBenefits also provides information on various New York State programs and services. Additionally, information about these program can be obtained through the intake process and is on the OCFS website at:

[http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp). Families may apply for multiple services/benefits when applying for child care services if they apply using the statewide application LDSS-2921. <https://otda.ny.gov/programs/applications/2921.pdf>

- b) Head Start and Early Head Start Programs: Information about this program is on the OCFS website under “Resources for Families” at:

[http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp).

- c) Low Income Home Energy Assistance Program (LIHEAP): Information about this program is on the OCFS website under “Resources for Families” at:

[http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp)

- d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps): Information about this program is on the OCFS website at:

[http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp), under “Resources for Families”. Families applying for child care using the statewide application can also apply for SNAP benefits on the same application.

- e) Women, Infants, and Children Program (WIC): Information about this program is available on the OCFS website under “Resources for Families” at:

[http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp).

- f) Child and Adult Care Food Program (CACFP): Information about this program is on the OCFS website under “Resources for Families” at:

[http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp).

- g) Medicaid: Information about Medicaid is on the New York State Department of Health website at: [http://www.health.ny.gov/health\\_care/medicaid/](http://www.health.ny.gov/health_care/medicaid/) and on the OCFS Resources for Families web page at: [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp). Additionally, the New York State of Health provides a one-stop online marketplace for both public and private insurance options at: <https://nystateofhealth.ny.gov/>.
- h) Children's Health Insurance Program (CHIP): New York State refers to this program as Child Health Plus and the information can be found on the New York State Department of Health website at: [https://www.health.ny.gov/health\\_care/child\\_health\\_plus/](https://www.health.ny.gov/health_care/child_health_plus/) and on the OCFS Resources for Families web page at: [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp). Additionally, the New York State of Health provides a one-stop online marketplace for both public and private insurance options at: <https://nystateofhealth.ny.gov/>.
- i) Individuals with Disabilities Education Act (IDEA): Information about the Individuals with Disabilities Education Act (IDEA) is on the OCFS website at: [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp). Information about this program can also be found on the New York State Education Department website at: <http://www.nysed.gov/gsearch/idea>.
- j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten): Information about the state pre-kindergarten program can be found on the New York State Education Department website at: <http://www.nysed.gov/gsearch/state%2Bpre%2Bk>.
- k) Other early childhood programs: (e.g., Maternal, Infant, and Early Childhood Home Visiting program): Information about the state's Maternal, Infant, and Early Childhood Home Visiting initiative can be found on the New York State Department of Health website at: [http://www.health.ny.gov/community/infants\\_children/maternal\\_infant\\_early\\_child\\_home\\_visit/](http://www.health.ny.gov/community/infants_children/maternal_infant_early_child_home_visit/). Additional Information about the Healthy Families New York Home Visiting Program can be found on the OCFS website at: [http://ocfs.ny.gov/main/prevention/home\\_visiting.asp](http://ocfs.ny.gov/main/prevention/home_visiting.asp).

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

- a) Temporary Assistance for Needy Families (TANF): Information about TANF is provided through the LDSS and on both the OCFS and the OTDA websites at: [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp) and <https://otda.ny.gov/programs/>.
- b) Head Start and Early Head Start Programs: Information about this program is on the OCFS and OTDA websites at: [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp) and <https://otda.ny.gov/programs/>.

- c) Low Income Home Energy Assistance Program (LIHEAP): Information about this program is on the OCFS website under “Resources for Families” at: [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp).
- d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps): Information about this program is on the OCFS website under “Resources for Families” at: [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp). Families applying for child care using the statewide application can also apply for SNAP benefits on the same application.
- e) Women, Infants, and Children Program (WIC): Information about this program is on the OCFS website under “Resources for Families” at: [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp).
- f) Child and Adult Care Food Program (CACFP): Information about this program is on the OCFS website under “Resources for Families” at: [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp).
- g) Medicaid: Information about Medicaid is on the New York State Department of Health website at: [http://www.health.ny.gov/health\\_care/medicaid/](http://www.health.ny.gov/health_care/medicaid/).
- h) Children's Health Insurance Program (CHIP): New York State Refers to this program as Child Health Plus and the information can be found on the New York State Department of Health website at: [http://www.health.ny.gov/health\\_care/child\\_health\\_plus/](http://www.health.ny.gov/health_care/child_health_plus/).
- i) Individuals with Disabilities Education Act (IDEA): Information about this program is on the OCFS website under “Resources for Families” at: [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp).
- j) Other State/Federally Funded Child Care Programs (example-State Pre-K): Information about the state pre-kindergarten program can be found on the New York State Education Department website at: <http://www.nysed.gov/gsearch/state%2Bpre%2Bk>.
- k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program): Information about the Healthy Families New York Home Visiting Program can be found on the OCFS website at: [http://ocfs.ny.gov/main/prevention/home\\_visiting.asp](http://ocfs.ny.gov/main/prevention/home_visiting.asp).

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

(658E(c)(2)(E)(VI))

- a) Describe how the State/Territory makes information about research and best practices in child development available to 1) parents of eligible children, 2) providers and 3) the general public. CCR&Rs are a prime communicator with parents, as well as a strong partner with the

Lead Agency. OCFS through the state-wide network of CCR&Rs and the SUNY Professional Development Program provides best practices in child development. In addition, OCFS developed an online training module for providers on this important topic, Family Engagement. This training opportunity contains important information pertaining to the importance of engaging families in their child’s learning and providing tips to make family engagement work in their childcare programs.

- b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) OCFS through the state-wide network of CCR&Rs and the SUNY Professional Development Program provides information on best practices in child development.
- c) Describe who you partner with to make information about research and best practices in child development available: CCR&R agencies, SUNY Professional Development Program.

2.2.7 Describe how information on the State/Territory’s policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (from birth to five for purposes of this requirement), in early childhood programs receiving CCDF is collected and disseminated to 1) parents, 2) providers and 3) the general public. (658E(c)(2)(E)(i)(VII))

- a) Describe how the State/Territory makes information regarding social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to parents of eligible children, providers and the general public. At minimum, describe **what** you provide (e.g., early childhood mental health consultation services to child care programs) and **how** (i.e., methods such as written materials, direct communication, etc.) for each group:

- i. Parents: OCFS posted a video titled “Early Intervention Services” to its Child Care website for parents seeking guidance concerning developmental screening. The video can be found at: [http://ocfs.ny.gov/main/childcare/early\\_intervention\\_video.asp](http://ocfs.ny.gov/main/childcare/early_intervention_video.asp). Additional information will be posted to the *Information for Parents* portion of the OCFS website.

In addition, OCFS is participating, with other public and private agencies, in a project led by the New York State Council on Children and Families called *The New York State Pyramid Model Partnership*, the goals of which are to better support and teach young children and families social and emotional skills; to create a network of assistance for child care providers and parents concerning early intervention; and to provide information the limitation of suspension and expulsion from early education programs.

Also, OCFS is in partnership with both the Department of Health and the Office of Mental Health, which are coordinating the efforts of a Joint Task Force on

Social Emotional Development that has been established by both the Early Intervention Coordinating Committee and the Early Childhood Advisory Council that have been developing a guidance document for both **parents** and service providers which will focus on the social emotional developmental needs of young children from birth to 36 months of age.

- ii. Providers: In an effort to link comprehensive services to children in child care settings, OCFS has supported production of e-learning training for providers on the topic of behavior management and early intervention services.

In addition, OCFS is participating, with other public and private agencies, in a project led by the New York State Council on Children and Families called *The New York State Pyramid Model Partnership*, the goals of which are to better support and teach young children and families social and emotional skills; to create a network of assistance for **child care providers** and parents concerning early intervention; and to provide information on the limitation of suspension and expulsion from early education programs. OCFS is currently in the process of developing videoconferences for providers and plans to offer them in June and September 2016. The topic of the videoconferences will be the Pyramid Model with specific focus on addressing challenging behaviors, getting supports in place, family engagement, cultural diversity and inclusion.

Also, OCFS is in partnership with both the Department of Health and the Office of Mental Health, which are coordinating the efforts of a Joint Task Force on Social Emotional Development that has been established by both the Early Intervention Coordinating Committee and the Early Childhood Advisory Council that have been developing a guidance document for both **parents** and **service providers** which will focus on the social emotional developmental needs of young children from birth to 36 months of age.

- iii. General public: OCFS posted a video titled “Early Intervention Services” to its Child Care website for the public seeking guidance concerning developmental screening. The video can be found at:  
[http://ocfs.ny.gov/main/childcare/early\\_intervention\\_video.asp](http://ocfs.ny.gov/main/childcare/early_intervention_video.asp).

In addition, OCFS is participating, with other public and private agencies, in a project led by the New York State Council on Children and Families called *The New York State Pyramid Model Partnership*, the goals of which are to better support and teach young children and families social and emotional skills; to create a network of assistance for child care providers and parents concerning early intervention; and to provide information the limitation of suspension and expulsion from early education programs.

Also, OCFS is in partnership with both the Department of Health and the Office of Mental Health, which are coordinating the efforts of a Joint Task Force on Social Emotional Development that has been established by both the Early Intervention Coordinating Committee and the Early Childhood Advisory Council that have been developing a guidance document for parents, service providers

and the public which will focus on the social emotional developmental needs of young children from birth to 36 months of age.

- b) Describe any partners used to make information regarding social-emotional/behavioral and early childhood mental health of young children available: New York State Department of Health, New York State Office of Mental Health, the Early Childhood Advisory Council, the New York State Council on Children and Families and the New York State Early Intervention Coordinating Council.
- c) Does the State have a written policy regarding preventing expulsion of:
- Preschool-aged children (from birth to five) in early childhood programs receiving child care assistance?
    - Yes. If yes, describe how the State/Territory makes information about that policy available to parents, providers and the general public (what you provide, how you provide and any partners used) and provide a link \_\_\_\_\_
    - No.
  - School-age children from programs receiving child care assistance?
    - Yes. If yes, describe how the State/Territory makes information about that policy available to 1) parents, 2) providers and 3) general public (what you provide, how you provide and any partners used) and provide a link \_\_\_\_\_
    - No.

#### 2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

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

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency policy citation(s) \_\_\_\_\_ and

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

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

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

- Overall Target Completion Date (no later than September 30, 2016): September 30, 2016
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other): Partially to Substantially Implemented – see details below.
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable
    - New York State has a robust system to help high-need children enroll in health insurance, including Medicaid, Child Health Plus (New York’s State Child Health Insurance Program) and commercial qualified health plans through the New York State of Health insurance marketplace, New York’s state-operated health insurance exchange launched in October 2013. The New York State of Health includes multiple access points (telephone, web and in-person) for families to assess eligibility, subsidies and tax credits and to initiate insurance enrollment, with additional support available from a statewide network of community-based Patient Navigators to engage and directly assist families in enrolling in health insurance through the marketplace. An extensive web portal allows families to directly access information about insurance and apply for coverage: <https://nystateofhealth.ny.gov/>
    - Additionally, information about Medicaid is on the OCFS Resources for Families website: [http://ocfs.ny.gov/main/childcare/Resources\\_for\\_Families.asp](http://ocfs.ny.gov/main/childcare/Resources_for_Families.asp).
    - New York’s Medicaid (MA) program has adopted the American Academy of Pediatrics (AAP) *Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents* as the

standard for well-child care, and provides full coverage for well-child services with no family co-pays under EPSDT. In accordance with the *Bright Futures* periodicity schedule, routine screening for developmental delays and disabilities during regular well-child doctor visits is recommended at ages 9, 18 and 24 or 30 months of age, with additional screening as indicated for children at higher risk of developmental problems.

- The IDEA Part C program, referred to in NYS as the Early Intervention Program (EIP) is implemented by the New York State Department of Health. The EIP provides services to infants and toddlers with developmental delays or disabilities at no out-of-pocket cost to families; all EIP services are covered by Medicaid for children enrolled in Medicaid.
- In addition, in accordance with IDEA Part C, the NYS EIP has a child find system component; the goal of which is that eligible infants and toddlers in the state are identified, located, referred to the EIP, and receive a multidisciplinary evaluation; including coordination with other state agencies responsible for administering the various education, health, and social service programs, including child care programs. Regulations at 10 NYCRR Section 69-4.3 include child care programs and local social services districts as primary referral sources for the EIP. As primary referral sources, child care programs are required to refer infants and toddlers suspected of having a disability (which is defined to include developmental delay) and children at risk of having a developmental disability to the local Early Intervention Official. Children suspected of having a disability receive a multidisciplinary evaluation, which may include a developmental screening, with parent consent, to determine eligibility for EIP services. Children at risk of having a disability receive screening and tracking services through the local Early Intervention Program.
- New York State's EIP is locally administered by 57 county government agencies and New York City. Localities are responsible for implementing child find and public awareness programs, which inform primary referral sources and families about the EIP, the benefits of the program, and how to make a referral. Child care providers, as primary referral sources, are included in these outreach activities. Local program administrators also have strong relationships with their CCR&Rs.
- In addition, under Section 69-4.13 of 10 NYCRR, municipalities (57 counties and New York City) are responsible for establishing and maintaining local early intervention coordinating councils (LEICCs), which must include at least one child care provider or

representative of child care providers. LEICCs are responsible for advising and assisting local government program administrators in the early intervention service delivery system, including coordination of public and private agencies and the planning for, delivery, and evaluation of EIP services, including methods to identify and address gaps in services.

- A representative of the OCFS is a member of New York State’s Early Intervention Coordinating Council, which advises and assists the Department of Health, as lead agency for the EIP, on all aspects of the service delivery system, including child find and public awareness.
  - The Department of Health, as lead agency for the EIP, has a comprehensive system of personnel development, which includes training programs for child care providers. These training programs are offered free of charge. A description of the “Information Session for Child Care Providers: Learning Everyday” session can be found on both the EI Learning Network website and the OCFS Child Care website: <https://www.elearningnetwork.com/index.php/course-descriptions#ISF-2A> [http://ocfs.ny.gov/main/childcare/early\\_intervention\\_video.asp](http://ocfs.ny.gov/main/childcare/early_intervention_video.asp)
  - QUALITYstarsNY, New York’s a quality rating and improvement system, includes standards and associated implementation support resources related to developmental screening and provision of written information about family resources and supports to families.
  - The OCFS Division of Child Care Services has a strong working relationship with the New York State Department of Health Division of Family Health, which administers the state’s Title V (Maternal and Child Health) program as well as IDEA Part C (Early Intervention) program. In turn, the Division of Family Health has strong existing collaboration with the New York State of Health marketplace and Medicaid programs to obtain and share timely and relevant information about health insurance enrollment with external partners. Planning is underway between our respective Divisions to implement additional procedures to achieve full compliance with these requirements and to improve the extent to which child care providers are informed and able to connect children and families with health insurance, health care services and developmental assessments and supports.
- Unmet requirement - Identify the requirement(s) to be implemented Although many key elements are in place as listed above, the state has

not yet fully developed or implemented procedures for providing information to child care providers and families about Medicaid enrollment and EPSDT services.

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)? OCFS will continue to partner with the NYS Department of Health Division of Family Health to further develop and implement additional procedures to achieve compliance with these unmet requirements, and additional supporting activities to further strengthen implementation of all requirements. By September 30, 2016, current information about health insurance enrollment resources and benefits (including well child care and screening) for children and families will be compiled and distributed to child care providers and CCR&R agencies to ensure compliance with currently unmet minimum CCDF requirements. Additional planned activities to strengthen implementation of these requirements include:
  - Developing and issuing joint communication from OCFS and DOH to child care providers on the importance of developmental screening and how to refer children to the EIP, as well as local resources available to assist child care providers in referring children for EIP services and delivering EIP services in child care settings.
  - The Early Childhood Advisory Council and the Early Intervention Coordinating Council are engaged in a joint task force on social emotional development in young children. The aim of the task force is to issue a guidance document to early childhood providers, including child care providers and EIP service providers, on the importance of early identification and early intervention services for children with delays or disabilities affecting social emotional development, including how and when to refer a child and family to EIP services. Pending completion of this document, our agencies will collaborate to distribute to child care providers and CCR&Rs.
  - Implementation of a set of quality indicators, to be incorporated in OCFS licensing visits. The Division of Family Health is currently convening a staff workgroup to develop recommendations for OCFS on potential health-related indicators, and will incorporate indicators related to helping families connect with health insurance and screening services in those recommendations. See Sections 2.2.3 and 7.6.2, below for further information about OCFS’s quality indicators initiative.
    - Projected start date for each activity: January 2016
    - Projected end date for each activity: September 30, 2016
    - Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Family Services

- Partners – Who is the responsible agency partnering with to complete implementation of this activity: New York State Department of Health

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

- a) How does the State/Territory define substantiated parental complaint? OCFS maintains a child care complaint line for parents to call and register complaints against child care providers and programs. Once a complaint is registered in the Child Care Facility System (CCFS), it is assigned a risk level. Based on that risk, an unannounced inspection is scheduled and completed. Inspectors will either substantiate or unsubstantiate a violation of day care regulation. Once a violation has been substantiated, it is posted to the OCFS website and a compliance history posting is mailed to the program. New York State Law requires licensed and registered programs to post their compliance history in a conspicuous place in the program for all parents to review. Inspection dates and associated violations for licensed/registered programs are kept on the website for two years.
- b) How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format)? OCFS maintains a child day care complaint (800) phone number for the general public to register complaints concerning child day care providers. The complaint information is gathered from the caller and entered into the Child Care Facility System (which is the system of record) and investigated.
- c) How does the State/Territory make substantiated parental complaints available to the public on request? All substantiated complaint information for licensed/registered programs is listed as violations on the website for viewing by the general public. Violations remain on the website for a period of two years and receive a status of corrected or uncorrected. The website directs the public to phone numbers that may be called should the user have any additional concerns or questions about what is posted to the website. In addition, substantiated violations are also physically posted at the program site as per Social Services Law.
- d) Describe how the State/Territory defines and maintains complaints from others about providers. The obligation to make unannounced inspections of programs based on complaints is not determined by who the caller is, but by the information reported. Regardless of who makes a report to the child care complaint line (parent or others), the investigation and resulting actions by OCFS are the same.

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

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

- Application in other languages (application document, brochures, provider notices)
- Informational materials in non-English languages
- Training and technical assistance in non-English languages
- Website in non-English languages
- Lead Agency accepts applications at local community-based locations
- Bilingual caseworkers or translators available
- Bilingual outreach workers
- Partnerships with community-based organizations
- Other: \_\_\_\_\_
- None

2.2.11 If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State/Territory has the ability to have translation/interpretation in all primary and secondary languages. OCFS has a contract with *Language Line Services* for interpretation services. It also uses this service to translate vital and functional documents for providers of child care services. Examples of documents that are translated are: child day care regulations (available in English and Spanish); online orientation (available in English and Spanish); the OCFS-approved Medication Administration Training (MAT) (available in English and Spanish); and the OCFS-approved Health and Safety Training course (available in English and Spanish). OCFS makes available to all child care subsidy applicants a common application for services that is available in English, Spanish, Chinese, Russian, Korean, Haitian Creole, and Italian.

2.2.12 Describe how the Lead Agency or partners provide outreach and services to eligible persons with disabilities In addition to the outreach and services described elsewhere in this section, OCFS licensed/registered programs serve children and families with disabilities in other ways. Programs must have at least one person certified in first aid and CPR appropriate for the ages of children in care. Programs work with families and health care providers to create and document the plan to provide appropriate care for children with special health care needs. Regulations also speak to compliance with the Americans with Disabilities Act relative to administering medication. Health care plans required for programs address special health care needs and disabilities. These plans are crafted with Health Care Consultants who are on-going resources for programs. Supervision of children must take into account the child's emotional, physical and cognitive development. Programs must provide a schedule, materials and equipment

appropriate to all children, including those with developmental delays or disabilities. Evacuation routines must address safety of children unable to evacuate on their own or without assistance.

Programs and OCFS also share resources for families affected by disabilities. This includes a portion of website (Resources for Families), and the programs sharing community resources directly with families.

In addition, when a parent calls a CCR&R for a referral, the counselor takes all their information and puts it into the database, which then generates a “child care profile”. This profile would include any special needs a child may have. CCR&Rs then try to provide no fewer than three referrals. In cases where parents are seeking child care for children with disabilities, CCR&Rs ask parents if their child requires any services or supports, and they contribute their data to the state report on the number of parent-identified special needs requests. They offer technical assistance and resource materials to providers who have questions or challenges related to children in care, and work cooperatively with Early Intervention to facilitate services in child care settings. It is important to note that CCR&Rs consider state programs that serve children with disabilities, like Early Intervention or Pre-School Special Education or federally funded Head Start to be partners in trying to provide services to families.

## **2.3 Website for Consumer Education**

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

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

### **2.3.1 Describe the status of State/Territory’s consumer education website.**

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.. Provide the link to the website [redacted] and describe how the consumer education website meets the requirements to:

- a) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations). Describe [redacted]

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

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

- Overall Target Completion Date: no later than September 30, 2016 for all components of the website except posting the results of the monitoring on the website which is November 19, 2017: September 30, 2016 for all components of the website, except posting the results of the enrolled legally-exempt monitoring on the website, which is November 19, 2017.
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, in progress, partially completed, substantially completed, other) OCFS has a user-friendly search for child care website. The website allows the user to search for available child care services by facility name, county, facility number, facility type, zip code, school district, by those that administer medication, and for those offering non-traditional hours of care. Information concerning inspection violations and a brief description of the violation is available in the facility search and offers additional information about the program such as: inspection date, violations, whether violations have been corrected, address of the program, contact names and numbers, total capacity numbers, how long the child care program has operated, if the program has been in an enforcement status in the past five years, and whether it is currently on the state’s referral list. The website also includes instructions to the user to contact the OCFS regional office for additional information about the program listed. Users of the website who are

non-English speaking may call the contact numbers listed and OCFS will conference in an interpreter from *Language Line Services*.

- Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable: OCFS is fully in compliance with the requirement to post the results of inspections of licensed and registered programs in a consumer-friendly and easily accessible format. OCFS has begun work on system upgrades that would provide annual aggregate information about the number of fatalities, number of serious injuries as defined by the state, and the number of incidences of substantiated child abuse that occur in child care settings.
- Unmet Requirement(s) – Identify the requirement(s) to be implemented: The OCFS website does not yet include descriptions of the processes for licensing and monitoring licensed and registered child care providers, processes for conducting criminal background checks as required by law, and the offenses that prevent individuals from being child care providers. Nor does it yet include aggregate information on the number of fatalities, serious injuries, and child abuse in child care settings, or inspection results of monitoring visits to enrolled legally-exempt providers.

OCFS does not plan to post the results of monitoring visits of enrolled legally-exempt family and legally-exempt in-home providers on the website. Rather, the results will be given to the parents. Legally-exempt group results will be posted to the OCFS website once system changes have been made to CCFS.
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)? The Child Care Facility System (CCFS), which is the system of record for providers, will need to be updated so that detailed information about legally exempt group programs is included within the database and can then be posted to the OCFS website.
  - Projected start date for each activity: OCFS is not able to project a start date at this time. Many changes to CCFS will be needed because of requirements associated with the CCDBG Act. Based on additional resources, all system changes will be prioritized. System changes to accommodate expanded background checks will be among the top priorities. Amendments to the CCDF Plan will offer updates as they become available.
  - Projected end date for each activity: September 30, 2016 for all components of the website, except posting the results of the enrolled legally-exempt monitoring on the website, which is November 19, 2017

- Agency – Who is responsible for complete implementation of this activity: NYS Office of Children and Family Services Division of Child Care Services
- Partners – Who is the responsible agency partnering with to complete implementation of this activity? NYS Office of Information Technology Services

### **3 Provide Stable Child Care Financial Assistance to Families**

The expanded purposes of CCDBG highlight the opportunities States and Territories have to “deliver high-quality, coordinated early childhood care and education services to maximize parents’ options and support parents trying to achieve independence from public assistance”; and “to improve child care and development of participating children.” (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements – and the opportunity for children to form trusting relationships with teachers – are often interrupted and unstable. Child care financial assistance policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).

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

#### **3.1 Eligible Children and Families**

At the point in time when eligibility is determined, children must (1) be under the age of 13, (2) reside with a family whose income does not exceed 85 percent of the State’s median income for a family of the same size, and whose family assets do not exceed \$1,000,000 (as certified by a member of such family); and who (3)(a) resides with a parent or parents who are working or

attending a job training or educational program; or (b) is receiving, or needs to receive, protective services and resides with a parent or parents not described in (3a.). (658P(4))

### 3.1.1 Eligibility Criteria Based upon Child's Age

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

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

Yes, and the upper age is up to 19 years of age if the child is a full-time student in a secondary school, or in an equivalent level of vocational or technical training; and is a child with special needs. LDSSs may provide child care services to a child who turns 13 during the school year using Title XX funding. Provide the Lead Agency definition of physical or mental incapacity – Children with Special Needs: A child with special needs means a child who is incapable of caring for himself or herself and who has been diagnosed as having one or more of the following conditions to such a degree that it adversely affects the child's ability to function normally: visual impairment; deafness or other hearing impairment; orthopedic impairment; emotional disturbance; mental retardation; learning disability; speech impairment; health impairment; autism; or multiple handicaps. Any such diagnosis must be made by a physician, licensed or certified psychologist, or other professional with the appropriate credentials to make such diagnosis. OCFS plans to amend NYS Social Services Law so that the definition of special needs child is consistent with the federal definition.

No.

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

Yes, and the upper age is up to 19 years of age if the child is a full-time student and is under court supervision (may not equal or exceed age 19)

No.

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

a) *residing with* – For purposes of provision of child care services under the Child Care and Development Fund, a child must live with a parent, legal guardian, caretaker relative, or person standing in loco parentis.

b) *in loco parentis* – means the child's guardian or caretaker relative or any other person with whom a child lives who has assumed responsibility for the day-to-day care and custody of the child.

### 3.1.3 Eligibility Criteria Based on Reason for Care

a) How does the Lead Agency define "working, attending job training and education" for the purposes of eligibility at the point of determination? Provide a brief description

below, including allowable activities and if a minimum number of hours is required by State/Territory (not a federal requirement).

- *Working:* An individual is considered working when, in accordance with the regulations of OCFS or OTDA as applicable, he or she is engaged in work. For an individual receiving public assistance, engaged in work is defined by the local district in its employment plan submitted to and approved by OTDA.

For an individual who is not receiving public assistance, engaged in work means that the individual is:

- Earning wages at a level equal to or greater than the minimum amount required under federal and state labor law for the type of employment;
- Self-employed and is able to demonstrate that such self-employment produces personal income equal to or greater than the minimum wage or has the potential for growth in earnings to produce such an income within a reasonable period of time.

For an individual who is not receiving public assistance and who is seeking employment, engaged in work means that individual is:

- Making in-person job applications, going on job interviews, registering with a New York State Department of Labor's Division of Employment Services Office to obtain job listings; and
- Participating in such other job-seeking activities as are approved by the local social services district.

- *Attending job training:* For an individual who is participating in job training, engaged in work means that the program is reasonably expected to improve the earning capacity of the caretaker;
- *Attending education* For an individual who is attending an education program, engaged in work means:
  - the program is reasonably expected to improve the earning capacity of the caretaker;
  - the caretaker attending a two-year program or a four-college program must continue to participate in non-subsidized employment whereby the caretaker works at least 17 ½ hours per week; and
  - the caretaker earns wages at a level equal to or greater than the minimum amount required under federal and State Labor Law while pursuing the course of study; and
  - the caretaker can demonstrate his or her ability to successfully complete the course of study.
  - the caretaker attending a program to obtain: basic remedial education, literacy training, English as a second language, a high school diploma or GED, a two year degree, an undergraduate degree, a training program with a specific occupational goal conducted by an institution licensed or

approved by the State Education Department, or a demonstration project designed for vocational training.

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

Yes.

No. If no, describe additional requirements \_\_\_\_\_

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

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

1) Definition of protective services – The child care services that a local district may provide to families who need child care in order for their children to be protected include the following:

a) A family, including a foster family, with a child in a case with a child protective services component when it is determined on a case-by-case basis that such child care is needed to protect the child. Note that local districts may select in their Child and Family Services Plans to use the New York State Child Care Block Grant funds to provide child care services for these families.

b) A family receiving public assistance when child care services are needed for the child to be protected because the child’s parent(s) or caretaker relative(s) is physically or mentally incapacitated or has family duties away from home necessitating his or her absence.

c) A family receiving temporary assistance or with income up to 200 percent of the State income standard when child care services are needed for the child to be protected because the child’s caretaker is:

- participating in an approved substance abuse treatment program, or in screening for or an assessment of the need for substance abuse treatment;
- homeless or receiving services for victims of domestic violence and needs child care in order to participate in an approved activity, or in screening for or an assessment of the need for services for victims of domestic violence; or
- in an emergency situation of short duration including, but not limited to, cases where the caretaker’s absence from the home for a substantial part of the day is necessary because of extenuating circumstances such

as a fire, being dispossessed from the home, seeking living quarters, or providing chore/housekeeper services for an elderly or disabled relative.

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

Yes.

No.

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

No

#### 3.1.4 Eligibility Criteria Based on Family Income

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

Definition of income – Income includes the sum of gross income received from the following sources:

- Monthly wages or salary, i.e., total money earnings received for work performed as an employee, including wages, salary, Armed Forces pay, commissions, tips, piece-rate payments, and cash bonuses earned before deductions are made for taxes, bonds, pensions, union dues and similar purposes;
- Net income for non-farm self-employment, i.e., gross receipts minus expenses from one's own business, professional enterprise, or partnership. Gross receipts include the value of all goods sold and services rendered. Expenses include costs of goods purchased, rent, heat, light, power, depreciation charges, wages and salaries paid, business taxes (not personal income taxes) and similar costs. The value of salable merchandise consumed by the proprietors of retail stores is not included as part of net income;
- Net income from farm self-employment, i.e., gross receipts minus operating expenses from the operation of a farm by a person on his own account, as owner, renter or sharecropper. Gross receipts include the value of all products sold, government crop loans, money received from the rental of farm equipment to others, the incidental receipts from the sale of wood, sand, gravel, and similar items. Operating expenses include cost of feed, fertilizer, seed and other farming supplies, cash wages paid to farm hands, depreciation charges, cash rent, interest on farm building repairs, farm taxes (not state and federal income taxes) and similar

expenses. The value of fuel, food or other farm products used for family living is not included as part of net income;

- Social security benefits which include social security pensions and survivor benefits, and permanent disability insurance payments made by the Social Security Administration prior to deductions for medical insurance and railroad retirement checks from the U.S. government;
- Dividends, interest (on savings or bonds) income from estates or trusts, net rental income or royalties, including dividends from stockholdings or membership in associations, interest on savings or bonds, periodic receipts from estates or trust funds, net income from rental of a house, store or other property to others, receipts from boarders or lodgers and net royalties;
- Public assistance or welfare payments including public assistance payments such as family assistance, SSI (including State supplemental payments), and safety net assistance;
- Pensions and annuities including pensions or retirement benefits paid to a retired person or his /her survivors by a former employer or by a union, either directly or through an insurance company, and periodic receipts from annuities or insurance;
- Unemployment compensation, which means compensation received from government unemployment insurance agencies or private companies during periods of unemployment and any strike benefits received from union funds;
- Workers' compensation, which means compensation received periodically from private or public insurance companies for injuries incurred at work. The cost of this insurance must have been paid by the employer and not by the individual;
- Alimony;
- Child support; and
- Veterans' pensions, which means money paid periodically by the Veterans' Administration to disabled members of the Armed Forces or to survivors of deceased veterans, subsistence allowances paid to veterans for education and on-the-job training, as well as so-called "refunds" paid to ex-servicemen as GI insurance premiums.

b) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum "exit" eligibility level if applicable and below the federal limit of 85% of current SMI. Note – If the income eligibility limits are not statewide, check here . Describe how many jurisdictions set their own income eligibility limits \_\_\_\_\_. Fill in the chart based on the most populous area of the state.

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	(c) (IF APPLICABLE) \$/month Maximum "Entry" Income Level if lower than 85% Current SMI	(d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI	(e) (IF APPLICABLE) \$/month Maximum "Exit" Income Level if lower than 85% Current SMI	(f) (IF APPLICABLE) % of SMI [Divide (e) by (a), multiply by 100] Income Level if lower than 85% Current SMI
1	\$3,657	\$3,108	\$1,962	54%		
2	\$4,782	\$4,064	\$2,655	56%		
3	\$5,907	\$5,021	\$3,348	57%		
4	\$7,032	\$5,977	\$4,042	57%		
5	\$8,157	\$6,933	\$4,735	58%		

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

c) SMI Source and year [Federal Register vol 79\(139\), July 21, 2014](#)

d) These eligibility limits in column (c) became or will become effective on [June 1, 2015](#)

e) Provide the link to the income eligibility limits

[http://ocfs.ny.gov/main/policies/external/OCFS\\_2015/INFs/15-OCFS-INF-02%202015%20Income%20Standards%20for%20the%20Child%20and%20Family%20Services%20Plan.pdf](http://ocfs.ny.gov/main/policies/external/OCFS_2015/INFs/15-OCFS-INF-02%202015%20Income%20Standards%20for%20the%20Child%20and%20Family%20Services%20Plan.pdf).

### 3.1.5 Graduated Phase-Out of Assistance

The CCDBG Act of 2014 added a provision that requires States and Territories to provide for a graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income. Providing a graduated phase-out supports long-term family economic stability by allowing for wage growth and a tapered transition out of the child care subsidy program. (658E (c)(2)(N)(iv)) This might be achieved through policies such as establishing a second income eligibility threshold at redetermination (e.g., establishing a different eligibility threshold for families first applying for assistance and those already receiving assistance, sometimes called and "exit threshold") or by granting a sustained period of continued assistance to the family before termination.

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

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe the policies and procedures for graduated phase-out \_\_\_\_\_
- Not implemented. The State must provide a State-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than \_\_\_\_\_)

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

- Overall Target Completion Date (no later than September 30, 2016) September 30, 2019
  - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented. Currently, local districts may elect a 6-month or 12-month eligibility redetermination period.
    - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable OCFS has begun to implement the 12-month eligibility by not allowing those local districts that currently have a 12-month eligibility redetermination to change it to a six-month period.
    - Unmet requirement - Identify the requirement(s) to be implemented. OCFS has examined current NYS Social Services Law and related regulations. This review indicated that changes to statute and regulation will be needed to comply with CCDBG standards. Before proceeding farther, OCFS is waiting for the final set of new CCDF regulations. Once they have been adopted, OCFS will be able to propose a comprehensive package of statutory and/or regulatory changes that will be needed in order to comply with this and other requirements. Therefore, OCFS is requesting a three-year legislative waiver for this requirement.

If states are given the flexibility to create their own phase-out strategies, OCFS will seek to create a phase-out process that is as streamlined as possible with the minimal number of graduated steps based on income. To the extent practicable, OCFS will allow some local district discretion on how to conduct the phase-out.
  - Tasks/Activities – What steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Both legislative and rule changes.
    - Projected start date for each activity: July 1, 2015.
    - Projected end date for each activity: September 30, 2019.

Implementation Plan Timeline:

- July 2015: Began work on needed statutory and regulatory changes

- January - June 2016: Explore relevant strategies in other states that may be applicable to the New York State context
  - Fall 2016: Within two months of issuance of a final CCDF set of rules, partner with NY's Early Childhood Advisory Council to co-sponsor a series of roundtables on the implications of the new rules on families, child care providers, and existing state statutes
  - January - April 2017: Hold public hearings on suggested recommendations that emerged from the roundtable convenings. Gather additional feedback from local districts and other stakeholders on strategies that are under consideration by OCFS to come into compliance with the new federal rules
  - May - September 2017: Incorporate relevant input into draft statutory package
  - October – December 2017: Internal review completed by OCFS and relevant executive agencies; draft legislative package is finalized
  - January 2018: Submit proposed legislation to the Legislature at the start of the legislative session; passage by June 30, 2018
  - January - July 2018: Revise licensing and subsidy regulations to complement proposed statutory changes
  - August 2018: Submit proposed regulatory package to the Department of State to publish in the *New York State Register* and start the required public comment period
  - September 2018: Regulations published in the *New York State Register* as proposed rule
  - November 2018: 45-day regulatory public comment period ends
  - December 2018: Address public comments
  - January - February 2019: Re-publication in the *New York State Register*, as necessary, with reassessment of additional public comments, as applicable.
  - March 1, 2019: Final adoption published
  - March - September 2019: Develop and conduct training; implement database system changes to accommodate graduated phase-out
  - September 30, 2019: Implementation of graduated phase-out
- Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Family Services Division of Child Care Services
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity? Local Departments of Social Services

### 3.1.6 Fluctuation in Earnings

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

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

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

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement. Currently, income is based on the average monthly income for a period of not less than one month nor in excess of three months prior to application, adjusted for any changes in income known or expected to occur during the period of authorization. If income fluctuates significantly, the average monthly amount shall be computed based on income received during a period of not less than three months or more than six months.

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

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

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

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information. Check the information that the Lead Agency documents and include in the description what information is required and how often. There are no federal requirements for specific documentation or verification procedures.

Applicant identity. Describe. LDSSs establish their own procedures to document and verify identity. These may include driver's license, passport, naturalization certificate, photo ID, hospital/doctor's records, and/or social security records.

Applicant's relationship to the child. Describe. LDSSs establish their own procedures to document and verify relationships. These may include school records, birth certificates, adoption records, and/or hospital records.

Child's information for determining eligibility (e.g., identity, age, etc.). Describe. LDSSs establish their own procedures to document and verify identity. These may include school records, birth certificates, adoption records, and/or hospital records.

Work. Describe. LDSSs establish their own procedures to document and verify identity. These may include pay stubs; business records; income tax records; and correspondence from employers, the Social Security Administration, Veterans Administration, state employment agencies, and/or state welfare agencies.

Job training or Educational program. Describe. LDSSs establish their own procedures to document and verify identity. These may include school catalogs and schedules, training schedules, school grades.

Family income. Describe. Adequate documentation of gross income can include pay stubs, business records, income tax records, and/or correspondence from employers, the Social Security Administration, Veterans Administration, state employment agencies, state welfare agencies and/or providers of pensions.

Household composition. Describe. LDSSs establish their own procedures to document and verify household composition. These may include marriage/death certificates, separation agreements, divorce decree, social security records, VA records, statement from landlord, school records, birth certificates, and/or adoption records.

Applicant residence. Describe. LDSSs establish their own procedures to document and verify residency. These may include statement from landlord, current rent receipt or lease, and/or mortgage records.

Other. Describe

**Reminder** – Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start – Child Care Partnerships, or public educational standards which may include pre-k settings (<http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01>).

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

- Time limit for making eligibility determinations. Describe length of time. OCFS regulations require that LDSSs determine eligibility within 30 days of the date of application.
- Track and monitor the eligibility determination process
- Other. Describe \_\_\_\_\_
- None

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

Per CCDF regulations, Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization, however Lead Agencies may wish to re-examine those definitions in light of new purposes articulated in Reauthorization and to promote alignment across programs. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State/Territory TANF agency in accordance with section 407(e)(2) of the Social Security Act.

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

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

State/Territory TANF Agency The criteria below were developed in consultation with the New York State Office of Temporary and Disability Assistance (OTDA), are promulgated in regulation by the New York State Office of Children and Family Services, and implemented by OTDA.

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

- "appropriate child care": "Appropriate child care" means the child care provider is open for the hours and days the parent or caretaker relative would need child care in order to comply with the applicable work requirements and the provider is able and willing to provide child care services to the applicable child(ren) including addressing any special needs of the applicable child(ren).
- "reasonable distance": Reasonable distance means the child care provider is located within a reasonable distance from the parent or caretaker relative's home and work activity, based on locally accepted community standards as defined by the LDSSs in the child care portion of the district's Child and Family Services Plan.
- "unsuitability of informal child care": Unsuitability of informal care means the physical condition of the home or the physical or mental condition of the informal provider would be detrimental to the health, welfare and/or safety of the applicable child(ren).
- "affordable child care arrangements": "Affordable child care arrangements" means the parent or caretaker relative would have sufficient income to pay the family share for the child care services, if required according to state regulations, and/or to pay the cost of care above the market rate, if applicable. If the potential provider is a caregiver of informal child care who would be providing care in the child(ren)'s home, affordable also means that the parent or caretaker relative would have sufficient income to provide the caregiver with all the required federal and state employment benefits.

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

- In writing
- Verbally
- Other. Describe \_\_\_\_\_
- List the citation to this TANF policy 18 NYCRR § 415.4(c)(7)(ii)

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

- Yes. The Lead Agency certifies that it will require families to certify that the family assets do not exceed \$1,000,000 no later than September 30, 2016. New York will add this certification to the application.

### 3.2 Increasing Access for Vulnerable Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. This did not change under reauthorization. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill

priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B))

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

- a. Provide definition of “Children with special needs.” A child with special needs means a child who is incapable of caring for himself or herself and who has been diagnosed as having one or more of the following conditions to such a degree that it adversely affects the child’s ability to function normally: visual impairment; deafness or other hearing impairment; orthopedic impairment; emotional disturbance; mental retardation; learning disability; speech impairment; health impairment; autism; or multiple handicaps. Any such diagnosis must be made by a physician, licensed or certified psychologist or other professional with the appropriate credentials to make such diagnosis and describe how services are prioritized providers caring for children with special needs may receive a higher rate.
- b. Provide definition of “Families with very low incomes.” LDSSs define the income level that constitutes “very low income” in their districts. Very low income must be established at or below 200 percent of the State Income Standard. Currently, levels at which LDSSs have established “very low income” range from 100 percent to 200 percent of the State Income Standard and describe how services are prioritized. LDSSs report to OCFS how they prioritize families that fall under their definition of very low income and special needs in the Child and Family Services Plan and in their Annual Plan Updates to OCFS.
- c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act) TANF families that are participating in their required activity are guaranteed child care. Families that are transitioning off TANF due to increased income or child support are guaranteed child care for 12-months after their TANF case closed. Families that are eligible for TANF but only request child care are also guaranteed child care as long as they would remain eligible for TANF. The co-pay is waived for families on Temporary Assistance.

3.2.2 Improving Access for Homeless Children and Families.

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

training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and 3) conduct specific outreach to homeless families. (658E(c)(3))

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

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

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

Describe the following:

- a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements \_\_\_\_\_
- b. Procedures to conduct outreach to homeless families to improve access to child care services \_\_\_\_\_
- c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services \_\_\_\_\_

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

- Overall Target Completion Date (no later than September 30, 2016): September 30, 2016
- Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other): OCFS has examined the CCDBG requirements against current NYS Social Services law and regulations. OCFS' proposed plan will require changes to NYS regulations, but not changes to state statute, to comply with CCDBG standards. Given the urgency of the homeless issue,

OCFS is moving necessary regulatory change forward in advance of the rest of the package. OCFS will consider children who are homeless a priority for child care assistance even if their parents are not receiving temporary assistance, are not working or participating in work activities, and are not receiving child protective or other services.

OCFS has outlined a plan of action to:

- Expand New York’s CCDF definition of protective services to include homelessness, making families who are homeless eligible for child care, even if they are not receiving temporary assistance. Homeless families will not need to be in a protective services case.
  - Require local districts to provide child care subsidies to support families for at least three months of job search, with local option to provide those subsidies for up to six months. And, if the parent(s) still doesn’t have a job after the job search period ends, the CCDBG Act would provide that they have an additional three months of child care before their subsidy end.
  - Direct local districts to waive family fee for homeless families.
  - Revisit the existing enhanced subsidy rate for providing child care during non-traditional hours, to require a minimum enhanced rate of five percent above the applicable market rate, with local district option to go up to 15 percent above the market rate.
  - Create a new enhanced subsidy rate to incentivize providers to serve children who are homeless – with a minimum floor, accompanied by an LDSS option to go up to 15 percent above the applicable market rate.
  - Broaden the scope of one of the milestones of our performance-based contracts with CCR&Rs to allow them to do targeted outreach to homeless shelters and other emergency shelter locations (e.g., local motels, campgrounds) or dwellings known to have numbers of doubled-up families in order to help those families access child care.
- Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable OCFS conducted a survey in 2015 with the statewide network of CCR&Rs requesting descriptions of the services they currently provide to the homeless population. The CCR&Rs are prioritizing responses to specific child care requests related to homeless children. The CCR&Rs provide a comprehensive network of diverse organizations that addresses the needs of, and provides intervention and prevention services for the homeless and those at risk of homelessness. The statewide network of CCR&Rs coordinate their services with many other community agencies assisting homeless families to achieve sustainable independence by supporting them with tailored services including shelter, food, personalized case management, and a diverse network of caring volunteers. Through available and affordable child care options, a homeless family will be afforded the time needed to seek housing and employment opportunities. In addition, the NYC Administration for Children’s Services (ACS) has, in close collaboration with the New York City Department of Homeless Services (DHS),

developed a series of new measures to better understand the needs of ACS child welfare-involved families in shelters and to increase interagency coordination to promote proper services and supports. ACS is working with both the NYC Human Resources Administration (HRA) and DHS to prepare a survey to administer to homeless families to better understand the barrier that families face in trying to access child care services.

- Unmet requirement - Identify the requirement(s) to be implemented a) b) c)
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Regulatory and policy changes will need to be made.

Implementation Plan Timeline:

- Projected start date for each activity:
  - February 2016: Begin work on regulatory change
  - February 2016: Begin work to develop training material utilizing our existing training contract with the State University of New York, Professional Development Program and working with the New York State Education Department
  - March 2016: Outreach to the New York State Office of Temporary and Disability Assistance
  - April 26, 2016: Submit proposed regulations to the Department of State for publication in the *New York State Register*
  - May 11, 2016: Proposed regulations published in the *New York State Register*
  - June, 2016: Broaden the scope of one of the milestones of our performance-based contracts with the CCR&Rs to allow them to do targeted outreach to homeless shelters and other emergency dwellings to help families' access child care. The contract is effective October 1, 2016
  - June 25, 2016: End of 45-day public comment period; assess public comment
  - July 19, 2016: Submit revised regulations, as necessary, to the Department of State for publication in the *New York State Register*
  - August 3, 2016: Revised regulations published in the *New York State Register*
  - August-September: Implement system changes in order to give priority to children who are homeless
  - September 2, 2016: End of 30-day public comment period; assess public comment, as applicable
  - September 13, 2016: Submit notice of adoption to the *New York State Register* to be included in the September 28, 2016 issue
- Projected end date for each activity: September 30, 2016.
- Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Family Services, Division of Child Care Services

- Partners – Who is the responsible agency partnering with to complete implementation of this activity?
  - Local Departments of Social Services
  - New York State Education Department
  - State University of New York Professional Development Program
  - New York State Office of Temporary and Disability Assistance

### 3.3 Protection for Working Parents

#### 3.3.1 Twelve-Month Eligibility

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

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

In addition, this change means the State/Territory may not terminate assistance prior to the end of the 12-month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. Examples of temporary changes include but are not limited to: absence from employment due to maternity or extended medical leave, changes in seasonal work schedule, or if a parent enrolled in training or educational program is temporarily not attending class between semesters.

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

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency’s policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination \_\_\_\_\_
- Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) September 30, 2019

- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

- Implemented requirement(s) – Identify any requirement(s) implemented to date The requirement is not fully implemented. OCFS provides 12 months of transitional child care to working families whose temporary assistance case has closed. Also, LDSSs had been allowed to select a six-month or 12-month eligibility period. As an interim step, OCFS will no longer allow LDSSs to change from a 12-month eligibility period to a six-month eligibility period.

OCFS has examined the CCDBG requirements against current New York State Social Services Law and regulations. A review indicates that both statutory and regulatory changes will be needed to comply with CCDBG standards. OCFS will propose a comprehensive package of statutory and/or regulatory changes that will be needed in order to comply with this and other requirements. Therefore, OCFS is requesting a three-year legislative waiver for this requirement.

- Unmet requirement - Identify the requirement(s) to be implemented OCFS has not yet required statewide 12-month eligibility. Even in those districts that have a 12-month eligibility period, families may lose their eligibility if there is a change in circumstances such as an increase of income or loss of employment.

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)? LDSSs currently have the option of choosing six-month or 12-month recertification period. As an interim step, OCFS will no longer approve requests from LDSSs to change the eligibility period from 12 months to six months.

OCFS has examined the need to change current child care regulations to comply with any statutory amendments and other changes needed that are not rooted in statute. Changes to state regulation must follow the steps outlined in the State Administrative Procedures Act (SAPA). This includes, but is not limited to, assessing the need for change, costs, rural impacts, and employment impacts. In addition, OCFS must allow for a 45-day public comment period followed by an assessment of that comment. Once regulations are finalized, OCFS work plans will include updates to its forms, applications, policies, and procedures. Informing the LDSSs of upcoming changes to statute and regulation will be a part of the roll-out plan as well.

Implementation Plan Timeline:

- July 2015: Began work on needed statutory and regulatory changes
- January - June 2016: Explore relevant strategies in other states that may be applicable to the New York State context

- Fall 2016: Within two months of issuance of a final CCDF set of rules, partner with NY’s Early Childhood Advisory Council to co-sponsor a series of roundtables on the implications of the new rules on families, child care providers, and existing state statutes
  - January - April 2017: Hold public hearings on suggested recommendations that emerged from the roundtable convenings. Gather additional feedback from local districts and other stakeholders on strategies that are under consideration by OCFS to come into compliance with the new federal rules
  - May - September 2017: Incorporate relevant input into draft statutory package
  - October – December 2017: Internal review completed by OCFS and relevant executive agencies; draft legislative package is finalized
  - January 2018: Submit proposed legislation to the Legislature at the start of the legislative session; passage by June 30, 2018
  - January - July 2018: Revise licensing and subsidy regulations to complement proposed statutory changes
  - August 2018: Submit proposed regulatory package to the Department of State to publish in the New York State Register and start the required public comment period
  - September 2018: Regulations published in the New York State Register as proposed rule
  - November 2018: 45-day regulatory public comment period ends
  - December 2018: Address public comments
  - January - February 2019: Re-publication in the New York State Register, as necessary, with reassessment of additional public comments, as applicable.
  - March 1, 2019: Final adoption published
  - March - September 2019: Develop and conduct training; implement database system changes to accommodate 12-month minimum eligibility
  - September 30, 2019: Implementation of 12-month minimum eligibility
- Projected start date for each activity: July 1, 2015.
  - Projected end date for each activity: September 30, 2019.
  - Agency – Who is responsible for complete implementation of this activity? Office of Children and Family Services (OCFS), Division of Child Care Services
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity? Local departments of social services

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

The CCDBG Act of 2014 provides States and Territories the option – but does not require them – to terminate assistance prior to re-determination at 12 months if a parent loses employment or

if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible.

(658E(c)(2)(N)(iii)) Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and redetermination period if families are eligible at the end of their job search, training or education attendance period.

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

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

Yes, the State/Territory terminates assistance prior to 12 months due to parent’s loss of work or cessation of attendance at a job training or education program ONLY. List the Lead Agency’s policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs. Without documentation that there are plans to rehire the employee or rejoin the training or education program, OCFS considers the loss to be non-temporary.

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

### 3.3.3 Prevent Disruption of Work

The CCDBG Act of 2014 added a requirement that States and Territories must describe in the Plan the procedures and policies in place to ensure that parents (especially parents in families receiving assistance under TANF) are not required to unduly disrupt their employment, education or job training activities in order to comply with the State/Territory’s or designated local entity’s requirements for redetermination of eligibility for assistance. (658E(c)(2)(N)(ii)) Examples include implementing re-determination strategies to verify income and employment electronically as opposed to more onerous practices such as asking parents and families to come to the subsidy office for an in-person visit, or aligning eligibility with other early care and education or public benefits programs to collect information centrally. The process by which States and Territories collect eligibility documentation represents a potential barrier to services, particularly when documentation can only be provided in-person during standard work hours. States and Territories can offer a variety of family-friendly mechanisms for submitting documentation for eligibility determinations and/or re-determination.

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

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment: Working families may mail in their recertification. Semi-annual face-to-face recertifications are required by 18 NYCRR §351.21, which governs required contacts and investigation for Temporary Assistance recipients. However, an LDSS may request a waiver to use a mail-in recertification process in lieu of a face-to-face recertification process for one of the two yearly required contacts for the Temporary Assistance recipients in accordance with 06 ADM-10.

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

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

### 3.4 Family Contribution to Payment

The statute requires Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care that is not a barrier to families receiving CCDF. (658E(c)(5) In addition to

income and size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. The sliding fee scale is subject to review by ACF as part of ongoing monitoring efforts to CCDBG compliance.

3.4.1 Provide the CCDF copayments in the chart below according to family size for one child in care. Note – If the sliding fee scale is not statewide, check here . Describe how many jurisdictions set their own sliding fee scale 58 Local Departments of Social Services. Fill in the chart based on the most populous area of the State.

Family Size	(a) Lowest “Entry” Income Level Where Copayment First Applied	(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(c) What is the percent of income for (b) ?	(d) Highest “Entry” Income Level Before No Longer Eligible	(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(f) What is the percent of income for (e)?
1	\$981	\$65	6.6%	\$1,962	\$330	16.8%
2	\$1,328	\$65	4.9%	\$2,655	\$446	16.8%
3	\$1,674	\$65	3.9%	\$3,348	\$563	16.8%
4	\$2,021	\$65	3.2%	\$4,042	\$684	16.9%
5	\$2,368	\$65	2.7%	\$4,735	\$801	16.9%

a) What is the effective date of the sliding fee scale(s)? June 1, 2015

b) Provide the link to the sliding fee scale <http://ocfs.ny.gov/main/childcare/plans.asp>

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

Fee is a dollar amount and

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

Fee is a percent of income and

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

- Fee is per family
- Contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe: New York State assesses a family fee towards the cost of child care based on income. The family fee is a single fee, not dependent on the number of children in care or whether full- or part-time care is needed.

Each of 58 LDSSs is allowed to select a percentage, between 10 and 35 percent, to calculate the family fee. Each LDSS submits its selection of fee percentage in its Child and Family Services Plan, which is subject to the approval of OCFS. Each LDSS calculates the fee for the family on a weekly basis by applying the fee percentage to the excess of the family's gross annual income over the State Income Standard for that family size and dividing by 52. The State Income Standards (SIS), effective June 1, 2015, are based on the poverty guidelines by family size published in the *Federal Register* Volume 80, Number 14, dated January 22, 2015. The SIS is updated each year when federal poverty levels are adjusted. There is a minimum family fee of \$1 per week.

OCFS believes that LDSSs should be allowed flexibility in establishing a fee policy that meets the needs of their communities and, therefore, has approved waivers to the state fee methodology. Waivers that have been approved include a cap to the amount of the family share at 17 percent of the family's gross income, a cap at 10 percent of the family's gross income, a higher minimum weekly family share, and the establishment of a pro-rated family share for part time child care.

The following chart indicates the fee percentage each district in New York State has selected as of March 1, 2016:

District	Fee Percentage
Albany	25%
Allegany	20%
Broome	25%
Cattaraugus	10%
Cayuga	20%
Chautauqua	20%
Chemung	25%
Chenango	35%

<b>District</b>	<b>Fee Percentage</b>
<b>Clinton</b>	20%
<b>Columbia</b>	20%
<b>Cortland</b>	35%
<b>Delaware</b>	25%
<b>Dutchess</b>	30%
<b>Erie</b>	35%
<b>Essex</b>	20%
<b>Franklin</b>	15%
<b>Fulton</b>	35%
<b>Genesee</b>	35%
<b>Greene</b>	35%
<b>Hamilton</b>	25%
<b>Herkimer</b>	35%
<b>Jefferson</b>	25%
<b>Lewis</b>	25%
<b>Livingston</b>	10%
<b>Madison</b>	25%
<b>Monroe</b>	35%
<b>Montgomery</b>	35%
<b>Nassau</b>	20%
<b>New York City</b>	35%
<b>Niagara</b>	20%
<b>Oneida</b>	25%
<b>Onondaga</b>	35%
<b>Ontario</b>	20%

<b>District</b>	<b>Fee Percentage</b>
<b>Orange</b>	35%
<b>Orleans</b>	35%
<b>Oswego</b>	15%
<b>Otsego</b>	30%
<b>Putnam</b>	20%
<b>Rensselaer</b>	35%
<b>Rockland</b>	25%
<b>St. Lawrence</b>	25%
<b>Saratoga</b>	20%
<b>Schenectady</b>	35%
<b>Schoharie</b>	35%
<b>Schuyler</b>	10%
<b>Seneca</b>	35%
<b>Steuben</b>	10%
<b>Suffolk</b>	20%
<b>Sullivan</b>	35%
<b>Tioga</b>	35%
<b>Tompkins</b>	20%
<b>Ulster</b>	25%
<b>Warren</b>	25%
<b>Washington</b>	25%
<b>Wayne</b>	25%
<b>Westchester</b>	27%
<b>Wyoming</b>	35%
<b>Yates</b>	35%

Other. Describe \_\_\_\_\_

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

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

Number of hours the child is in care

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

Other. Describe other factors \_\_\_\_\_

No.

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

Yes, the Lead Agency waives family contributions/co-payments for families with income at or below the poverty level for families of the same size. The poverty level used by the Lead Agency for a family size of 3 is \$20,090 annually (effective June 1, 2015), Federal Register vol 80(14), Jan 22, 2015.

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

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

Limits the maximum co-payment per family. Describe. LDSSs are not allowed to select a co-pay of more than 35 percent regardless of the number of children in the family.

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

Minimizes the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5. Describe \_\_\_\_\_

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

Covers all fees (such as registration, supplies, field trips) to minimize the additional fees charged to the families by the provider. Describe. LDSSs are allowed to pay for registration.

Other. Describe \_\_\_\_\_

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

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

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

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

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

### **4.1 Parental Choice In Relation to Certificates, Grants or Contracts**

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

4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2)). At the time of application and redetermination, the LDSS must inform the applicant of the child care providers with which the LDSS has arrangements for the provision of child care services. Parents receive a certificate or voucher that may be used by the parent to select a contracted or non-contracted provider. Parents are referred to the local CCR&R agency for a list of eligible providers and are also informed of parental choice through verbal communications and informational material provided to them at the time of application and redetermination. Parents may also search for providers on the OCFS website. Searches can be done by type of provider, zip code, school district. In addition, parents can search for providers that provide care during non-traditional hours and providers that are allowed to administer medication.

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

Certificate form provides information about the choice of providers, including high quality providers

Certificate is not linked to a specific provider so parents can choose provider of choice

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 application

Community outreach, workshops or other in-person activities

Other. Describe

4.1.3 Child Care Services Available through Grants or Contracts

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

Yes. If yes, **describe:**

- the type(s) of child care services available through grants or contracts

- the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.) \_\_\_\_\_
- the process for accessing grants or contracts \_\_\_\_\_
- the range of providers available through grants or contracts \_\_\_\_\_
- how rates for contracted slots are set through grants and contracts \_\_\_\_\_
- how the State/Territory determines which entities to contract with for increasing supply and/or improving quality \_\_\_\_\_
- if contracts are offered statewide and/or locally \_\_\_\_\_

No. If no, skip to 4.1.4.

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

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

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

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

- Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs
- Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-k programs that meet higher quality standards
- Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased education requirements to higher compensation
- Programs to serve children with disabilities or special needs

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

4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access.

OCFS regulations require the following:

The parent of a child receiving care must have:

1. Unlimited and on-demand access to such child;
2. The right to inspect all parts of the building used for child day care or which could present a hazard to the health or safety of the child whenever the parent requests at any time during the hours of operation of the child day care program;
3. Unlimited and on-demand access to the director and teachers whenever such child is in care or during the normal hours of operation and
4. Unlimited and on-demand access to written records concerning such child except where access to such records is otherwise restricted by law.

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

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

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

Restricted based on provider meeting a minimum age requirement. Describe The Lead Agency will propose a regulatory change that will require that a child care provider must be at least 18 years of age.

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

Restricted to care by relatives. Describe \_\_\_\_\_

Restricted to care for children with special needs or medical condition. Describe \_\_\_\_\_

Restricted to in-home providers that meet some basic health and safety requirements. Describe \_\_\_\_\_

Other. Describe The child's parent/caretaker must provide the child care provider with all employment benefits required by state and/or federal law, and must pay the caregiver at least the minimum wage, if required.

No

#### 4.2 Assessing Market Rates and Child Care Costs

The new law revises the provisions for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the price to parents of child care services by geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in advance of the Plan submittal in order to avoid delays with Plan approval.

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

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

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

The State/Territory must set CCDF subsidy payment rates in accordance with the results of the current MRS or alternative methodology. When setting payment rates, the law requires States and Territories to take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered reimbursement or other methods) and without, **to the extent practicable**, reducing the number of families receiving CCDF relative to the number served as of

November 2014. In taking the cost of providing quality into consideration, it is important to consider such key factors as what it takes to support increased stability and reduced provider turnover when setting payment rates.

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

- MRS
- Alternative Methodology. Describe \_\_\_\_\_
- Both. Describe \_\_\_\_\_
- Other. Describe \_\_\_\_\_

4.2.2 Describe how the State consulted with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities which could include worker organizations prior to developing and conducting the MRS or alternative methodology. OCFS had already begun the market rate survey process before the CCDF preprint was issued; the process was too far advanced to consult with the state's SAC. OCFS did consult with Civil Service Employees Association and United Federation of Teachers (the two unions that represent family-based child care providers) prior to beginning the market rate survey, to see if the questions were understandable, and so that both unions could encourage their members to participate if they were contacted.

4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable. To be considered valid and reliable, the MRS or alternative methodology must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variation, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data such as child care resource and referral data if they are representative of the market. If an alternative methodology such as cost modeling is used, demonstrate that the methodology used reliable models that estimated the cost of delivering services in center- and home-based settings at each level of quality defined by the State/Territory.

The 2015 Market Rate Survey (MRS) was a statistically valid and reliable telephone survey with data collection performed by an independent research firm on behalf of OCFS. The raw data were provided to OCFS for analysis upon completion of the survey data collection.

The MRS utilized a stratified, random sample study design in order to represent the range of the child care market. The total universe of licensed and registered child care providers in New York State was first divided into 20 strata. Each combination of four types of child care (day care centers, school-age child care programs, family day care homes, and group family day care homes) and five county cluster groupings was a single stratum. Sample size requirements were

calculated for each of the 20 strata at a 95 percent confidence level and five percent margin of error. Providers were randomly selected from each stratum and invited to participate in the survey. Out of a universe of 20,535 licensed and registered child care providers in New York State, 4,767 providers ultimately completed the telephone survey.

In order to achieve the final sample size of 4,767 completed surveys, 11,624 providers were randomly sampled to participate in the survey, for an overall response rate of 41 percent. However, it should be noted that fewer than 10 percent of selected providers who were both eligible and reachable on the telephone refused to participate in the survey. The majority of the 59 percent that did not participate either could not be reached by telephone or had recently closed or offered only free programs (i.e., they did not have private child care rates and therefore were not eligible to participate, such as Head Start programs, or afterschool child care programs fully funded by the school district).

The study design sought to maximize response rates as well as the accuracy of the data provided. The following steps were taken: a letter was mailed to the universe of 20,535 child care providers two weeks prior to the initiation of the survey explaining the survey process and providing a hard copy survey form to allow providers to prepare for a call; very few changes were made to the 2015 MRS blank survey form that was mailed to providers compared to the 2013 MRS, familiarity with the survey format facilitated completion of the survey; a minimum of three call attempts were made at different times of day and days of the week in order to attempt to reach providers; a call-back number was available in the event that a provider could not complete the survey when first contacted or if a survey had to be interrupted; the survey was conducted over the telephone in order to assist providers with completing the survey, should any clarifications be needed; interviewers were trained with regard to the MRS and the use of a Computer Assisted Telephone Interview (CATI) system; OCFS provided the contractor with data validity checks to be utilized during data collection in order to verify potentially erroneous data.

Once the data collection phase was complete, the raw survey data was forwarded to OCFS for analysis. First, the raw data were cleaned to correct or exclude outliers. Next, data conversions were applied in order to have sufficient data in each combination of modality, county group, age group, and rate type. The number of data conversions performed was minimized by converting values to the most commonly reported rate types. For example, the majority of providers who had full-time rates reported those rates as per week, therefore other rate types, such as per day, month, year, were converted to weekly rates. Next, OCFS performed a small, random sample follow-up survey to verify the accuracy of the data that were recorded during the original survey. Data analysis is currently ongoing. The MRS is the basis upon which New York State sets maximum child care subsidy payment rates, and therefore it will not be finalized until the payment rates take effect, which is anticipated to be June 1, 2016.

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

- a) Geographic area (e.g., statewide or local markets): The 2015 Market Rate Survey included five county cluster groupings that represent different price structures for child care across

the state. Prior to the 2015 MRS data collection, the validity of the composition of the five county cluster groupings was re-assessed by conducting a cluster analysis of the 2013 MRS rates. The results of the cluster analysis indicated that one county should be moved from one county cluster grouping to another. A statistically valid sample size was calculated for each combination of five county cluster groups and four types of child care.

b) Type of provider: The 2015 Market Rate Survey included four types of licensed and registered child care with different price structures for child care. A statistically valid sample size was calculated for each combination of five county cluster groups and four modalities of child care.

c) Age of child: The 2015 Market Rate Survey includes four age groups of children to allow for different prices by age: infant (birth up to 18 months for day care centers, birth up to 2 years for home-based providers), toddler (18 months up to 36 months for day care centers, 2 years for home-based providers), pre-school (3 through 5 years), and school age (6 years and older). Prior to the 2015 MRS data collection, the validity of the composition of the five county cluster groupings was re-assessed by conducting a cluster analysis of the 2013 MRS rates. The results of the cluster analysis indicated that one county should be moved from one county cluster grouping to another, which it was.

d) Describe any other key variations examined by the market rate survey, such as quality level None

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

- a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016) April 1, 2014.
- b) Date report containing results was made widely available, no later than 30 days after the completion of the report May 9, 2014.
- c) How the report containing results was made widely available and provide the link where the report is posted if available 2013 MRS: The current revised child care market rate regulations, which included the maximum subsidy reimbursement rates based on the 2013 MRS, were published for public comment in the *New York State Register* on February 12, 2014. Local districts, as well as the public, had the opportunity to comment on the proposed regulations at that time. Subsequently, the regulations were adopted as a final rule on April 30, 2014 with an effective date on the new reimbursement rates of April 1, 2014.

In addition to the publication of the revised regulations in the *New York State Register*, OCFS notified LDSS commissioners first on February 19, 2014 (14-OCFS-INF-01) of the forthcoming maximum reimbursement rate changes and again on May 9, 2014 (14-OCFS-LCM-03). OCFS also made a short video, available to the

public on the OCFS website, explaining how the 2013 MRS was conducted and its relationship to child care subsidy maximum reimbursement rates.

[http://ocfs.ny.gov/main/policies/external/OCFS\\_2014/INFs/14-OCFS-INF-01%20Child%20Care%20Market%20Rates%20Advance%20Notification.pdf](http://ocfs.ny.gov/main/policies/external/OCFS_2014/INFs/14-OCFS-INF-01%20Child%20Care%20Market%20Rates%20Advance%20Notification.pdf)

[http://ocfs.ny.gov/main/policies/external/OCFS\\_2014/LCMs/14-OCFS-LCM-03%20Child%20Care%20Market%20Rates%20%202014-2015.pdf](http://ocfs.ny.gov/main/policies/external/OCFS_2014/LCMs/14-OCFS-LCM-03%20Child%20Care%20Market%20Rates%20%202014-2015.pdf)

[http://ocfs.ny.gov/main/childcare/Market\\_Rate\\_video.asp](http://ocfs.ny.gov/main/childcare/Market_Rate_video.asp)

2015 MRS: The 2015 MRS anticipated completion date is June 1, 2016, the date upon which the new subsidy maximum payment rates are anticipated to take effect. OCFS will notify LDSS commissioners and the public of the proposed new child care subsidy maximum payment rates prior to the effective date of the new rates, which will followed by a regulatory comment period. Local policies will be made available on the OCFS website. In addition, OCFS plans to create a new video to explain the 2015 MRS and its relationship to the maximum child care subsidy payment rates.

### 4.3 Setting Payment Rates

4.3.1 Provide the base payment rates and percentiles (based on current MRS or alternative methodology) for the following categories. The ages and types of care listed below are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory or reflective of the terms that your State/Territory may use for particular ages. Please use the most populous geographic region (serving highest number of children). Note – If the payment rates are not set by the State/Territory, check here . Describe how many jurisdictions set their own payment rates The rates below are based on the 2013 MRS.

- a) Infant (6 months), full-time licensed center care in most populous geographic region
  - Rate: \$330 per week in New York City unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: 69th
- b) Infant (6 months), full-time licensed FCC care in most populous geographic region
  - Rate: \$175 per week in New York City registered family day care. \$200 per week in New York City licensed group family day care unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: 69th
- c) Toddler (18 months), full-time licensed center care in most populous geographic region
  - Rate: \$255 per week in New York City unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: 69th
- d) Toddler (18 months), full-time licensed FCC care in most populous geographic region

- Rate: \$160 per week in New York City registered family day care. \$185 per week in New York City licensed group family day care unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: 69th
- e) Preschooler (4 years), full-time licensed center care in most populous geographic region
- Rate: \$233 per week in New York City unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: 69th
- f) Preschooler (4 years), full-time licensed FCC care in most populous geographic region
- Rate: \$150 per week in New York City registered family day care. \$175 per week in New York City licensed group family day care unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: 69th
- g) School-age child (6 years), full-time licensed center care in most populous geographic region
- Rate: \$215 per week in New York City unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: 69th
- h) School-age child (6 years), full-time licensed FCC care in most populous geographic region
- Rate: \$150 per week in New York City registered family day care. \$175 per week in New York City licensed group family day care unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: 69th
- i) Describe the calculation/definition of full-time care: Full-time care is defined as the weekly market rates. The LDSS must apply the weekly market rates as the maximum payment limit only when the child care services are provided for 30 or more hours over the course of five or fewer days in a single week.
- j) Provide the effective date of the payment rates: April 1, 2014.
- k) Provide the link to the payment rates  
[http://ocfs.ny.gov/main/policies/external/OCFS\\_2014/LCMs/14-OCFS-LCM-03%20Child%20Care%20Market%20Rates%20%202014-2015.pdf](http://ocfs.ny.gov/main/policies/external/OCFS_2014/LCMs/14-OCFS-LCM-03%20Child%20Care%20Market%20Rates%20%202014-2015.pdf)

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

for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

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

- Tiered rate/rate add-on for non-traditional hours. Describe. Local districts can pay up to 15 percent above the applicable market for non-traditional hours.
- Tiered rate/rate add-on for children with special needs as defined by the State/Territory. Describe. Presently, the special needs rate is the highest market rate based on the amount of care provided. OCFS continues to collaborate with legal advocates, child care councils, unions (CSEA & UFT), advocates for early childhood education, staff from not-for-profit child care centers, and pediatricians on revising the existing special needs administrative directive. OCFS is reviewing the rate for providers caring for children with special needs. Research work has been completed on how other states prioritize families that have a child with special needs, reimbursement rates, and a Special Needs Application has been drafted.
- Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on). Describe
- Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory. Describe. LDSSs can pay up to 15 percent above the market rate for accredited programs.
- Tiered rate/rate add-on for programs serving homeless children. Describe. Require that LDSSs pay a minimum of five percent above the Market Rate up to 15 percent above the Market Rate.
- Other tiered rate/rate add-on beyond the base rate. Describe. LDSSs must pay 5 percent (and can pay up to 10 percent) above the market rate to enrolled legally-exempt in-home and legally-exempt family child care providers that have taken 10 or more hours of training annually.
- None.

4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology. The current maximum child care subsidy payment rates became effective April 2014 and were calculated at the 69th percentile of the 2013 MRS.

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014. For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary. N/A, because NYS is using rates that became effective April 1, 2014.

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

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

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

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

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

Rates based on data on the cost to the provider of providing care meeting certain standards. Describe \_\_\_\_\_

Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile. Describe. New York State purposely chose to set payment rates at the 69<sup>th</sup> percentile of the most recent child care market rate survey as a means of balancing the need to adjust payment rates to reflect the current child care market ensuring that parents receiving child care subsidies have access to approximately seven out of 10 child care providers and simultaneously limiting the reduction in the number of families who could be served by the child care subsidy program. Payment rates prior to the 2013 market rate survey had been set at the 75<sup>th</sup> percentile as per federal recommendation. While the 2013 payment rates were set below the recommended 75<sup>th</sup> percentile, even at the 69<sup>th</sup> percentile, only 11 percent of payment rates declined compared to

the 2011 payment rates; the remainder increased (40 percent) or stayed the same (49 percent) as in 2011. Furthermore, in the most populous geographic region (New York City), which comprises more than half of New York State’s child care subsidy population, none of the rates for licensed or registered child care decreased when set at the 69<sup>th</sup> percentile.

By using the 69<sup>th</sup> percentile instead of the 75<sup>th</sup> percentile, payment rates were in many cases the same as at the 75<sup>th</sup> percentile or showed modest differences. For example, 71 out of 75 weekly payment rates at the 69<sup>th</sup> percentile were from \$0 to \$10 per week lower than if the 75<sup>th</sup> percentile had been used; and 68 out of 75 daily payment rates at the 69<sup>th</sup> percentile were from \$0 to \$3 per day lower than if the 75<sup>th</sup> percentile had been used.

Data on the proportion of children receiving subsidy being served by high-quality providers. Describe.

Data on where children are being served showing access to the full range of providers. Describe \_\_\_\_\_

Data on how rates set below the 75th percentile allow CCDF families access to the same quality of care as families not receiving CCDF. Describe:

Feedback from parents, including parent survey or parent complaints. Describe

Other. Describe \_\_\_\_\_

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

Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access by March 1, 2016. Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access 69<sup>th</sup> percentile

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

- Overall Target Completion Date (no later than September 30, 2016) \_\_\_\_\_
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_

- Unmet requirement - Identify the requirement(s) to be implemented  
\_\_\_\_\_

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

**4.5 Payment Practices and Timeliness of Payments**

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

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

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 4.5.2 through 4.5.3 below.
- Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
  - Overall Target Completion Date (no later than September 30, 2016): September 30, 2019
  - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other). Partially Implemented. LDSSs have the

option to pay up to 40 days of absences in a six-month period. Currently out of the 58 LDSSs in New York State, 52 of them pay for absences. LDSSs also have the option to pay for child care services for up to four weeks when child care arrangements would otherwise be lost and the subsequent activity is expected to begin within that period. Additionally, LDSSs have the option to pay up to five days for program closures.

- Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable OCFS has identified regulations and policy changes that are needed.
- Unmet requirement - Identify the requirement(s) not fully implemented. OCFS needs to establish regulations requiring that all LDSSs pay for a minimum number of absences for regulated providers. Therefore, in order to incorporate relevant regulations into the larger package of changes, including those that require statutory changes, OCFS is requesting a three-year legislative waiver for this requirement.
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Adopt new regulations governing payment for absences.
  - Projected start date for each activity: July 1, 2015.
  - Projected end date for each activity: September 30, 2019.
  - Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Family Services Division of Child Care Services
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity? Local departments of social services.

#### Implementation Plan Timeline:

- July 2015: Began work on needed regulatory changes
- January - June 2016: Explore relevant strategies in other states that may be applicable to the New York State context
- Fall 2016: Within two months of issuance of a final CCDF set of rules, partner with NY's Early Childhood Advisory Council to co-sponsor a series of roundtables on the implications of the new rules on families, child care providers, and existing state statutes
- January - April 2017: Hold public hearings on suggested recommendations that emerged from the roundtable convenings. Gather additional feedback from local districts and other stakeholders on strategies that are under consideration by OCFS to come into compliance with the new federal rules
- May 2017 – January 2018: Temporary pause while statutory changes for other provisions are drafted, reviewed, submitted to the Legislature, and passed

- January - July 2018: Incorporate regulations requiring that all LDSSs pay for a minimum number of absences for regulated providers into the larger package of licensing and subsidy regulations
- August 2018: Submit proposed regulatory package to the Department of State to publish in the *New York State Register* and start the required public comment period
- September 2018: Regulations published in the *New York State Register* as proposed rule
- November 2018: 45-day regulatory public comment period ends
- December 2018: Address public comments
- January - February 2019: Re-publication in the *New York State Register*, as necessary, with reassessment of additional public comments, as applicable.
- March 1, 2019: Final adoption published
- March - September 2019: Develop and conduct training; implement database system changes to accommodate revised payment practices
- September 30, 2019: Implementation of minimum number of paid absences for regulated providers

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

Pays prospectively prior to the delivery of services. Describe Districts are allowed to pay prior to the delivery of services but are not required to do so.

Pays within no more than 21 days of billing for services. Describe There is no regulatory timeframe in which a district must make payments. Typically, districts make payments on a bi-monthly or monthly cycle. One district pays on a weekly cycle.

Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance. Describe including the State/Territory's definition of occasional absences Districts may elect to make payments for child care when a child is absent from a program. The maximum allowed absences in a 12-month period is 80-days. In addition to absences districts must pay for child care services to families receiving Temporary Assistance during breaks in activities, for a period up to two weeks. Such child care services may be authorized for up to one month when child care arrangements would otherwise be lost and the program or employment is expected to begin within that one period, and when the parent or caretaker relative is: engaged in work, participating in work activities , performing community service per Social Services Law Article 5, Title 9-B, a teen parent attending high school or equivalent training; or physical or mentally incapacitated, or absent from home due to family duties. For all other families who are

eligible under the NYSCCBG or Title XX a district may provide child care services while the parent/caretaker is waiting to enter an approved activity/employment, or on a break between activities for a period up to two weeks or for a period up to one month, where child care arrangements would otherwise be lost and the subsequent activity is expected to begin within that period.

Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe There is no regulatory provision to pay for an absence if a child attends at least a certain percentage of authorized time.

Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month. Specify the number of absence days allowed and paid for and describe There is no regulatory provision to pay for an absence if a child attends at least a certain number of days in a month.

Pays on a full-time or part-time basis (rather than smaller increments such as hourly) Districts are required to pay for services provided.

Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.) registration fees

Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment If payments are made through the child care time and attendance system providers are able to see in real time when a family is no longer eligible or if there is a change in the family's benefit.

Has a timely appeal and resolution process for payment inaccuracies and disputes. Describe The Child Care Time and Attendance system (CCTA) has been implemented in all districts outside of NYC. A child's attendance can be submitted electronically to the districts and CCTA calculates payments and uploads these payments to our statewide payment system. This has resulted in faster and more accurate payments to providers. In addition CCTA can electronically notify a provider when there are any changes in the family's eligibility. Currently out of the 58 local department of social services districts in NYS 52 of them pay for absences. Social services districts also have the option to pay for child care services up to four weeks when child care arrangements would otherwise be lost and the subsequent activity is expected to begin within that period. Additionally social services districts have the option to pay up to 5 days for program closures.

Other. Describe The Child Care Time and Attendance system (CCTA) has been implemented in all LDSSs outside of New York City. A child's attendance can be submitted electronically to the LDSS and CCTA calculates payments and uploads these payments to the statewide payment system. This has resulted in faster and more accurate payments to providers. In addition, CCTA can electronically notify a provider when there are any changes in the family's eligibility. Currently, out of the 58 LDSSs in New York State, 52 of them pay for absences. LDSSs also have the option to pay for

child care services for up to four weeks when child care arrangements would otherwise be lost and the subsequent activity is expected to begin within that period. Additionally, LDSSs have the option to pay up to five days for program closures.

For those options not checked above, explain why these options are not generally accepted payment practices in your State/Territory \_\_\_\_\_

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

Policy on length of time for making payments. Describe length of time As previously stated OCFS does not have a policy on the length of time for making a payment.

Track and monitor the payment process Payments can be monitored and tracked through the Child Care Time and Attendance System and through the statewide payments system known as BICS.

Use of electronic tools (e.g., automated billing, direct deposit, etc.) Describe. OCFS has currently implemented the Child Care Time and Attendance (CCTA) system in all LDSSs outside of New York City. CCTA tracks attendance, calculates bills and produces notices for families and providers regarding child care subsidy eligibility.

Other. Describe \_\_\_\_\_

#### 4.6 Supply Building Strategies to Meet the Needs of Certain Populations

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

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

Yes. Describe data sources \_\_\_\_\_

No. If no, how does the State/Territory determine most critical supply needs? In 2015, New York State allocated in excess of \$794 million for the New York State Child Care Block Grant Subsidy Program to 58 LDSSs to provide child care assistance to eligible families. Even at this level, New York State cannot fund child care subsidies to all eligible families who need them. The allocation methodology the state employs is based on the eligible Child Care Block Grant claims of each LDSS for the preceding years. LDSSs that use their entire allocation and put additional local funds into the subsidy program are advantaged by this methodology and will receive a greater proportion of available subsidy funds in the next year's allocation. This incentivizes LDSSs to invest in the program, thereby reaching the most critical areas of their districts.

New York State has coordinated with the statewide network of CCR&Rs, which has the priority of increasing the supply and improving the quality of child care services for infant and toddlers,

children with special needs, and children who receive care during non-traditional hours. CCR&Rs continue to receive requests for child care during non-traditional hours from parents who require care for part-time, drop in, evenings, weekends, overnights, and rotating care. CCR&Rs work diligently with the families to locate this type of care, which is very difficult to find. Families with infants and toddlers up to 36 months are in high need of child care referrals from CCR&Rs . As infant care continues to be difficult to find due to the limited number of slots of care available, parents are more likely to reach out to a CCR&R for assistance with finding care.

The number of requests for child care for children with developmental or educational disabilities and/or in response to the “Policy Statement on Inclusion of Children with Disabilities in Early Childhood Programs,” released jointly by the Departments of Education (ED) and Health and Human Services (HHS) on September 14, 2015, states that all young children with disabilities should have access to inclusive high-quality early childhood programs, where they are provided with individualized and appropriate support in meeting high expectations. New York State CCR&Rs are coordinating with many other community organizations that serve special needs children to develop stronger service linkages. Recognizing the need to prioritize high-quality child care programs for special needs children, the state’s CCR&Rs are building their capacity for referrals to meet these children’s needs. CCR&Rs, through various community outreach efforts, attempt to increase the supply of child care providers, as well as service providers who will be able to respond to the unique needs of this population.

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

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 4.4.1)

Other. Describe There are seven Infant/Toddler (I/T) Regional Resource Centers available to develop and coordinate I/T services in partnership with OCFS for the promotion and understanding of the importance of, and strategies for, improving the quality of care for infants and toddlers. OCFS funds these seven I/T regional centers to address, on a statewide basis, the unique and special needs of the I/T population. The services include: providing technical assistance to providers on best practices in serving infant and toddlers; assisting providers in addressing issues that have been identified in their program(s); working with providers as they develop new infant and toddler care; promoting and facilitating child care staffing to obtain specialized training in serving the infant and toddler

population; and making available best practices information on infant and toddlers in various mediums to the child care provider community.

Because New York State's is a state-supervised, county-administered system, innovation often happens on the local level. So, for example, New York City administers the largest contracted child care system in the country. Called EarlyLearn NYC, the program aligns standards across the Head Start, child care and pre-kindergarten programs whose funding streams are blended within EarlyLearn. Standards now common to all programs include developmentally appropriate and validated curricula, formal child screening and assessments, focus on dual-language learners, family and child social support, special needs inclusion, longer daily sessions and year-round service. Specific to supporting the needs of infants and toddlers, through EarlyLearn, New York City contracts with family child care networks to recruit, train, and support family child care providers with the goal of improving program quality for member providers who are primarily caring for infants and toddlers.

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 4.4.1)

Other. Describe LDSSs use priorities that they established for families with a child with special needs and pay an enhanced rate. OCFS is working with a variety of stakeholders, including experts in the field of serving children with disabilities, to develop policies that will provide better opportunities for collaboration between LDSSs, child care providers and those providing services to children with disabilities as part of an Early Intervention Plan. OCFS is also evaluating its special needs market rate to see if the rate is sufficient to cover the child care costs of children with disabilities.

OCFS has completed and posted to its website online orientation sessions that take would-be applicants through a series of informational sessions aimed at recruiting, educating, and describing the standards expected of child care programs. There are separate orientation modules for day care centers, school-age child care, family day care and group family day care. The orientation sessions are separated into these modality-specific sessions to attract and address

the goals of applicants in setting up programs to effectively serve all children, including those with disabilities.

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 4.4.1)
- Other. Describe Local districts can pay up to 15 percent above the applicable market for non-traditional hours

d) Homeless children (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 4.4.1)
- Other. Describe. LDSSs may provide child care services to families that are homeless. Additionally, LDSSs are required to prioritize the federal priorities (special needs and very low income). Of New York State's 58 LDSSs, 34 have prioritized very low income as their number one priority; many homeless families would fall under this priority.

Additional ideas that OCFS has generated in order to prioritize homeless families for child care subsidies, and to help child care providers better meet the developmental needs of children who are homeless, include the following:

- Require LDSSs to provide child care subsidies to support families for at least three months of job search, with local option to provide those subsidies for up to six months. If the parent(s) still doesn't have a job after the job search period ends, the CCDBG Act would provide that they have an additional three months of child care before their subsidy ended.
- Revisit the existing enhanced subsidy rate for providing child care during non-traditional hours, to require a minimum enhanced rate of five percent above the applicable market rate, with an LDSS option to go up to 15 percent above the market rate.

- Create a new enhanced subsidy rate to incentivize providers to serve children who are homeless – with a minimum floor, accompanied by an LDSS option to go up to 15 percent above the applicable market rate.

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

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe \_\_\_\_\_
- Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016) September 30, 2018
  - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) partially implemented
    - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable OCFS has begun laying the groundwork for the initial phase of the Child Care Mapping Research Project (CCMRP) by identifying data sources for each mapping component, obtaining training for project staff for geocoding and Graphic Imaging System (GIS) software, and beginning the process of securing software licenses. The absence of an existing data map that identifies the locations of underserved areas requires that OCFS engage in preliminary data analysis prior to developing a strategy for targeting services to underserved areas. This means that OCFS is requiring a two-year extension in order to implement this activity.
    - Unmet requirement - Identify the requirement(s) to be implemented Identifying families in high areas of poverty and unemployment that do not have access to high-quality programs.

Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Prior to selecting appropriate child care supply building strategies, New York State will collect and analyze data on the child care provider supply and child care needs of families by geographic location across the state. To this end, New York State will conduct a CCMRP. The first phase of the CCMRP will map where low-income families live (using publically available Census data to assess areas that have significant concentrations of poverty), where licensed child care providers are located, and where CCDF providers are located. The goal of this initial phase of CCMRP is to map where families and providers are located across New York State and to assess gaps in the supply of child care providers, particularly for low-income families. The second phase of the CCMRP will be to build up the child care mapping framework established in phase one and overlay child care provider quality data. As New York State has not yet implemented a Quality Rating and Improvement System (QRIS) statewide, the state will investigate the possibility of using alternative less intensive quality rating mechanisms potentially using existing data sources in order to achieve this goal.

Implementation Plan Timeline:

- June 1, 2016: Hire a staff person to serve as a Lead Agency point person in this initiative
- September 1, 2016: Access available data on locations of low-income families
- March 1, 2017: Utilize data on low-income families and map where low-income families live
- September 1, 2017: Build up the child care mapping framework and overlay child care provider quality data
- September 30, 2018: Use data from the CCMRP to develop policies and procedures to improve access in these underserved areas
  - Projected start date for each activity December 1, 2015
  - Projected end date for each activity September 30, 2018
  - Agency – Who is responsible for complete implementation of this activity? NYS Office of Children and Family Services
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity? NYS Office of Information Technology Services

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

The CCDBG Act of 2014 makes child care safer by defining minimum health and safety requirements for child care providers. This includes both the standards that must be established and the pre-

service/orientation and ongoing minimum training required. States and Territories must also explain why exemptions to any of the licensing standards do not endanger the health and safety of CCDF children in legally-exempt care. States and Territories are required to have standards for CCDF providers regarding group size limits and appropriate child-to-provider ratios based on the age of children in child care.

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

## 5.1 Licensing Requirements and Standards

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

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

Each of the following child care modalities, except school-age child care programs, may care for children who are from 6 weeks of age to 12 years of age. They operate for more than three hours per day:

### Day Care Centers

Child day care center means a program or facility that is not a residence in which child day care is provided on a regular basis to more than six children for more than three hours per day per child for compensation or otherwise, except those programs providing care as a school-age child care program (as defined ibelow).

### Small Day Care Centers

Small day care center means a program or facility that is not a residence in which child day care is provided to three through six children for more than three hours per day per child for compensation or otherwise.

#### Family Day Care Homes

Family day care home means a program caring for children for more than three hours per day per child in which child day care is provided in a family home for three to six children. The number of caregivers required in a family day care home depends on the number of infants in care. A family day care home may provide child day care services to up to two additional children if such additional children are of school age and such children receive services only before or after the period such children are ordinarily in school or during school lunch periods, or school holidays, or during those periods of the year in which school is not in session.

#### Group Family Day Care Homes

Group family day care home shall mean a program caring for children for more than three hours per day per child in which child day care is provided in a family home for seven to 12 children of all ages, except for those programs operating as a family day care home which care for seven or eight children. A group family day care program may provide child day care services to four additional school-age children who receive services only before or after the normal school day or during school lunch periods, school holidays, or during those periods of the year in which school is not in session.

#### School-Age Child Care Programs

School-age child care program means a program or facility that is not a residence in which child day care is provided to an enrolled group of seven or more children under 13 years of age during the school year before and/or after the period such children are ordinarily in school or during school lunch periods. School-age child care programs also may provide care during school holidays and those periods of the year in which school is not in session, including summer vacation. Such programs must operate consistent with the local school calendar.

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

Yes. Describe which types of providers that can receive CCDF are exempt from licensing and how such exemptions do not endanger children who receive CCDF services from legally-exempt providers: To provide subsidized child care in New York State, all child care providers must demonstrate they meet basic health and safety standards through one of the following processes: licensing, registration or enrollment. In accordance with federal guidelines, the enrollment process was developed to establish a set of health and safety requirements for the otherwise unregulated "legally-exempt" child care providers, known in New York State as "legally exempt" child care providers, to establish their eligibility to provide subsidized child care.

No

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

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 5.1.4 and 5.1.5 below.

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

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

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

a) Licensed Center-Based Care

1. Infant

- State/Territory age definition: Infant means a child up to 18 months of age.
- Ratio: 1:4

- Group size: 8
2. Toddler
    - State/Territory age definition: Toddler means a child 18 months to 36 months of age.
    - Ratio: 1:5
    - Group size: 12
  3. Preschool
    - State/Territory age definition: Preschooler means a child who is at least 3 years of age and who is not yet enrolled in kindergarten or a higher grade.
    - Ratio: 1:10
    - Group size: 21
  4. School-Age
    - State/Territory age definition: School-aged child means a child under 13 years of age who is enrolled in kindergarten or a higher grade.
    - Ratio: 1:10
    - Group size:
      - for children ages 6 through 9: maximum group size is 20
      - for children ages 10 through 12: maximum group size is 30
5. If any of the responses above are different for exempt child care centers, describe. For legally-exempt, enrolled center-based programs: OCFS has no ratio requirements, maximum group size, or age restrictions.
6. Describe, if applicable, ratios and group sizes for centers with mixed age groups. For purpose of maintaining a continuity of care model, centers may mix children six weeks of age to thirty-six months of age in one classroom. The teacher/child ratio and maximum group size in continuity of care classrooms must be applicable to the youngest child in the group.

b) Licensed Group Child Care Homes:

1. Infant
  - State/Territory age definition: Infant means a child up to 18 months of age.
  - Ratio: 6:12
  - Group size: 12
2. Toddler
  - State/Territory age definition: Toddler means a child 18 months to 36 months of age.
  - Ratio: 2:12
  - Group size: 12
3. Preschool

- State/Territory age definition: Preschooler means a child who is at least 3 years of age and who is not yet enrolled in kindergarten or a higher grade.
  - Ratio: 2:12
  - Group size: 12
4. School-Age
- State/Territory age definition: School-aged child means a child under 13 years of age who is enrolled in kindergarten or a higher grade.
  - Ratio: 2:16
  - Group size: 16
5. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day. A group family day care program may care for up to 16 total children: the maximum number of 16 accounts for 12 children who are not school-age and an additional four school-age children who may only attend outside school hours. If children under the age of 2 are cared for at the group family day care home, there must be one caregiver present for every two children or part thereof under the age of 2 in the home. The provider's own children, who are not school-age count in ratio. The provider's own non-school-age children also count toward limits for infants/toddlers and for maximum group size. A provider's own school-age children do not count in ratio or group size.
6. If any of the responses above are different for exempt group child care homes, describe. For legally-exempt, enrolled family child care, we have no ratio requirements or age restrictions. However, we do restrict the number of unrelated children in full-time care to two. Additionally, a provider may care for an unlimited number of relative children, except when the provider cares for one or two unrelated children; then, the number of full-time children the provider may care for is limited to eight.

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

c) Licensed Family Child Care:

1. Describe the ratios: Infant (6 months) ratio: 3:6, Toddler (must be over 2 years) ratio: 1:6; Preschool (4 years) ratio: 1:6; School-Age (6 years) ratio: 1:8, group size Infant (6 months) group size 6; Toddler (must be over 2 years) group size 6; Preschool (4 years) group size 6; School-Age (6 years), group size Eight, the threshold for when licensing is required Three non-relative children, maximum number of children that are allowed in the home at any one time Eight, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size, The provider's own children who are not school-age count in ratio, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day The provider's own non-school-

age children count towards limits for infants/toddlers and for maximum group size. A provider's own school-age children do not count in ration or group size.

2. If any of the responses above are different for exempt family child care home providers, describe. For legally-exempt, enrolled family child care, we have no ratio requirements or age restrictions. However, we do restrict the number of unrelated children in full time care to two. Additionally, a provider may care for an unlimited number of relative children, except when the provider cares for one or two unrelated children; then the number of full-time children the provider may care for is limited to eight.

d) Any other eligible CCDF provider categories:

Describe the ratios for Legally-exempt group care, OCFS has no ratios , group size for Legally-exempt group care, OCFS has no group size, the threshold for when licensing is required licensing is not required for this group, maximum number of children that are allowed in the home at any one time not applicable to legally-exempt group care , if the State/Territory requires related children to be included in the child-to-provider ratio or group size not applicable, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day not applicable.

3. if the State/Territory requires related children to be included in the child-to-provider ratio or group size: Yes, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day not applicable to school-age facilities.

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

a) Licensed Center-Based Care:

1. Infant lead teacher Group teacher – Must be at least 18 years of age.
  - Associate's degree in Early Childhood, Child Development or related field AND One year experience related to caring for infants and toddlers; OR
  - Infant and Toddler Child Care and Education credential; or Infant and Toddler Child Development Associate credential; or other office-recognized credential specific to the infant/toddler developmental period AND two years' experience related to caring for children; OR
  - Child Development Associate credential AND two years of experience caring for children, one in which must be related to caring for infants or toddlers; OR Nine college credits in Early Childhood, Child Development or a related field, with a plan of study leading to: Infant and Toddler Child Care and Education

credential; or Infant Toddler Child Development Associate credential; or other office-recognized credential specific to the infant/toddler developmental period; or Associate's Degree in Early Childhood, Child Development or a related field AND Two years' experience related to caring for children, one of which must be related to working with infants or toddlers.

and assistant teacher qualifications. An assistant teacher in a day care center must have a High School diploma or its equivalent or have completed one year experience working with children less than 13 years of age . In order to be left unsupervised with children an assistant teacher must be 18 years of age or older.

2. Toddler lead teacher Group teacher – Must be at least 18 years of age.
  - Associate's degree in Early Childhood, Child Development or related field AND One year experience related to caring for infants and toddlers; OR
    - Infant and Toddler Child Care and Education credential; or Infant and Toddler Child Development Associate credential; or other Office-recognized credential specific to the infant/toddler developmental period AND two years' experience related to caring for children; OR
    - Child Development Associate credential AND two years' experience related to caring for children; OR
    - Nine college credits in Early Childhood, Child Development or a related field, with a plan of study leading to: Infant and Toddler Child Care and Education credential; or Infant Toddler Child Development Associate credential; or other office-recognized credential specific to the infant/toddler developmental period; or Associate's Degree in Early Childhood, Child Development or a related field AND Two years' experience related to caring for children, one of which must be related to working with infants or toddlers.
    - and assistant teacher qualifications: An assistant teacher in a day care center must have a high school diploma or its equivalent or have completed one year experience working with children less than 13 years of age . In order to be left unsupervised with children an assistant teacher must be 18 years of age or older.
3. Preschool lead teacher: Group teacher – Must be at least 18 years of age.
  - Associate's degree in Early Childhood, Child Development or related field; OR
  - Child Development Associate credential or other office-recognized credential specific to the preschool developmental period AND One year experience related to caring for children; OR
    - Nine college credits in Early Childhood, Child Development or a related field, with a plan of study leading to: Child Development Associate credential; or Associate's Degree in Early Childhood, Child Development or a related field AND Two years' experience related to caring for children.

and assistant teacher qualifications An assistant teacher in a day care center must have a high school diploma or its equivalent or have completed one year

experience working with children less than 13 years of age . In order to be left unsupervised with children an assistant teacher must be 18 years of age or older.

#### 4. School-Age lead teacher

Group teacher – Must be at least 18 years of age.

- Associate's degree in Child Development, Elementary Education, Physical Education, Recreation or related field; OR
- School-age Child care credential or other Office- recognized credential specific to the school-age developmental period AND One year experience working with children less than 13 years of age; OR
- High school diploma or its equivalent AND Two years direct experience working with children less than 13 years of age.

and assistant teacher qualifications: An assistant teacher in a day care center must have a high school diploma or its equivalent or have completed one year experience working with children less than 13 years of age . In order to be left unsupervised with children, an assistant teacher must be 18 years of age or older.

5. Director qualifications: To be qualified as a director, a person must be 18 years of age and possess either:

- a Bachelor's degree, including or in addition to, 12 credits in Early Childhood, Child Development, or a related field; and, one year full-time teaching experience in a child day care center, family or group family day care home or other early childhood program; and one year of experience supervising staff in a child care program or a related field of work; or
- a New York State Children's Program Administrator Credential; and, one year full-time teaching experience in a child day care center, family or group family day care home or other early childhood program; and one year of experience supervising staff in a child care program or a related field of work; or
- an Associate's degree in Early Childhood or related field with a plan of study leading to: a Bachelor's degree, or a New York State Children's Program Administrator Credential, and two years of full-time teaching experience in a child day care center, family or group family day care home, or other early childhood program; and two years of experience supervising staff in a child care program or a related field of work; or
- a Child Development Associate Credential with a plan of studying leading to: a Bachelor's degree or, a New York State Children's Program Administrator Credential, and two years of full-time teaching experience in a child day care center, family or group family day care home, or other early childhood program, and two years of experience supervising staff in a child care program or a related field of work.

b) Licensed Group Child Care Homes:

1. Infant lead teacher: A group family caregiver must be at least 18 years old; have a minimum of either two years of experience caring for children less than 6 years of age, or one year of experience caring for children less than 6 years of age plus six hours of training or education in early childhood development. The phrase "experience caring for children" can mean child-rearing as well as paid and unpaid experience caring for children. The term "training" can mean educational workshops and courses in caring for preschool-age children.

and assistant qualifications A group family assistant caregiver must be at least 18 years old; have a minimum of either two years of experience caring for children less than 6 years of age, or one year of experience caring for children less than 6 years of age plus six hours of training or education in early childhood development. The phrase "experience caring for children" can mean child-rearing as well as paid and unpaid experience caring for children. The term "training" can mean educational workshops and courses in caring for preschool-age children.

2. Toddler lead teacher: Same as above for Group family day care.

and assistant qualifications: Same as above for Group family day care.

3. Preschool lead teacher: Same as above for Group family day care.

and assistant qualifications: Same as above for Group family day care.

4. School-Age lead teacher: Same as above for Group family day care.

and assistant qualifications: Same as above for Group family day care.

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

c) Licensed Family Child Care home provider qualifications Same as above for all age groups.

d) Other eligible CCDF provider qualifications For legally-exempt, enrolled, center-based programs: OCFS has no requirements pertaining to qualifications.

For License-exempt "enrolled" family child care, OCFS has no requirements pertaining to qualifications. Currently, the minimum age a provider may be is 14 years old. However, OCFS is proposing to change the minimum age to 18.

School-age child care facilities: Group Teacher – must be at least 18 years of age.

- Associate's degree in Child Development, Elementary Education, Physical Education, Recreation or a related field; OR

- School-age Child care credential or other office-recognized credential specific to the school-age developmental period AND One year experience working with children less than 13 years of age; OR
- High school diploma or its equivalent AND Two years' direct experience working with children under 13 years of age.

School-age child care facilities: Director qualifications

- a person must possess either: an Associate's degree in Child Development, Elementary Education, Physical Education, Recreation or a related field; and two years direct experience working with children less than 13 years of age, including at least one year in a supervisory capacity in a child care program or related field of work, or a New York State Children's Program Administrator credential; and two years direct experience working with children less than 13 years of age, including at least one year in a supervisory capacity in a child care program or related field of work, or a School Age Child Care Credential or other Office recognized credential specific to the school-age developmental period, and two years direct experience working with children less than 13 years of age, including at least one year in a supervisory capacity in a child care program or related field of work, or wo years of college with 18 credits in Child Development, Elementary Education, Physical Education, Recreation or a related field; and two years direct experience working with children less than 13 years including at least one year in a supervisory capacity in a child care program or related field of work.

School-age child care facilities: Assistant teacher qualifications:

- a person must possess either: a High School Diploma, or its equivalent, or one year of experience working with children less than 13 years of age.

For License-exempt "enrolled" in-home child care providers, OCFS has no requirements pertaining to qualifications. OCFS is currently examining health and safety standards for legally-exempt providers with the goal of strengthening health and safety standards and improving program quality.

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

of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

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

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

Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas as of March 1, 2016. Provide a citation and a link if available



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

- Overall Target Completion Date (no later than September 30, 2016)  
September 30, 2019
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other). New York State law currently requires that all child care staff complete 30 hours of training every two years across nine broad training topics. While any of the topics named above in the CCDBG (658E(c)(2)(l)(i)) would fit into the broad topics in New York State law, New York State law does not name the CCDBG topics specifically as requirements.

Currently OCFS has the following health and safety standards for legally-exempt, enrolled, providers/programs:

- Care may be provided only to children in compliance with immunization requirements
  - Administration of medication
  - Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury
  - Precautions in transporting children (if applicable)
- 
- Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable The topics named in the CCDBG (658E(c)(2)(l)(i) would fit into the broad topics in New York State law.
  - Unmet requirement - Identify the requirement(s) to be implemented: Not all of the federal topics are covered in New York State’s statutorily mandated training.
- 
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)? OCFS has recently completed a multi-year project in updating and revising its child day care regulations across all modalities of care. OCFS recognizes that making any changes to law or regulation will impact the Division of Child Care Services, its regulatory staff, its child care workforce, providers of services, and the families of children in care. As such, OCFS’ first step will be to assertively gain a working knowledge and detailed understanding of the CCDBG requirements. Once the specifics of the requirements are understood, OCFS will recommend amendments to New York State Social Services Law, followed by regulatory changes where necessary.

While specific amendments are being reviewed by the New York State Legislature, OCFS will begin examining the need to change current child care regulations to comply with any statutory amendments and other needed changes that are not rooted in statute. Changes to state regulation must follow the steps outlined in the State Administrative Procedures Act (SAPA). This includes, but is not limited to, assessing the need for change, costs, rural impacts and employment impacts. In addition, OCFS must allow for a 45-day public comment period followed by an assessment of those comments. Once the necessary statutory and regulatory changes have been finalized, OCFS work plans will include changes to its Child Care Facility System (the computer database system of record) and updates to its forms,

applications, policies, and procedures. Informing the field of upcoming changes to statute and regulation will also be a part of the roll-out plan. Parallel to these processes will be the need for OCFS to evaluate the state's responsibility and accountability to the child day care workforce so that an orientation as comprehensive as the one required in the CCDBG is available and accessible to all who are required to meet this mandate.

In its earliest stages of planning, OCFS will be estimating the fiscal impact and the funding needed to comply with the CCDBG requirements. Changes to the New York State statutory training requirements to meet federal law will be a labor-intensive project resulting in the following: Staff resources from OCFS' counsel's office are needed to propose changes to New York State statute and then educate members of the Legislature about the need to modify Social Services Law as it concerns the statutory training topics. As a result of statutory changes, regulatory changes will be required; as will changes to the OCFS Child Care Facility System which lists, records, and counts training topics and hours. Dissemination and training of both licensors and providers to educate them on changes and requirements must follow; an exploration of how training needs can be met and by which training organizations will need to be completed; and finally changes will result in a need to alter contracts with training organizations that prepare and provide OCFS training sessions. OCFS has yet to identify the available funding needed to accomplish these activities. Therefore, OCFS is requesting a three-year legislative waiver for this requirement.

- Projected start date for each activity:
  - July 2015: Began work on needed statutory and regulatory changes
  - January - June 2016: Explore relevant strategies in other states that may be applicable to the New York State context
  - Fall 2016: Within two months of issuance of a final CCDF set of rules, partner with NY's Early Childhood Advisory Council to co-sponsor a series of roundtables on the implications of the new rules on families, child care providers, and existing state statutes
  - January - April 2017: Hold public hearings on suggested recommendations that emerged from the roundtable convenings. Gather additional feedback from local districts and other stakeholders on strategies that are under consideration by OCFS to come into compliance with the new federal rules
  - May - September 2017: Incorporate relevant input into draft statutory package

- October – December 2017: Internal review completed by OCFS and relevant executive agencies; draft legislative package is finalized
- January 2018: Submit proposed legislation to the Legislature at the start of the legislative session; passage by June 30, 2018
- January - July 2018: Revise licensing and subsidy regulations to complement proposed statutory changes
- August 2018: Submit proposed regulatory package to the Department of State to publish in the *New York State Register* and start the required public comment period
- September 2018: Regulations published in the *New York State Register* as proposed rule
- November 2018: 45-day regulatory public comment period ends
- December 2018: Address public comments
- January - February 2019: Re-publication in the *New York State Register*, as necessary, with reassessment of additional public comments, as applicable.
- March 1, 2019: Final adoption published
- March - September 2019: Develop and conduct training; implement database system changes to accommodate the newly defined health and safety requirements
- September 30, 2019: Implementation of new health and safety requirements

Additional steps specific to legally-exempt providers:

- January – March 2017: Begin to draft policy to address new health and safety requirements
- January – March 2017: Start to revise applicable state forms and support materials to include new health and safety requirements for legally-exempt providers; as well as new enrollment forms, inspection forms, and other materials.
- March – December 2017: Develop new training curricula for legally-exempt provider training and Train-the-Trainer materials
- January –December 2018: Make changes to CCFS to incorporate changes to policy.
  - Add new federal health and safety requirements
  - Track compliance with the new requirements
  - Implement testing protocols
- January 2018: Draft changes to Enrollment Agency contracts to address new performance milestones.

- January 2018: Draft Changes to OCFS contracts with agencies that will be either training Enrollment Agency staff or training legally-exempt providers, including Enrollment Agencies, unions, and other training organizations.
- Projected end date for each activity: September 30, 2019.
- Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Family Services
- Partners – Who is the responsible agency partnering with to complete implementation of this activity? NYS Office of Information Technology, State University of New York, City University of New York, Civil Service Employees Association, United Federation of Teachers, Child Care Resource & Referral agencies, and other training organizations.

b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above. ACF expects these trainings will be part of a broader systematic approach and progression of professional development (as described in Section 6) within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education. The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children Basics* for best practices and recommended time needed to address these training requirements.

Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above as of March 1, 2016. Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements

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

- Overall Target Completion Date (no later than September 30, 2016): September 30, 2019
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other): Partially Implemented. New York State law currently requires that all child care staff complete 30 hours of training every two years across nine broad training topics. While any of the topics named above in the CCGB (658E(c)(2)(l)(i) would fit into the broad topics in New York State law, New York State law does not name the CCDBG topics specifically as requirements. Furthermore, the workforce in center-based programs are not required to cover all nine mandatory topic areas during pre-service. Rather, they need to complete only 15 hours of training (any of the nine statutory topics) within the first six months. OCFS is closer to the CCDBG goal as it concerns family-based programs. New York State law requires all family day care and group family day care providers to complete health and safety training prior to licensure/registration. The required family-based health and safety course covers most, but not all, of the CCDBG topics.

Legally-exempt, enrolled providers/programs do not have any pre-service or orientation (up to six months) training requirements. However, in order to incentivize training, OCFS offers an enhanced rate of subsidy reimbursement for legally-exempt, enrolled providers who complete ten hours of training annually in health and safety topics identified in New York State Social Services Law.

OCFS has begun to review all available health and safety training that may meet the topics defined in the CCDBG Act. This review indicates that changes to the NYS Social Services Law and regulation will be needed to comply with CCDBG standards. Before proceeding farther, OCFS is waiting for the final set of new CCDF regulations. Once they have been adopted, OCFS will be able to propose a comprehensive package of statutory and/or regulatory changes that will be needed in order to comply with this and other requirements. Therefore, OCFS is requesting a three-year legislative waiver for this requirement.

- Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented. The topics named in the CCGB (658E(c)(2)(l)(i) would fit into the broad topics in New York State law; family-based providers have a training requirement prior to licensure or registration.
- Unmet requirement - Identify the requirement(s) to be implemented: Not all of the federal topics are covered in New York

State's statutorily mandated training; center-based staff are not required to have pre-service training.

Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)? This requirement is linked to 5.1.6a and will be folded into that process and plan for implementation. Currently, New York State requires family day care and group family day care providers to complete a 15-hour course, *Health and Safety Training: Competencies for Becoming a Family or Group Family Day Care Provider*, prior to opening a program. A review of the existing course is underway and content must be modified as necessary to address the ten federal health and safety topic areas. Further modifications of the existing course will be completed to create a classroom health and safety course targeting child care center and school-age program directors. New York State has 218 authorized health and safety trainers deployed across the state. These trainers will be invited to Train-the-Trainer (TOT) sessions in order to learn the new health and safety for child care center and school-age program staff curriculum. Ten regionally-based TOT sessions on the new curriculum are planned by the end of 2016. Upon successful completion of the TOT, these existing health and safety trainers will be authorized to deliver the health and safety training to child care center and school-age program staff.

Additionally, New York State intends to develop a five-hour health and safety e-learning course open to all, including legally exempt enrolled providers, addressing New York State and federal health and safety requirements. This course is expected to be completed by fall 2016 and will be hosted via the Early Childhood Education Training Program website, with links to the course available via the Lead Agency's website. New York State's existing catalog of 12 e-learning courses has proven to be exceptionally popular with just under 115,000 trainees successfully completing the training in 2015. As a pre-service, orientation resource or refresher, the new health and safety e-learning course is expected to be utilized by thousands of child care providers annually.

- Projected start date for each activity:
  - July 2015: Began work on needed statutory and regulatory changes

- January - June 2016: Explore relevant strategies in other states that may be applicable to the New York State context
- Fall 2016: Within two months of issuance of a final CCDF set of rules, partner with NY's Early Childhood Advisory Council to co-sponsor a series of roundtables on the implications of the new rules on families, child care providers, and existing state statutes
- January - April 2017: Hold public hearings on suggested recommendations that emerged from the roundtable convenings. Gather additional feedback from local districts and other stakeholders on strategies that are under consideration by OCFS to come into compliance with the new federal rules
- May - September 2017: Incorporate relevant input into draft statutory package
- October – December 2017: Internal review completed by OCFS and relevant executive agencies; draft legislative package is finalized
- January 2018: Submit proposed legislation to the Legislature at the start of the legislative session; passage by June 30, 2018
- January - July 2018: Revise licensing and subsidy regulations to complement proposed statutory changes
- August 2018: Submit proposed regulatory package to the Department of State to publish in the *New York State Register* and start the required public comment period
- September 2018: Regulations published in the *New York State Register* as proposed rule
- November 2018: 45-day regulatory public comment period ends
- December 2018: Address public comments
- January - February 2019: Re-publication in the *New York State Register*, as necessary, with reassessment of additional public comments, as applicable.
- March 1, 2019: Final adoption published
- March - September 2019: Develop and conduct training; implement database system changes to accommodate new pre-service and ongoing training requirements
- September 30, 2019: Implementation of new training requirements

Additional steps specific to legally-exempt providers:

- April 2016 – December 2016: Review existing training materials for legally-exempt child care providers and identify federal topic areas that are absent and which need to be developed and included in training materials. Begin development of mandatory pre-service training curricula for legally-exempt child care providers and plan progression of training.
  - January – March 2017: Begin to draft policy to address new health and safety requirements and to require pre-service/orientation for legally-exempt providers
  - January – March 2017: Start to revise applicable state forms and support materials to include new health and safety requirements for legally-exempt providers; as well as new enrollment forms, inspection forms, and other materials.
  - March – December 2017: Develop new training curricula and materials for Train-the-Trainer
  - January –December 2018: Make changes to CCFS to incorporate changes to policy.
    - Add new federal health and safety requirements
    - Track compliance with the new requirements
    - Implement testing protocols
  - January 2018: Draft changes to Enrollment Agency contracts to address new performance milestones.
  - January 2018: Draft Changes to OCFS contracts with agencies that will be either training Enrollment Agency staff or training legally-exempt providers, including Enrollment Agencies, unions, and other training organizations.
- 
- Projected end date for each activity: September 30, 2019
  - Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Family Services
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity? State University of New York, City University of New York, Civil Service Employees Association, United Federation of Teachers, Child Care Resource & Referral agencies, and other training organizations

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

☒ Nutrition (including age appropriate feeding). Describe: New York State instituted the following regulatory changes for day care centers and school age child care programs on June 1, 2015: Fluid milk, 100% juice and/or water, are the only beverages a program may provide to children in care. When milk is served as a beverage, low-fat or fat-free milk (1% fat or less) must be served to children 2 years of age or older. Programs that provide meals and/or snacks to infants and children must be in compliance with the USDA Child and Adult Food Program (CACFP) meal pattern. In addition, the program must share information on healthy food and beverage choices and the prevention of childhood obesity with the parent. For family-based programs the following regulations became effective on May 1, 2014: Fluid milk, 100% juice and/or water, are the only beverages a program may provide to children in care. When milk is served as a beverage, low-fat or fat-free milk (1% fat or less) must be served to children 2 years of age or older. OCFS regulations also require that the program must ensure that each child in care for more than four hours a day receives a nutritious meal. The program must provide sufficient and nutritious snacks to children. In addition, the program must share information on healthy food and beverage choices and the prevention of childhood obesity with the parent. The regulations require that when meals are furnished by the program, the servings must be in portions suitable for the size and age of the children in care, including infants. There must be a sufficient amount of food available to children to permit second helpings of nutritious foods. Children must be helped to gain independence in feeding themselves and should be encouraged to learn acceptable table manners appropriate to their developmental levels. Sufficient time, based on age and individual needs, must be allowed for meals so that children will not be hurried. Perishable food, milk and infant formula must be kept refrigerated. Safe drinking water must be available to children at all times and must be offered at intervals that are responsive to the needs of the individual children. Disposable cups, plates and utensils may be used if discarded after use. Plastic eating utensils may be used if such utensils are not easily broken by young children and are discarded after use. Styrofoam cups may not be used for infants or toddlers. The program must obtain a written statement, from the parent of each infant in care, setting forth the breast milk, formula and feeding schedule instructions for the infant and must be updated as changes are made. Where infant formula is required, such formula may be prepared and provided by the parent, or by the program when agreed to in writing by the parent. The program must develop a plan for introducing age-appropriate solid foods in consultation with the parent. If more than one child in the program is receiving breast milk, infant formula or other individualized food items, all containers or bottles must be clearly marked with the child's first and last name. Unused portions of bottles or containers from which children have been spoon-fed must be discarded after each feeding or placed in a securely tied plastic bag and returned to the parent at the end of the day. Heating infant formula, breast milk and other food items for infants in a microwave oven is prohibited. If foods for older children are heated in a microwave, the food must be stirred and allowed to reach serving temperature before serving to prevent burns from hot spots. All devices used to warm breast milk, formula or food for infants, must be kept at a low temperature not exceeding 120°. A caregiver or volunteer must not hold an infant while removing a bottle or infant food from a crock pot or other warming device. All devices used for warming bottles or food must be kept

out of reach of children. Every effort must be made to accommodate the needs of a child who is being breast-fed. Infants six months of age or younger must be held while being bottle-fed. Infants over six months of age must be held while being bottle fed until the infant consistently demonstrates the capability of holding the bottle and ingesting an adequate portion of the contents thereof. The propping of bottles is prohibited. Each infant and toddler must be removed from the crib, playpen, or cot and held or placed in an appropriate chair for feeding. Children may not be placed in a crib with a bottle, food or drink.

Access to physical activity. Describe: OCFS regulations require that there must be physical activity, appropriate to the ages of the children in care every day. Daily supervised outdoor play is required for all children in care, except during inclement or extreme weather or unless otherwise ordered by a health care provider. Climbing and large motor apparatus should be available either inside the child day care center or in the outdoor play space.

Screen time. Describe: In 2015, OCFS added restrictions to screen time in regulation for all modalities of care.

Caring for children with special needs. Describe: OCFS regulations apply to all child care children, typically developing and otherwise. The regulations stress inclusion in their requirements to meet the needs of children with special needs as they pertain to medical needs, behavior management techniques, provider training topics, readiness to advance to the next age group, planning for field trips, emergency preparedness, programming, and furnishings. In addition, a child day care program may not refuse to admit a child to the program solely because the child has a developmental delay or a disability.

Recognition and reporting of child abuse and neglect. Describe OCFS regulations expressly prohibit any abuse or maltreatment of a child receiving child care or residing in the home, including the provider's children and any foster children. All day care programs must prohibit and may not tolerate or in any manner condone an act of abuse or maltreatment by an employee, volunteer or any other person. Caregivers must report any suspected incidents of child abuse or maltreatment concerning a child receiving child day care to the Statewide Central Register of Child Abuse and Maltreatment or cause such a report to be made when the caregiver has reasonable cause to suspect that a child coming before them in their capacity as caregiver in a group family day care is an abused or maltreated child. Such report must be followed by a written report within 48 hours, in the form and manner prescribed by the Office, to the child protective service of the social services district in the county in which the child resides. In addition, OCFS regulations require that all child care providers and staff receive training every two years in the area of child abuse and maltreatment identification and prevention, which includes such topics as reporting protocol; how to make a report to the State Central Register; documenting incidents and daily health checks; and child abuse policy/procedures including safety plans. Training must also be taken in area of statues and regulations pertaining to child abuse and maltreatment, which includes such topics as mandated reporter training and responsibilities of a mandated reporter. Education and information on the identification, diagnosis, and prevention of shaken baby syndrome is also required by regulation, to be taken

by all providers and employees, with the exception of those solely providing school age child care.

Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children’s health and safety. Describe: New York State regulations relative to licensed and registered programs cite the following topic areas for training aimed at promoting the health and safety of children in child day care: principles of childhood development, focusing on the developmental stages of the age groups for which the program provides care; nutrition and health needs of infants and children; child day care program development; safety and security procedures; business record maintenance and management; child abuse and maltreatment identification and prevention; statutes and regulations pertaining to child day care and to child abuse and maltreatment; and; education and information on the identification, diagnosis and prevention of shaken baby syndrome.

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

Yes, all relatives are exempt from all health and safety training requirements. If the State/Territory exempts all relatives from the CCDF health and safety training requirements, describe how the State ensures the health and safety of children in relative care. Currently, relative exempt providers must attest to the parent whether or not they are known as an indicated subject on a child abuse or maltreatment report. Relative exempt providers must attest to the parent and enrollment agency whether or not they have been convicted of a crime and if they have, the enrollment agency must determine using the guidelines issued by OCFS whether or not that provider is appropriate to care for children. In addition to the self-attestations, the enrollment agency checks the New York State Sex Offender Registry to determine if the person is listed as a sex offender. The LDSS verifies whether or not the provider has had a court-ordered removal of a child, or had his or her parental rights terminated. Under present law, OCFS does not determine whether a relative exempt provider is an indicated subject in a child protective case. This would require a statutory change.

Additionally, as part of the enrollment process, parents and providers are required to complete a checklist of the physical condition of the site where care is going to be provided to determine whether the site is safe for children in care. If a response to any of the checklist items is “no,” signifying a physical plant problem, the provider cannot be enrolled until the item is corrected.

Yes, some relatives are exempt from health and safety training requirements. If the State/Territory exempts some relatives from the CCDF health and safety training

requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care. \_\_\_\_\_

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

## 5.2 Monitoring and Enforcement Policies and Practices

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

Yes. The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities as of March 1, 2016. List the policy citation within the Lead Agency's rules: For licensed or registered child care providers that provide services to children receiving assistance and the facilities of those providers: (658E(c)(2)(J))

Relative regulations: Title 18 of the New York State Codes of Rules and Regulations §

Parts 413, 414, 416, 417 and 418 for license-exempt "enrolled" child care providers/programs: 18 NYCRR § 415.4

<http://ocfs.ny.gov/main/childcare/regs/415%20Child%20Care%20ServicesA.pdf>

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

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

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

5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives). While the law does not specify strategies to meet these requirements, States and Territories could consider implementing a differential monitoring approach as long as the full complement of licensing and CCDF health and safety standards was representative and the frequency was at least annually.

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

- Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State’s licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting: Child care regulatory staff include both New York State employees and contractors. State employees are civil servants who work within a system that supports career advancement across disciplinary areas. Candidates for this position must take and pass a civil service examination and be hired from a civil service list. The civil service requirements for eligibility to take the examination are as follows: Either 1) a master’s degree in social work (MSW), or 2) a master’s degree and one year of qualifying experience, or 3) a bachelor’s degree and two years of qualifying experience. Qualifying experience is defined as either 1) professional experience providing services to children and their families either in inspection, management, or administration of foster care programs; day care programs; adoption programs, domestic violence programs; youth detention facilities; or other providers of care, support, and assistance to children, assuring compliance for certification, or licensing purposes;

or 2) providing, supervising, monitoring, or administering human services; juvenile justice; criminal justice, local departments of social services; or local voluntary childcare service programs providing services for children, adults or their families, including but not limited to providing social case work, case planning, case management, counseling, crisis intervention, advocacy on behalf of clients, or direct investigation of potential abuse and neglect.

Contract regulator/licensing staff primarily work for CCR&R agencies and may have early childhood backgrounds In New York City, the Lead Agency contracts with the NYC Department of Health and Mental Hygiene (DOHMH) to license and register family day care, group family day care, and school-age child care programs. There are two different DOHMH inspector roles: early childhood education consultants who hold master’s degrees in early childhood education and have specific child care management experience; and public health sanitarians who hold bachelor’s degrees in environmental or natural sciences.

OCFS has robust training and professional development opportunities for both the state employees and contract staff that are targeted to their specific roles as regulators/licensors. All new staff must complete a multi-day series of in-person trainings, referred to as the Regulator Institute. This is designed to provide fundamentals of all aspects of the licensing/inspector position. There are also regular in-service training opportunities that are delivered a monthly basis. These are delivered in various formats, including in-person classroom and seminar settings to computer-based webinars and online trainings, many of which are available on-demand. In addition, OCFS has implemented bi-annual regional training forums for all regulator/licensing staff. These professional development opportunities are delivered in a conference format and include professional keynote speakers and various training sessions that are specific and relevant to the roles of regulators/inspectors. All regulator/licensing staff members are trained in the following areas, including but not limited to: developmentally appropriate practice; child development; effective inspections; investigations; New York State Social Services law, regulations and policies (including enforcement and licensing); health and safety; child abuse and maltreatment; dealing with challenging situations; and effective documentation. Given the educational and experiential requirements for this position, as well as the extensive role-specific professional development and in-service training requirements, OCFS

believes that its inspectors are well qualified for their roles as  
licensors/inspectors.

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

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

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

Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for licensed CCDF providers. List the policy citation and describe the inspection requirements including the frequency of announced and unannounced visits \_\_\_\_\_

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

- Overall Target Completion Date (no later than November 19, 2016)  
November 19, 2019.
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) This requirement is partially implemented. Currently all licensed/registered child care programs in New York State are required to have a pre-licensure inspection showing regulatory compliance with health, safety, and fire standards. This requirement is established in Section 390 of NYS Social Services Law. OCFS also has an internal goal of conducting unannounced quarterly monitoring inspections of all of the programs that it directly oversees. While current unannounced quarterly monitoring inspections can be a full assessment of health, safety and fire standards, this is typically not the case and they are usually more limited in scope. By implementing procedural changes, OCFS will align its current quarterly monitoring inspection practices to meet this requirement by requiring one of the quarterly monitoring inspections to be a full health, safety, and fire inspection. Since contracted entities perform monitoring and inspection duties in many parts of the state, their contracts will need to be adjusted in order to require that they, too, implement full, annual unannounced inspections. OCFS also intends to formalize this annual inspection requirement into its automated licensing database, so that it will help facilitate meeting that this requirement is met.
- Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable NYS is in full compliance with the requirement for pre-licensure inspections for licensed/registered programs. NYS also meets the annual inspection requirement in terms of frequency, but not scope, for licensed child care centers and group family day care homes.
- Unmet requirement - Identify the requirement(s) to be implemented. Complete health and safety inspections are not conducted annually at

licensed programs, but rather targeted monitoring inspections are conducted. There is a NYS statutory requirement that 50 percent of all registered family day care and school-age child care programs be inspected each year. This will need to be amended. In order to incorporate this action into the larger packages of legislative and regulatory changes that are described throughout this plan, OCFS is requesting a three-year waiver for implementing annual inspections of all licensed/registered programs.

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) In addition to statutory changes that will be needed to implement this requirement, OCFS will need to evaluate, modify, and fiscally support changes to existing contractual arrangements with its contracted inspection and registration/licensing staff. Systems changes and design will also be required.

- Projected start date for each activity:

**Statutory Changes**

- July 2015: Began work on needed statutory changes
- January - June 2016: Explore relevant strategies in other states that may be applicable to the New York State context
- Fall 2016: Within two months of issuance of a final CCDF set of rules, partner with NY’s Early Childhood Advisory Council to co-sponsor a series of roundtables on the implications of the new rules on families, child care providers, and existing state statutes
- January - April 2017: Hold public hearings on suggested recommendations that emerged from the roundtable convenings. Gather additional feedback from local districts and other stakeholders on strategies that are under consideration by OCFS to come into compliance with the new federal rules
- May - September 2017: Incorporate relevant input into draft statutory package
- October – December 2017: Internal review completed by OCFS and relevant executive agencies; draft legislative package is finalized
- January 2018: Submit proposed legislation to the Legislature at the start of the legislative session; passage by June 30, 2018

- July - December 2018: Develop and conduct training; implement database system changes to accommodate new monitoring and inspection requirements
- January 2019: Start to implement new inspection protocol
- November 19, 2019: New inspection protocol fully implemented

**Staffing, including Contractual Changes:**

- July 2016: Complete assessment of regional caseload sizes to support this requirement
  - September 2016: Identify staffing needs
  - October 2016: Identify any contractual implications for contracted inspection agents
  - January 2017: Identify fiscal estimate needed for staffing increases (for both OCFS and its contract agencies) and systems enhancements
  - April 2017-April 2018: Establish fiscal support
  - April – September 2018: Modify agreements with contract agencies
  - April - July 2018: Right-size and balance OCFS caseloads, including hiring staff
  - September - December 2018: Implement technological system changes to support the inspection process
  - September - December 2018: Train inspection staff
  - January 1, 2019: Start to implement annual inspection protocol statewide
  - November 19, 2019: New inspection protocol fully implemented
- Projected end date for each activity: November 19, 2019
  - Agency – Who is responsible for complete implementation of this activity? As the Lead Agency, OCFS is responsible for implementation of this activity.
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity? OCFS will be partnering with its contracted registration/licensing agents to implement these requirements.

**c) Inspections for Legally-exempt CCDF Providers (except those serving relatives) –** It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an

annual monitoring visit of each legally-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))

Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for legally-exempt CCDF providers. List the policy citation and describe the annual monitoring visit requirements:\_\_\_\_\_

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

- Overall Target Completion Date (no later than November 19, 2016):  
November 19, 2019.
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other). Per OCFS regulations, legally-exempt caregiver enrollment agencies (enrollment agencies) conduct on-site inspections, announced or unannounced, on an annual basis of at least 20 percent of the currently enrolled legally-exempt family child care providers that are not participating in the CACFP. Providers participating in CACFP receive three home visits per year from the provider’s sponsoring organization. In addition, OCFS has approved, at local district option, on-site visits of in-home child care providers. Non-compliance with health and safety requirements is tracked in the Child Care Facility System. Based on guidance from OCFS, the enrollment agency will either work with the provider to bring a non-compliant provider into compliance within 30 days and/or take action to terminate the provider’s enrollment. The LDSS is notified when changes occur which impact the provider’s eligibility to provide subsidized child care. The enrollment agency is required to investigate any complaints of regulatory non-compliance for all modalities of legally-exempt child care. Site visits may be announced or unannounced.
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable The requirement is partially implemented. Presently, annual on-site inspections are conducted of at least 20 percent of the currently enrolled legally-exempt family child care providers that are not participating in CACFP.

- Unmet requirement - Identify the requirement(s) to be implemented. Annual inspections are not required of every enrolled legally-exempt program. New York State does not inspect legally-exempt, in-home child care or legally-exempt group (center-based) child care. No inspections are currently required for legally-exempt group (center-based) programs.
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)  
**Statutory and regulatory changes:** After an examination of current NYS Social Services Law and related regulations, OCFS determined that changes to both the NYS Social Services Law and OCFS regulations will be needed to comply with CCDBG standards. OCFS will propose a comprehensive package of statutory and/or regulatory changes that will be needed in order to comply with this and other requirements. Therefore, OCFS is requesting a three-year legislative waiver for this requirement.

While specific amendments are being reviewed by the New York State Legislature, OCFS will begin preparing any necessary changes to the current child care subsidy regulations that do not require statutory amendments. Changes to state regulation must follow the steps outlined in the State Administrative Procedures Act (SAPA). This includes but is not limited to assessing the need for change, costs, rural impacts and employment impacts. In addition, OCFS must allow for a 45-day public comment period followed by an assessment of those comments. Once the regulatory changes are finalized, OCFS work plans will include changes to its Child Care Facility System (computer database system of record), updates to its forms, applications, policies, and procedures. Informing the field of upcoming changes to statute and regulation will be a part of the roll-out plan as well. Parallel to these processes will be the need for OCFS to evaluate the state’s responsibility and accountability to legally-exempt enrolled providers to make an orientation as comprehensive as the one required in the CCDBG available and accessible to all who are required to meet this mandate.

- Projected start date for each activity:
  - July 2015: Began work on needed statutory and regulatory changes
  - January - June 2016: Explore relevant strategies in other states that may be applicable to the New York State context

- Fall 2016: Within two months of issuance of a final CCDF set of rules, partner with NY’s Early Childhood Advisory Council to co-sponsor a series of roundtables on the implications of the new rules on families, child care providers, and existing state statutes
  - January - April 2017: Hold public hearings on suggested recommendations that emerged from the roundtable convenings. Gather additional feedback from local districts and other stakeholders on strategies that are under consideration by OCFS to come into compliance with the new federal rules
  - May - September 2017: Incorporate relevant input into draft statutory package
  - October – December 2017: Internal review completed by OCFS and relevant executive agencies; draft legislative package is finalized
  - January 2018: Submit proposed legislation to the Legislature at the start of the legislative session; passage by June 30, 2018
  - January - July 2018: Revise licensing and subsidy regulations to complement proposed statutory changes
  - August 2018: Submit proposed regulatory package to the Department of State to publish in the *New York State Register* and start the required public comment period
  - September 2018: Regulations published in the *New York State Register* as proposed rule
  - November 2018: 45-day regulatory public comment period ends
  - December 2018: Address public comments
  - January - February 2019: Re-publication in the *New York State Register*, as necessary, with reassessment of additional public comments, as applicable.
  - March 1, 2019: Final adoption published
  - March - September 2019: Develop and conduct training; implement database system changes to accommodate 100 percent inspections of legally-exempt programs.
  - September 30, 2019: Implementation of annual inspections of all legally-exempt programs
- Projected end date for each activity: November 19, 2019
  - Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Family Services

- Partners – Who is the responsible agency partnering with to complete implementation of this activity? State University of New York, Civil Service Employees Association, United Federation of Teachers, legally-exempt enrollment agencies, and the NYS Office of Information Technology Services.

**Revise contracts with legally-exempt enrollment agencies:** Legally-exempt enrollment is the process whereby individuals (or group-based programs) seeking to become legally-exempt providers that can accept child care subsidy payments for providing child care services agree to abide by a set of basic regulatory health and safety requirements. OCFS contracts with legally-exempt caregiver enrollment agencies (all but one of which are CCR&Rs) to enroll legally-exempt child care providers who care for children receiving a child care subsidy. The workload for enrollment agencies is expected to quintuple under the new federal law, which presents a resource challenge.

- Projected start date for each activity: June 1, 2018
- Projected end date for each activity: November 19, 2019
- Agency – Who is responsible for complete implementation of this activity? New York State Office of Children and Families
- Partners – Who is the responsible agency partnering with to complete implementation of this activity? Legally-exempt enrollment agencies

**Development of a protocol for inspecting enrolled legally-exempt group programs:** To date, enrolled legally-exempt programs have not been subject to the level of ongoing monitoring that will be required under the new federal law. Thus, a protocol must be developed that captures compliance with existing health and safety standards for these programs. In addition, an inspection module will need to be built within the Child Care Facility System to store inspection results, produce inspection reports to share with providers, and enable timely follow-up, as needed. Finally, training of legally- exempt enrollment agencies in the use of the protocol with enrolled legally -exempt group programs will be necessary.

- Projected start date for each activity: March 2016.
- Projected end date for each activity: November 19, 2019.
- Agency – Who is responsible for complete implementation of this activity New York State Office of Children and Families
- Partners – Who is the responsible agency partnering with to complete implementation of this activity OCFS will partner with its legally-exempt enrollment agents to implement this

requirement, as well as the New York State Office of Information Technology Services for assistance with system changes, and the Professional Development Program at the State University of New York to train enrollment agencies on the new inspection requirement for enrolled legally-exempt group programs.

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

Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory ratio of licensing inspectors: \_\_\_\_\_

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

- Overall Target Completion Date (no later than November 19, 2016) January 1, 2019.
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) OCFS currently has a target of maintaining a ratio of less than 60 programs assigned to each licensing staff member. This has not yet been developed into formal practice. While this ratio of less than 60:1 is a target, there are several regions that have struggled to maintain this ratio due to disproportionately high caseloads in those regions of the state. We are rightsizing our regional licensor distribution and are currently working to increase the staffing in those regions adversely impacted by the disproportionate caseloads. However, even with the existing caseloads assignments and ratios, we anticipate meeting the inspection requirements. One potential concern is the case management structure of some of our contracted licensing agents. We are currently evaluating this for consideration of necessary contractual

amendments. Modifications of existing contractual requirements may result in an increase in the cost of contractual obligations. For these reasons, OCFS is requesting a an extension of implementation of this requirement until January 1, 2019.

- Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable Caseload size for state licensing staff.
- Unmet requirement - Identify the requirement(s) to be implemented: Assessment of the caseload size and establishment of this requirement for our contracted licensing/registration agents.
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Assessment of the caseload size and establishment of this requirement for our contracted licensing/registration agents. Potential modifications of existing contractual agreements. Modification of existing contractual requirements may result in an increase in the cost of contractual obligations.
  - Projected start date for each activity
    - July 2016 Complete assessment of regional caseload sizes to support this requirement
    - September 2016 Identify staffing needs
    - October 2016 Identify any contractual implications for contracted inspection agents
    - January 2017 Identify fiscal estimate needed for staffing increases (for both OCFS and its contract agencies)
    - April 2017-April 2018 Establish fiscal support
    - April – September 2018: Modify agreements with contract agencies
    - April - July 2018: Right-size and balance caseloads, including hiring staff
    - September December 2018: Train inspection staff
    - January 1, 2019: Implementation of consistent ratios of licensing inspectors
  - Projected end date for each activity: January 1, 2019
  - Agency – Who is responsible for complete implementation of this activity? As the Lead Agency, OCFS will be responsible for implementation of this activity.

- Partners – Who is the responsible agency partnering with to complete implementation of this activity? OCFS will be partnering with its contracted registration/licensing agents.

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

- Yes. Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency’s policy citation(s) \_\_\_\_\_
- No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016) September 30, 2019
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other): NYS currently has statutes and regulations in place to address child abuse and neglect reporting requirements in licensed/registered programs; however, these requirements currently do not apply to enrolled, legally-exempt providers.
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable Child Abuse and Neglect reporting requirements currently exist in statute and regulations applicable to licensed/registered providers.
  - Unmet requirement - Identify the requirement(s) to be implemented: New York State has no requirement for mandatory reporting of Child Abuse and Neglect by enrolled, legally-exempt child care providers/programs or the agencies that enroll such providers.
- Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)? A statutory change will be needed in order to establish Child Abuse and Neglect reporting requirements applicable to enrolled legally exempt child care providers in New York. Therefore, OCFS is requesting a three-year legislative waiver for this requirement. While specific amendments are being reviewed by the Legislature, OCFS will begin

examining the need to change current child care regulations to comply with any statutory amendments and others changes needed that are not rooted in statute. As noted elsewhere, changes to state regulation must follow the steps outlined in the State Administrative Procedures Act (SAPA). This includes but is not limited to assessing the need for change, costs, rural impacts and employment impacts. In addition, OCFS must allow for a 45-day public comment period followed by an assessment of that comment.

- Projected start date for each activity:
  - July 2015: Began work on needed statutory and regulatory changes
  - January - June 2016: Explore relevant strategies in other states that may be applicable to the New York State context
  - Fall 2016: Within two months of issuance of a final CCDF set of rules, partner with NY's Early Childhood Advisory Council to co-sponsor a series of roundtables on the implications of the new rules on families, child care providers, and existing state statutes
  - January - April 2017: Hold public hearings on suggested recommendations that emerged from the roundtable convenings. Gather additional feedback from local districts and other stakeholders on strategies that are under consideration by OCFS to come into compliance with the new federal rules
  - May - September 2017: Incorporate relevant input into draft statutory package
  - October – December 2017: Internal review completed by OCFS and relevant executive agencies; draft legislative package is finalized
  - January 2018: Submit proposed legislation to the Legislature at the start of the legislative session; passage by June 30, 2018
  - January - July 2018: Revise licensing and subsidy regulations to complement proposed statutory changes
  - August 2018: Submit proposed regulatory package to the Department of State to publish in the *New York State Register* and start the required public comment period
  - September 2018: Regulations published in the *New York State Register* as proposed rule
  - November 2018: 45-day regulatory public comment period ends
  - December 2018: Address public comments

- January - February 2019: Re-publication in the *New York State Register*, as necessary, with reassessment of additional public comments, as applicable.
- March 1, 2019: Final adoption published
- March - September 2019: Develop and conduct training; implement any needed database system changes to accommodate the addition of child abuse and neglect reporting requirements for legally-exempt providers
- September 30, 2019: Implementation of child abuse and neglect reporting requirements for legally-exempt providers
  - Projected end date for each activity: September 30, 2019.
  - Agency – Who is responsible for complete implementation of this activity? NYS Office of Children and Family Services
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity? OCFS and its contracted legally-exempt enrollment agents.

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

Yes, all relatives are exempt from all inspection requirements. If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care. Currently, relative-exempt providers must attest to the parent whether or not they are known as an indicated subject on a child abuse or maltreatment report. Relative-exempt providers must attest to the provider and enrollment agency whether or not they have been convicted of a crime and if they have, the enrollment agency must determine using the guidelines issued by OCFS whether or not that provider is appropriate to care for children. In addition to the self-attestations, the enrollment agency checks the New York State Sex Offender Registry to determine if he or she is listed as a sex offender. The LDSS verifies whether or not the provider has had a court-ordered removal of a child, or had his or her parental rights terminated. Additionally, as part of the enrollment process, parents and providers are required to complete a checklist of the physical condition of the site where care is going to be provided to determine whether the site is safe for children in care. If a response to any of the checklist items is negative, the provider cannot be enrolled until the item is corrected.

Yes, some relatives are exempt from inspection requirements. If the State/Territory exempts some relatives from the inspection requirements, describe which relatives are

exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care. \_\_\_\_\_

No, relatives are not exempt from inspection requirements.

### 5.3 Criminal Background Checks

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

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

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

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

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

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

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

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

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

Implemented and meeting all Federal requirements outlined above by March 1, 2016. List the policy citation within the Lead Agency’s rules \_\_\_\_\_ and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.

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

- Overall Target Completion Date (no later than September 30, 2017)  
September 30, 2017
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other). Partially implemented: OCFS currently conducts New York State criminal history background checks and maintains those records on all actively licensed child care providers, employees, and household members over 18 years of age in home-based programs on a “search and retain” basis. In addition, database checks against the NYS State Central Register for Child Abuse and Maltreatment and the NYS Justice Center for the Protection of People with Special Needs are required for all staff working in child care programs and household members over the age of 18 in family-based programs. Enrolled legally-exempt providers undergo New York State sex offender database

checks. New York State is currently assessing the steps necessary to comply with the additional CCDBG background check requirements needed for full compliance with the CCDBG Act.

- Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable. Currently, New York State criminal history background checks and child abuse and maltreatment register database checks are implemented for licensed/registered child care programs. New York State sex offender checks are conducted for enrolled legally-exempt child care providers.
- Unmet requirement - Identify the requirement(s) to be implemented. Federal/FBI criminal history clearance, New York State and National Sex Offender registries checks, and the N.C.I.C. checks have not been implemented for licensed/registered child care providers. New York State criminal history clearance, National Sex Offender registry checks, New York State child abuse and maltreatment database checks and the N.C.I.C. checks have not been implemented for enrolled legally-exempt providers. No procedures have been implemented to date to facilitate the request of the background check information from other states.
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)? OCFS just completed a multi-year project in updating and revising its child day care regulations across all modalities of care. OCFS recognizes that making any changes to law or regulation will impact the Office, its regulatory staff, its child care workforce, providers of services, and the families of children in care. As such, OCFS’s first step will be to assertively gain a working knowledge and detailed understanding of the CCDBG requirements. OCFS has established a workgroup that consists of members from the NYS Statewide Central Register of Child Abuse and Maltreatment, the NYS Department of Criminal Justice Services, OCFS Counsel’s Office, the OCFS Criminal History Review Unit, NYS Office of Information Technology Services and OCFS Administration. This group is working to identify the implementation requirements to facilitate all the required background checks, including fiscal, legislative, regulatory, data, technology, and system needs. Once the specifics of the requirements are understood, OCFS will recommend amendments to NYS Social Services Law and child care regulations where indicated. As this may be a lengthy process, OCFS has made requirements identification a starting point in the process.

While specific amendments to statute will require action by the New York State Legislature, OCFS examining the need to change current child care regulations to comply with any proposed statutory amendments and other changes needed that are not rooted in statute. As noted elsewhere, changes to state regulation must follow the steps outlined in the State Administrative Procedures Act (SAPA). This includes but is not limited to assessing the need for change, costs, rural impacts and employment impacts. In addition, OCFS must allow for a 45-day public comment period followed by an assessment of those comments. Once finalized, OCFS work plans will include changes to its Child Care Facility System (the computer system of record), updates to its forms, applications, policies, and procedures. Informing the field of upcoming changes to statute and regulation will be a part of the roll-out plan as well. Parallel to these processes will be the need for OCFS to evaluate the state's responsibility and accountability to the child day care workforce so that an orientation as comprehensive as the one required in the CCDBG is available and accessible to all who are required to meet this mandate.

In its earliest stages of planning, OCFS will be estimating the fiscal impact and the funding needed to comply with the CCDBG requirements. OCFS anticipates that significant funding will be necessary to implement the background check requirements.

OCFS estimates that approximately 220,000 individuals will need to be cleared to comply with the new background check requirements. OCFS is working to be in compliance by September 30, 2017; however, given the high volume of clearances needing to be conducted, the current lack of fiscal resources, the need for technological support and systems development, as well as the need for statutory and regulatory amendments, this is going to be a challenging timeframe to meet and it may be necessary to apply for a waiver to provide more time to fully implement this provision.

- Projected start date for each activity: January 13, 2015; OCFS developed a workgroup to begin working on identifying the background check implementation requirements in January 2015.
- Projected end date for each activity: OCFS anticipates all background check requirements to be completed at the same time due to the simultaneous systems development that will occur to support the process. OCFS anticipates compliance by September 30, 2017.

- Agency – Who is responsible for complete implementation of this activity? OCFS is responsible for the complete implementation of all the background check requirements.
- Partners – Who is the responsible agency partnering with to complete implementation of this activity? OCFS is partnering with the NYS Department of Criminal Justice Services, the NYS State Office of Information Technology Services and the State Central Register of Child Abuse and Maltreatment to implement these requirements.

5.3.2 Describe the process and procedures for conducting background checks in a timely manner, including which agency/entity is responsible and how the Lead Agency ensures that background checks performed by a 3<sup>rd</sup> party meet the requirements, protecting the privacy of child care staff members, and providing opportunities for applicants to appeal the results of background checks.

OCFS day care regulations require that all child care staff and household members 18 years of age and older in family-based care submit the required documents and/or fingerprint images necessary to conduct New York State criminal background checks, NYS Child Abuse and Maltreatment database checks, and Justice Center for the Protection of People with Special Needs database checks. In addition, all are required to complete a criminal history attestations, disclosing crimes they have been convicted in states other than New York State. Generally, criminal background checks, child abuse and maltreatment database checks, and Justice Center database checks can all be completed within two weeks. These processes are supported through systems automation from the time that an individual's clearance document is submitted or fingerprint is imaged is scanned. The entire criminal history clearance process is automated and the results and assessment activities are documented in the OCFS Child Care Facility System, the State's automated licensing database. This is done via system interfaces with the NYS Department of Criminal Justice Services, the OCFS Criminal History Review Unit and the OCFS Child Care Facility System. The results of a person's background check are confidential. New York State currently has laws and policies established to maintain confidentiality and protect the privacy of the individuals undergoing the background check process. Additional changes to these practices are anticipated as we move to implement the new background check requirements.

Prior to making a determination to deny or restrict an application for licensure/registration or denying employment in child care, OCFS affords the applicant an opportunity to explain, in writing, why the application should not be denied. This explanation is part of a formal safety assessment process that is already established. Provisions and factors of Article 23-A of the NYS Corrections Law are evaluated as part of this process. The case is reviewed by a team consisting of OCFS regional office licensors, home office staff, and counsel's office. A determination is made based on this collaboration. As OCFS moves to implement the new background check

requirements, this process will be revised to reflect the additional clearance requirements, including the imposition of the mandatory disqualifying offenses.

5.3.3 Describe how the State/Territory is assisting other States process background checks, including any agencies/entities responsible for responding to requests from other states. OCFS is working with the NYS Department of Criminal Justice Services and the Statewide Central Register of Child Abuse and Maltreatment to develop procedures to support the processing of background check requests from other states. Counsel's office and the respective program areas are working to develop information guidelines and necessary forms to complete these requests.

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

Yes. Describe. OCFS has regulations and practices in place that require a safety assessment be conducted for all categories of criminal offenses, including felony drug offenses. The safety assessment process includes, but is not limited to, an interview with the individual, a review of the duties of the individual with the criminal conviction or charge, the extent to which such individual may have contact with children in the day care facility or program, how old the conviction is, the extent of rehabilitation, and the status and nature of the criminal conviction or charge. Provisions and factors of Article 23-A of the NYS Corrections Law are evaluated as part of this process. Prior to making a determination to deny or restrict an application for licensure/registration or for a working role in child care, OCFS affords the applicant an opportunity to explain, in writing, why the application should not be denied. The safety assessment results are reviewed by a team consisting of OCFS regional office staff, home office staff, and counsel's office. A determination is made based on this collaboration.

For legally-exempt providers/programs, a disqualification due to a felony drug offense is a "presumptive" denial and the individual has a right to request a review.

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

Yes. Describe. Current New York State statute allows OCFS to take action to protect the health and safety of children in care, including the disqualification of child care staff members, based on convictions resulting from the criminal history background check. This is done through the aforementioned safety assessment process, in conjunction with review by OCFS counsel's office. This includes crimes not specifically listed in Section 5.3 if needed to protect the health and safety of child in care. Factors for consideration are: the bearing that the criminal offense will have on the fitness or ability to perform the duties or responsibilities of the position; the time that has elapsed since the occurrence of the offense(s); the age of the person at the time of occurrence; and the seriousness of the offense(s). In addition, the provisions and factors of Article 23-A of the NYS Corrections Law are evaluated and applied as part of this process.

For legally-exempt CCDF providers, the following disqualification exist:

- For crimes against a child: permanent disqualification.
- For violent or other serious crimes not against a child: presumptive disqualification, with the right to request a review.

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

- Yes, all relatives are exempt from all background check requirements.
- Yes, some relatives are exempt from the background check requirements. If the State/Territory exempts some relatives from background check requirements, describe which relatives are exempt from which requirements (some or all).
- No, relatives are not exempt from background checks.

5.3.7 Describe how the State/Territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether conducted by the State/Territory or a 3<sup>rd</sup> party vendor or contractor, Lead Agencies can report that no fees are charged if applicable. As per NYS Social Services Law, OCFS may not charge the individual for fingerprint scans or Justice Center database checks; nor does it charge for the resulting administrative costs associated with New York State criminal background checks. The state recoups a minimal charge (\$25.00) for child abuse and maltreatment database checks for certain categories of staff in the workforce; this charge does not cover the full cost of such database checks.

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue. Background check policies and procedures are set in statute and regulation. All child day care statutes and regulations and policies are posted to the child care website. In addition, the forms and guidance needed to complete the background check process, including descriptions of what procedures are in place are posted to the child care website, as well.

5.3.9 Does the Lead Agency release aggregated data by crime?

- Yes. List types of crime included in the aggregated data \_\_\_\_\_
- No

## **6 Recruit and Retain a Qualified and Effective Child Care Workforce**

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

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

### **6.1 Training and Professional Development Requirements**

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

across settings and types of providers, including family child care home providers and child care center staff.

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

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

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

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

- a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and mid-level training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the child care program).
- b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.
- c) Incorporate knowledge and application of the State/Territory’s early learning and developmental guidelines (where applicable), the State/Territory’s health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)
- d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF
- e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English

language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 6.1.2 through 6.1.6 below.

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

- Overall Target Completion Date (no later than September 30, 2016)  
September 30, 2019
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other). Title 18 of the New York State Codes of Rules and Regulations §§ 414.14, 418-1.14, 416.14., and 417.14 describe the training topics and the minimum hours of training required of all child care providers and staff. These need to be modified so as to be inclusive of the ten federal mandatory training topics. OCFS supports the child care workforce by offering training sessions to providers in the form of statewide video confer
- encing, web learning and classroom training. OCFS-contracted trainings are developed in line with state early learning and development guidelines and the state’s health and safety standards; and they incorporate social-emotional behavior intervention models, which include positive behavior intervention and support models. OCFS also offers an Educational Incentive Program (EIP) to income-eligible child care staff. EIP’s purpose is to assist the child care workforce in paying for the professional development, training, and education they need to provide quality care to children. The program prioritizes funding for individuals who are taking college courses or working toward a recognized child care credential. This prioritization is set to purposely steer the child care workforce toward more advanced educational pursuits.

While regulated providers and programs are currently in compliance with CCDBG standards, legally-exempt providers are not. OCFS does provide opportunities for legally-exempt providers to receive training. Through legally-exempt enrollment agencies, OCFS provides written instructional materials on immunizations, childhood diseases and infection control to legally-exempt child care providers at the time of enrollment. Legally-

exempt child care providers may participate in formal training on a voluntary basis. As an incentive towards completing training aimed at improving the quality of care, OCFS offers to providers of legally-exempt family child care and legally-exempt in-home child care an enhanced rate of subsidy reimbursement when the provider completes 10 hours of approved training annually in the subject areas specified for licensed and registered providers, which are set forth in Section 390-a(3)(b) of the Social Services Law.

OCFS has supported the development of the following training curricula for use in trainings for legally-exempt child care providers:

- 10-hour training curriculum aimed at improving the quality of legally-exempt family and in-home child care (also available in Spanish).
  - Medication Administration Training (MAT) training, offered through trainers certified by the Professional Development Program at the University at Albany, State University of New York.
- 
- Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable See 6.1.2 – 6.1.6 below.
  - Unmet requirement - Identify the requirement(s) to be implemented. 1) no specific accommodation in state statute or regulations for the 10 mandatory federal topic areas, 2) no statutory or regulatory training requirements in place for legally-exempt providers. Thus, changes to the NYS Social Services Law and regulation will be needed to comply with CCDBG standards. Before proceeding farther, OCFS is waiting for the final set of new CCDF regulations. Once they have been adopted, OCFS will be able to propose a comprehensive package of statutory and/or regulatory changes that will be needed in order to comply with this and other requirements. Therefore, OCFS is requesting a three-year legislative waiver for this requirement.
  - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) OCFS recognizes that making any changes to statute or regulation will impact the Division of Child Care Services and its regulatory staff, its child care workforce, providers of services, and the families of children in care. As such, OCFS' first step will be to gain a working knowledge and detailed understanding of the CCDBG requirements (e.g., all child care caregivers and staff need training in first aid and CPR, but do they need to be certified in first aid and CPR?). Once the specifics of the requirements are understood, OCFS will recommend amendments to NYS

Social Services Law and regulations where indicated. As this may be a lengthy process, OCFS will make this a starting point in the process.

While specific amendments to statute are being proposed to the NYS Legislature, OCFS will be examining the need to change current child care regulations to comply with any necessary statutory amendments and any other changes needed that are not rooted in statute. Changes to state regulation must follow the steps outlined in the State Administrative Procedures Act (SAPA). This includes, but is not limited to, assessing the need for change, costs, rural impacts and employment impacts. In addition, OCFS must allow for a 45-day public comment period followed by an assessment of those comments. Once finalized, OCFS work plans will include changes to its forms, applications, policies, and procedures. Informing the local districts of upcoming changes to statute and regulation will be a part of the roll-out plan as well.

In its earliest stages of planning, OCFS will be estimating the fiscal impact and the funding needed to comply with the CCDBG requirements.

- Projected start date for each activity
  - July 2015: Began work on needed statutory and regulatory changes
  - January - June 2016: Explore relevant strategies in other states that may be applicable to the New York State context
  - Fall 2016: Within two months of issuance of a final CCDF set of rules, partner with NY's Early Childhood Advisory Council to co-sponsor a series of roundtables on the implications of the new rules on families, child care providers, and existing state statutes
  - January - April 2017: Hold public hearings on suggested recommendations that emerged from the roundtable convenings. Gather additional feedback from local districts and other stakeholders on strategies that are under consideration by OCFS to come into compliance with the new federal rules
  - May - September 2017: Incorporate relevant input into draft statutory package
  - October – December 2017: Internal review completed by OCFS and relevant executive agencies; draft legislative package is finalized
  - January 2018: Submit proposed legislation to the Legislature at the start of the legislative session; passage by June 30, 2018
  - January - July 2018: Revise licensing and subsidy regulations to complement proposed statutory changes

- August 2018: Submit proposed regulatory package to the Department of State to publish in the *New York State Register* and start the required public comment period
- September 2018: Regulations published in the *New York State Register* as proposed rule
- November 2018: 45-day regulatory public comment period ends
- December 2018: Address public comments
- January - February 2019: Re-publication in the *New York State Register*, as necessary, with reassessment of additional public comments, as applicable.
- March 1, 2019: Final adoption published
- March - September 2019: Develop and conduct training; implement database system changes to accommodate new professional development and training requirements  
September 30, 2019: Implementation of new training and professional development requirements
- Projected end date for each activity September 30, 2019
- Agency – Who is responsible for complete implementation of this activity? OCFS Division of Child Care Services
- Partners – Who is the responsible agency partnering with to complete implementation of this activity? State University of New York, City University of New York, Civil Service Employees Association, United Federation of Teachers, CCR&R agencies, and other training organizations.

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

State/Territory professional standards and competencies. Describe. New York State has a common, statewide progression of credentials and degrees aligned with a workforce knowledge and competency framework and career ladder. Currently, there are several combinations of state-specific credentials and degrees for early childhood educators that supplement the nationally recognized Child Development Associate CDA associate's, bachelor's, and master's degree credentials. New York State credentials include the following: the Infant Toddler Care and Education Credential (ITCEC); the

Family Child Care Credential (FCCC); the Children’s Program Administrator Credential (CPAC); the Early Learning Trainer Credential (NYSELTC); and the Birth-Grade 2 Teacher Certification.

Developed and administered by the New York State Association for the Education of Young Children (NYSAEYC), the ITCEC and FCCC have been designed to address the specialized knowledge and skills required of professionals caring for and teaching infants and toddlers, as well as those serving as family child care providers. The ITCEC and FCCC are competency-based and require credit-bearing coursework. Several two- and four-year public institutions in New York State have created coursework for these credentials. By providing a pathway for early childhood educators to earn college credit and a credential related to their daily work, these credentials serve as a starting point for early childhood educators without prior postsecondary experience to go on to pursue an Associate’s and/or Bachelor’s Degree. All two-year and four-year public colleges within the City University of New York and the State University of New York systems have articulation agreements to ensure that the workforce has pathways that support career and competency advancement. The CPAC is also administered by the NYSAEYC. The CPAC is a 78-credit, competency-based credential that focuses on management and leadership skills. Included in the 78-credits are a minimum of 18-credits in child development or a related field and a minimum of 18-credits in children’s program administration.

Additionally, the Board of Regents and the Commissioner of Education have established an Early Childhood Education Birth – Grade 2 Certification (Birth-2) to address the specialized experiences and qualifications necessary for early childhood educators to successfully meet the unique developmental needs of young children. In New York State, lead teachers in state-funded prekindergarten, as well as in center-based preschool and Head Start programs in New York City, are required to have a bachelor’s degree with teacher certification. The Birth-2 certification provides a certification for these teachers that specifically addresses early childhood development and the skills and knowledge teachers need to work with young children. New York State also offers an Early Childhood Education Birth – Grade 2, Student with Disabilities Certification, for professionals pursuing a career in special education and an Early Childhood Education Birth – Grade 2, Literacy credential for professionals focused on literacy development.

Career ladder or lattice. Describe. New York State’s Early Childhood Advisory Council’s Workforce Development Work Group developed a career ladder intended for early childhood educators who work directly with children and families in the following programs: informal and licensed family child care, center-based child care, school-based early childhood classrooms, Universal Prekindergarten, early childhood special education programs, Head Start, and Early Intervention. The professional levels are based on formal education. The steps within each level allow for progression based on

experience working with children and families, additional early childhood credentials, and NYS Teacher or Administrator Certification. Early childhood educators are encouraged to use the career ladder, in conjunction with the NYS Core Competency Assessment and the Professional Development Planning Tool, to plan and track their professional growth. In addition, Aspire, New York State’s workforce registry, verifies all education and credentials that are required to determine a career ladder level.

Articulation agreements between two- and four-year postsecondary early childhood education or degree programs. Describe. All two-year and four-year public colleges within the City University of New York and the State University of New York systems have articulation agreements to create pathways that support career and competency advancement.

Community-based training approved by a state regulatory body to meet licensing or regulatory requirements. Describe \_\_\_\_\_

Workforce data, including recruitment, retention, registries or other documentation, and compensation information. Describe. Aspire, New York State’s workforce registry, enables New York State and its early childhood educators to track educators’ levels of education and credentials and participation in training and development activities, and support educators in progressing towards increasing levels of knowledge and skills. Currently, Aspire includes nearly 10,000 professionals.

Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework. Describe. New York State’s vision is that all early childhood educators in the state will recognize themselves as professional educators whose work is critical to the state’s goal of helping all students enter school ready and leave prepared to succeed in college and careers. To meet this challenge, New York State’s Early Childhood Advisory Council’s Workforce Development Work Group established a coordinated system of workforce development designed to support the Lead Agency and other statewide system needs. The work group membership represents state government, higher education, all early childhood service delivery, CCR&R agencies, and a wide range of professional development providers.

Continuing education unit trainings and credit-bearing professional development. Describe \_\_\_\_\_

State-approved trainings. Describe. Professional development is the cornerstone of OCFS’ strategy for improving the quality of child care in New York State. An MOU with the State University of New York (SUNY) supports an extensive array of professional development activities geared towards both child care providers and inspectors. For example, free evening videoconference trainings are available to all New York State regulated child care providers. They are broadcast live, via webcast, from 6:45 PM to

9:15 PM, to 65 training sites located throughout the state. Typically, about 1,000 providers attend each videoconference. Six of these trainings were held in 2015 and three are planned in 2016. The trainings address the state's required training topic areas, as well as the Child Development Associate (CDA) National Credentialing Program's and Core Body of Knowledge training requirements. At each site there are trained co-trainers to lead guided activities related to the program content. Attendees must participate in the activities to receive credit for the training and they are given a 10-question test at the end of the training that they must pass to receive a certificate for the training. In 2015, over 5,200 trainees attended videoconferences.

Besides videoconferences, SUNY has produced more than a dozen e-learning courses that are sponsored by OCFS, count toward required training hours, and are free to access. In addition, in February 2002, and updated in July 2008, OCFS issued a policy on how distance-learning courses produced by other training organizations or commercial vendors can be used to satisfy OCFS training requirements. Non-credit-bearing distance learning courses need to be on the approved distance-learning course list before they can be taken to satisfy OCFS requirements. There may be a fee associated with these courses; however, approved courses may qualify for Educational Incentive Program funding. SUNY, under OCFS sponsorship, also has developed three specialized curricula and trainings of trainers to implement those curricula, which include: 1) the administration of medication (for which providers can receive rebates up to \$100 to pay for the classroom course or up to \$70 for the independent study course, 2) a 15-hour health and safety training course, completion of which is currently a requirement for family-based providers before they are issued a license or registration (and for which they can receive a rebate of up to \$235 to offset the cost of the training), and 3) a 10-hour health and safety course targeted to legally-exempt providers.

Training that is submitted and approved is automatically put in the statewide training calendar in Aspire to inform providers looking for training. The goal of the review and subsequent posting to a training calendar is to provide high quality professional development opportunities and to inform the field of those training opportunities.

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

Describe \_\_\_\_\_

Other. Describe. OCFS supports, with CCDF funds, an Educational Incentive Program (EIP) that prioritizes funding to child care staff who take college credits or courses aimed at child care credentialing. The workforce is required to obtain training hours, which can be expensive; as a result, many look to tap into the EIP funds. Prioritization for more advanced course work steers the applicant to more rigorous learning opportunities. All trainings paid for by EIP must be reviewed. Review includes training topic categories, training hours, quality of writing, description, goal(s), and learning objectives.

OCFS also conducts surveys of its workforce to determine the workforce's specific training needs. In addition, OCFS analyzes its enforcement case data as a method of identifying deficiencies that could be obviated by specialized training topics. Once identified, these training topics are designed and produced as online training opportunities or videoconference sessions.

- 6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC As part of a CCDF Planning Day on August 17, 2015 hosted by the Lead Agency, members of New York State's Early Childhood Advisory Council (ECAC) participated in four facilitated small-group sessions focused on four of the ECAC's working group priorities, one of which was workforce development. Attendees prioritized their recommendations, within constraints established by the Lead Agency (minimal fiscal impact, minimal need for regulatory change, preservation of subsidy dollars), for what they wanted to see included in the CCDF Plan. In addition, in March 2015, the two co-chairs of the Workforce Development Working Group submitted a detailed analysis of New York State's professional development landscape, along with specific recommendations for future development of the state's early childhood workforce to the Lead Agency. Although guided by the philosophy espoused by the ECAC Workforce Development Working Group, resource constraints prevent the Lead Agency from incorporating most of the Working Group's proposals. To the extent feasible, we're working on implementing their recommendations.
- 6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements (see Information Memorandum on Children's Social Emotional and Behavioral Health <http://www.acf.hhs.gov/programs/occ/resource/im-2015-01>) Although nine required training topics that reflect the New York State's health and safety standards currently exist in statute, and cannot be modified without a legislatively approved statutory change, since 2013 all new contracted training has been required to incorporate the Early Learning Guidelines and the Core Body of Knowledge . Specific to the incorporation of social-emotional/behavioral and early childhood mental health intervention models into the state's training requirements, one of New York State's mandatory training topics is "principles of childhood development," which as noted in Title 18 of the New York State Codes of Rules and Regulations §§ 414.14, 418-1.14, 416.14., and 417.14, includes "...such things as meeting the physical, social and developmental needs of children, including those with special needs; behavior management and discipline; promoting play and physical activity; individual development variation and learning styles; infant and toddler brain development; and cross cultural skills and knowledge." OCFS has supported development of two e-learning trainings in Managing Challenging Behavior from Birth

to 36 months. These are covered in two sessions (birth to 18 months, and 18 to 36 months) and are followed by a session in early intervention services. Through SUNY, OCFS also offered a videoconference featuring child and adult psychiatrist Dr. Edward Hallowell, a world-renowned speaker and leading authority in the field of attention deficit hyperactivity disorder.

In addition, OCFS is working collaboratively with the New York State Council on Children and Families and numerous other state agencies and partners on a project intended to address social emotional competence. The New York State Pyramid Model Partnership will promote the statewide use of the Pyramid Model, an evidence-based framework proven to be an effective approach to building social and emotional competence in early care and education programs.

With its emphasis on strong relationships, support for social competence and preventing and addressing challenging behaviors in infants, toddlers and young children, the Pyramid Model is congruent with other New York State early childhood efforts to set the foundation for development and lifelong learning.

With SUNY, OCFS is working on the development of an e-learning video which will cover challenging behavior and social emotional competence in an effort to address ‘disenrollment’ (or suspension/expulsion).

- 6.1.5 Describe how the State’s training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable) OCFS training opportunities are open to all.
- 6.1.6 Describe how the State/Territory’s training and professional development requirements are appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children), English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians. All OCFS training plans and development thereof go through many levels of scrutiny, including an examination of their inclusion of all age groups, children with disabilities, how they will work for populations of providers and children who are English learners, and the ethnicities and cultural differences of the state’s population.

AfterSchool Works!: the New York State Afterschool Network (ASW:NYSAN) has been in conversations with the NYSAEYC and the ECAC regarding the modification of the New York State Early Learning Trainer Credential to make it more appropriate for evaluating the qualifications of those providing training for school-age child care programs. ASW:NYSAN will continue these and other conversations so that the needs of older children are reflected in the training and professional development requirements for child care providers across the state.

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

Financial assistance for attaining credentials and post-secondary degrees. Describe. OCFS supports an educational incentive program with CCDF funds that prioritizes funding to child care staff who take college credits or courses aimed at child care credentialing.

Financial incentives linked to education attainment and retention. Describe \_\_\_\_\_

Registered apprenticeship programs. Describe \_\_\_\_\_

Outreach to high school (including career and technical) students. Describe \_\_\_\_\_

Policies for paid sick leave. Describe \_\_\_\_\_

Policies for paid annual leave. Describe \_\_\_\_\_

Policies for health care benefits. Describe \_\_\_\_\_

Policies for retirement benefits. Describe \_\_\_\_\_

Support for providers' mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services). Describe. The New York State Pyramid Collaboration has already started work on training opportunities that will be made available to all caregivers which will address challenging behavior in children. High-quality early childhood environments and supportive responsive relationships among adults and children is essential in promoting healthy social emotional development. Resources will be made available to programs, including health and mental health supports.

There will be a strong emphasis on staff wellness in the newly formed Child Care Aware Healthy Child Care, Healthy Communities NYS partnership. The group will be addressing health, obesity, and nutrition issues in child care programs. There will be research and the sharing of resources so that children in care have caregivers who have support for their health and wellness. Although in the early stages, all partners are in agreement that staff wellness will help support wellness in children.

Other. Describe \_\_\_\_\_

6.1.8 Describe how the State/Territory will recruit providers for whom English is not their first language, or who will serve and be available for families for whom English is not their first language. New York State does not directly recruit providers.

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

- Informational materials in non-English languages
- Training and technical assistance in non-English languages
- CCDF health and safety requirements in non-English languages
- Provider contracts or agreements in non-English languages
- Website in non-English languages
- Bilingual caseworkers or translators available
- Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce
- Other \_\_\_\_\_
- None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State has the ability to have translation/interpretation in all primary and secondary languages On the OCFS website, families are provided with general information, which can be printed out, in over 90 different languages.

OCFS has a contract with Language Line Services for interpretation services. It also uses this service to translate vital and functional documents for providers of child care services. Examples of documents that are translated are: child day care regulations (available in English and Spanish); online orientation (available in English and Spanish); the OCFS-approved Medication Administration Training (MAT) (available in English and Spanish); and the OCFS-approved Health and Safety Training course (available in English and Spanish). OCFS makes available to all child care subsidy applicants a common application for services that is available in English, Spanish, Chinese, Russian, Korean, Haitian Creole, and Italian.

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

- Yes. The State certifies that no later than March 1, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families. Describe that training and technical assistance for providers

\_\_\_\_\_

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

- Overall Target Completion Date (no later than September 30, 2016)  
September 30, 2016
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) OCFS has contacted New York State’s McKinney-Vento State Coordinator, who made the introduction to the New York State Technical and Education Assistance Center for Homeless Students (NYS-TEACHS). NYS-TEACHS staff has offered to adapt some of their training materials for use with early childhood educators (an example of a potentially relevant webinar is “Meeting the Unique Learning Needs of Students Exposed to Trauma: How to Apply Trauma-Sensitive Strategies to Improve Academic Outcomes for Students in Temporary Housing”).
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable None
  - Unmet requirement - Identify the requirement(s) to be implemented. Training and technical assistance to providers on identifying and serving homeless children and their families.
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
  - 1) Conduct outreach to the New York State Office of Temporary and Disability Assistance (OTDA), which administers funding for homeless shelters.
  - 2) Review existing regulations and consider regulatory changes as needed.
  - 3) Develop guidance for LDSSs on how to determine whether or not a subsidy applicant is homeless. OCFS plans to use the same Housing Questionnaire that has been developed for New York Head Start programs with the assistance of NYS-TEACHS.
  - 4) Broaden the scope of one of the milestones of our performance-based contracts with CCR&R agencies to allow them to do targeted outreach to homeless shelters and other emergency shelter locations (e.g., local motels, campgrounds) or dwellings known to have numbers of doubled-up families in order to help those families access child care.
  - 5) Support the development of a statewide live videoconference training to train providers in trauma-informed approaches to supporting child development for children who are homeless or experiencing other traumatic events (e.g.,

foster care placement, death of a family member, natural disaster). 6) Because homelessness has long been a priority population for Head Start grantees, explore the extent to which it is possible to offer relevant Head Start training (both online and in-person) to child care providers serving children who are homeless, in order to a) better inform providers of other benefits to which homeless families may be eligible; and b) expose child care providers to curricular approaches that would support both parent and child who are living in unstable housing situations.

- Projected start date for each activity March 1, 2016
- Projected end date for each activity September 30, 2016
- Agency – Who is responsible for complete implementation of this activity? Office of Children and Family Services (OCFS), Division of Child Care Services
- Partners – Who is the responsible agency partnering with to complete implementation of this activity? New York State McKinney-Vento liaison, NYS-TEACHS, CCR&Rs, State University of New York, LDSSs, New York State Head Start Collaboration Office

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

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

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

Yes. If yes,

- a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory. Since 2008, CCDF funds have supported an annual evaluation of SUNY's general child care training, Educational Incentive Program, and Medication Administration Training. In addition to providing descriptive, comparative, and longitudinal analyses of demographic data so as to enhance and more effectively target future training, each year the evaluations have honed in on specific questions of policy-relevant interest. For example, the Educational Incentive Program prioritizes acquisition of the Child Development Associate (CDA) credential and one of the evaluation activities during 2013 was utilizing focus groups of family child care and group family child care providers to examine the barriers and incentives to pursuing a CDA. This was supplemented by a telephone survey of non-completing CDA participants. In 2014, one of the evaluation activities was an assessment of two CCDF-supported e-learning courses to see whether e-learning participants had

transferred learning from the course(s) they completed to their child care work settings (they had). Going forward, resources constraints will limit the evaluation to a biennial rather than an annual activity.

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

CCDF funds. Describe. CCDF quality funds

Other funds. Describe \_\_\_\_\_

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

Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c. Describe. OCFS has supported, and continues to support, the State University of New York (SUNY) to develop trainings to promote the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity. Trainings developed by SUNY are based on current scientific research and literature from organizations such as the American Academy of Pediatrics, American Health Association, the National Resource Center for Health and Safety, and other respected organizations. Three online training sessions were recently developed in collaboration with the NYS Department of Health. These online sessions support the OCFS regulations, which now require that programs offer only healthy beverages and mandate USDA meal standards be met in centers and school age child care programs. These trainings on nutrition are titled: *Infant Meal Pattern, Child Meal Pattern and Healthy Beverages*. OCFS has also added an online training called *Obesity Prevention*, that addresses physical activity, screen time reduction, and healthy meals for children. In addition, OCFS offers online training in *Preventing Sudden Infant Death Syndrome and Promoting Safe Sleeping, and Preventing Shaken Baby Syndrome (SBS)*.

OCFS, through SUNY, continues to hold regular statewide video conference training. This year, OCFS covered the following topic areas: how to introduce science, technology, engineering and math to children; how to use music and movement in children's programs; child abuse with a focus on brain injury and prevention; and finally a session on managing challenging behavior.

Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social -

emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2).

Describe. OCFS has made available, as an online training series, the following relevant topics: *Early Intervention, Managing Challenging Behavior (18-36 months), and Managing Challenging Behavior (Birth to 18 Months)*. In addition, SUNY has completed work on a training covering the developmental and program needs of school-age children. SUNY is in the process of producing an online training opportunity focused on positive social emotional development, reducing both challenging behaviors and expulsion/suspension of preschool-aged children from child care programs.

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. OCFS has made available to program staff and providers an online training session focused on family engagement. This training session covers topics such as cultural and linguistic differences and methods to engage families in both the development of the program and in supporting their child’s positive development.

Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards, for at least the year prior to kindergarten entry. Describe. OCFS has supported SUNY to develop training sessions that address the need for programs to create standards that both support a safe learning environment and meet the developmental needs of children of all cultural backgrounds. Creating a healthy and safe environment influences a child’s comfort level and interest in exploration. As such, OCFS has available training for child care staff in supervision, programming for school-age programs, and prevention of lead poisoning and other dangers to children. A videoconference training called *Looking At Your Program Through Another Lens* invites the trainee to weigh in on scenarios of challenging situations and then discuss best next steps for program staff. OCFS videoconferences, such as the sessions on music and movement, and science and math introduce developmentally appropriate activities to providers that will meet the developmental needs of young children in their care. Each videoconference session and online training opportunity has imbedded in its script Core Body of Knowledge competency areas and Early Learning Guidelines matched to its topic area.

On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development. Describe \_\_\_\_\_

Using data to guide program evaluation to ensure continuous improvement. Describe \_\_\_\_\_

Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe \_\_\_\_\_

Caring for children with disabilities and developmental delays. Describe. OCFS offers an online training session titled: *Early Intervention*. Trainees learn important information pertaining to resources available to them, including the New York State Department of Health's Early Intervention Program that may be helpful when working with a child from birth to 3 years of age who is exhibiting atypical behavior for his or her age or stage of development.

Supporting positive development of school-age children. Describe. OCFS offers an online training titled: *School-age Child Care*. This training is specific to this age group and focuses on program development, developmental stages of school-age children, and safety.

Other. Describe. Principles of childhood development, focusing on the developmental stages of the age groups for which the program provides care; health needs of infants and children; child day care program development; safety and security procedures; business record maintenance and management; child abuse and maltreatment identification and prevention; statutes and regulations pertaining to child day care; statutes and regulations pertaining to child abuse and maltreatment; education and information on the identification, diagnosis and prevention of shaken baby syndrome; safe sleep practices; sudden infant death; obesity prevention; emergency preparedness; family engagement; early intervention; transportation; prevention of lead poisoning and other hazards; study of the regulations; continuity of care; infant feeding practices; children's author studies; quality programming; and caring for children with ADHD.

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

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

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

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

Other. Describe \_\_\_\_\_

No

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

Yes. If yes, describe:

a) Licensed Center-Based Care

- 1) Number of pre-service or orientation hours and any required areas/content: Fifteen hours of training in any of the New York State statutory topics is required during the first six months of employment.
- 2) Number of on-going hours and any required areas/content: A total of 30 hours of training must be taken every two years in nine statutory topic areas. Going forward, another ten topic areas will be required of child care employees in order to meet the federal mandates. OCFS is recommending a change to New York State statute in order to develop a strategy to more effectively meet both the federal and state mandated training requirements.

b) Licensed Group Child Care Homes

- 1) Number of pre-service or orientation hours and any required areas/content: The provider/licensee in a group family child care home must complete a competency-based health and safety training prior to receiving a license to operate. The provider/licensee and all other staff in the group child care home must receive 15 hours of training in the first six months in any of the New York State statutory training topics.
- 2) Number of on-going hours and any required areas/content: A total of 30 hours of training must be taken every two years in New York State statutory training topic areas. Going forward, another ten topic areas will be required of child care employees in order to meet the federal mandates. OCFS is recommending a change to New York State statute in order to develop a strategy to more effectively meet both the federal and state mandated training requirements.

c) Licensed Family Child Care Provider

- 1) Number of pre-service or orientation hours and any required areas/content: The provider/licensee in a family child care home must complete a competency-based health and safety training prior to receiving a license to operate. The provider/licensee and all other caregivers in the family child care home must receive 15 hours of training in the first six months in any of the New York State statutory training topics.
- 2) Number of on-going hours and any required areas/content: A total of 30 hours of training must be taken every two years in nine New York State statutory training topic areas. Going forward, another ten topic areas will be required of child care employees in order to meet the federal mandates. OCFS is recommending a change to New York State statute in order to develop a strategy to more effectively meet both the federal and state mandated training requirements.

d) Any other eligible CCDF provider

- 1) Number of pre-service or orientation hours and any required areas/content: School-age child care program staff must complete 15 hours of training in any of the New York State nine statutory topics during the first six months of employment.
- 2) Number of on-going hours and any required areas/content: A total of 30 hours of training must be taken every two years in nine statutory topic areas. Going forward, another ten topic areas will be required of child care employees in order to meet the federal mandates. OCFS is recommending a change to New York State statute in order to develop a strategy to more effectively meet both the federal and state mandated training requirements.

No

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

Fully implemented as of March 1, 2016. Describe the State strategies including training, education, and technical assistance to strengthen provider's business practices. This may include, but is not limited to, such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance. OCFS has as one of its required nine statutory training topics: business record maintenance and management. Providers may take any course work in this broad topic he/she identifies as a program need. To assist in the availability of business management training, OCFS has collaborated with the two unions representing family-based providers. They have developed training specific to child care business needs.

In addition, New York State relies on CCR&Rs to help strengthen providers' business practices. CCR&Rs provide multiple group and onsite training sessions on Family Child

Care Business Essentials that cover the following topics: recordkeeping, marketing, contracts and policies, legal and insurance information, inventory, budgeting, disaster preparedness, and filing income taxes. The topics are covered in series that are often offered two to three times per year. There is usually a location where CCR&Rs operate an early learning resource center that houses curriculum material for purchase as well as a variety of equipment and technology items that can be used for program and curriculum development. Follow up on-site visits to participants in the group sessions are conducted to see whether new skills and practices are demonstrated. At the request of the provider, CCR&Rs may provide sessions on preparing for an audit.

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

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

### **6.3 Early Learning and Developmental Guidelines**

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential

domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

6.3.1 Describe the status of the State/Territory's early learning and development guidelines appropriate for children from birth to kindergarten entry.

The State/Territory assures that the early learning and development guidelines are:

- Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
- Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
- Updated as determined by the State. List the date or frequency 2012

Fully implemented and meeting all Federal requirements outlined above as of March 1, 2016. List the Lead Agency's policy citation(s) and describe using 6.3.2 through 6.3.4 below

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

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

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

6.3.2 Check for which age group(s) the State/Territory has established early learning and development guidelines:

Birth-to-three. Provide a link \_\_\_\_\_

Three-to-Five. Provide a link \_\_\_\_\_

Birth-to-Five. Provide a link <http://ccf.ny.gov/files/7813/8177/1285/ELG.pdf>

Five and older (check if State/Territory has standards for five and older that complement academic but cover child development areas not covered by k-12 academic standards). Describe and provide a link \_\_\_\_\_

Other. Describe \_\_\_\_\_

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children’s cognitive, physical, social and emotional development and support children’s overall well-being?

Yes, the State/Territory has a system of technical assistance operating State/Territory-wide

Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities but not State/Territory-wide

No, but the State/Territory is in the development phase

No, the State/Territory has no plans for development

a) If yes, check all that apply to the technical assistance and describe.

Child care providers are supported in developing and implementing curriculum/learning activities based on the State’s/Territory’s early learning and development guidelines. Describe. Beginning in 2013, all new contracted training sponsored by OCFS and funded with CCDF has been required to incorporate the Early Learning Guidelines and the Core Body of Knowledge. In addition, in part because the Early Learning Guidelines were developed by a participatory statewide process, led by the Early Childhood Advisory Council with the New York State Council on Children and Families and a wide range of early childhood organizations and agencies from across the state, CCR&Rs and other training organizations have voluntarily incorporated the Early Learning Guidelines into their training protocols.

The technical assistance is linked to the State's/Territory's quality rating and improvement system. Describe. Participants in QUALITYstarsNY are supported by a Quality Improvement Specialist who offers them technical assistance in mapping out a plan of professional development geared to implementation of QUALITYstarsNY standards. A special fund, called QUALITYscholars, helps providers pay for training and program improvement. QUALITYstarsNY, however, is not currently available statewide.

Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines. Describe. Beginning in 2013, all new contracted training sponsored by OCFS and funded with CCDF has been required to incorporate the Early Learning Guidelines and the Core Body of Knowledge. In addition, in part because the Early Learning Guidelines were developed by such a participatory statewide process, led by the Early Childhood Advisory Council and the New York State Council on Children and Families, CCR&Rs and other training organizations have voluntarily incorporated the Early Learning Guidelines into their training protocols.

Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines. Describe. Beginning in 2013, all new contracted training sponsored by OCFS and funded with CCDF, has been required to incorporate the Early Learning Guidelines and the Core Body of Knowledge. In addition, in part because the Early Learning Guidelines were developed by such a participatory statewide process, led by the Early Childhood Advisory Council and the New York State Council on Children and Families, CCR&Rs and other training organizations have chosen to incorporate the Early Learning Guidelines into their training protocols.

Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines. Describe. \_\_\_\_\_

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

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.). CCDF Discretionary funds directly support contracted training sponsored by OCFS. CCDF funds also support the Educational Incentive Fund, which helps defray the costs of training and continuing education for income-eligible providers and supports professional development for participants in QUALITYstarsNY, irrespective of income. In addition, CCDF Discretionary Infant Toddler Set Aside funds support a cadre of Infant/Toddler specialists through a network of seven Infant/Toddler Regional Resources Centers located throughout New York State. CCDF Discretionary School-Age and Resource and Referral Set Aside funds also support the state's 36 CCR&Rs to provide technical assistance to child care providers.

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) New York State general funds support some of the

technical assistance and professional development activities offered by the two unions that represent family-based providers (union dues also support professional development activities). Child care providers also pay out of pocket for training and professional development. Private dollars also enhance the work of many training organizations.

6.3.4 Check here  to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

## **7 Support Continuous Quality Improvement**

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

- 1) Supporting the training and professional development of the child care workforce (as described in Section 6)

- 2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)
- 3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services
- 4) Improving the supply and quality of child care programs and services for infants and toddlers
- 5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)
- 6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)
- 7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children
- 8) Supporting providers in the voluntary pursuit of accreditation
- 9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- 10) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible.

Throughout this Plan, States and Territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

## **7.1 Activities to Improve the Quality of Child Care Services**

- 7.1.1** What are your overarching goals for quality improvement? Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services.

The ultimate goal of quality improvement is better outcomes for children. Given the size, breadth, and diversity of the child care community (including families and providers) in New York State, the state has decided that the most cost-effective means to support quality improvement is to support the child care infrastructure. That is the primary rationale behind the state's selection of the following six activities for funding with quality set-aside dollars from among the ten specified in the CCDBG Act that are also listed above:

- Supporting the training and professional development of the child care workforce.

- Improving the quality of child care programs and services for infants and toddlers by support seven Infant/Toddler Regional Resource centers throughout the state.
- Supporting a statewide network of 36 CCR&R agencies, along with the Early Care and Learning Council, which is the membership organization for CCR&Rs in New York State.
- Supporting compliance with state requirements for licensing, inspection, monitoring, training, and health and safety .
- Supporting providers in the voluntary pursuit of accreditation through the Educational Incentive Program.
- Supporting the development or adoption of high-quality program and regulatory standards related to health, mental health, nutrition, physical activity, and physical development.
- Other activities to improve the quality of child care services: Supporting targeted professional development aligned with Quality Improvement plans for those individuals in programs participating in QUALITYstarsNY

7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:

Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2.

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

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.). CCDF Discretionary funds only

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) State General Fund, New York City Council, federal Preschool Expansion Grant, Capital District United Way

Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3.

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

CCDF funds. Describe CCDF funds (e.g., quality set-aside, including whether designated infant- and toddler set aside, etc.) funds are being used along with other CCDF funds CCDF Discretionary funds including Infant Toddler Set Aside Funds.

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_

Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4.

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

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) CCDF Discretionary funds including Infant Toddler, Quality Expansion and School-Age Resource and Referral Set Asides.

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_

Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5.

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

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) CCDF Discretionary funds only.

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_

Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6.

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

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) \_\_\_\_\_

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) Private foundation grants.

Supporting accreditation. If checked, respond to 7.7.

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

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) CCDF Discretionary funds only.

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_

Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.8.

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

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) CCDF Discretionary funds only.

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) In 2015, New York State provided \$250,000 in state funds to expand outreach and increase awareness of the CACFP program. In November, OCFS released a Request for Proposals for the purpose of awarding a contract to one vendor for the purpose of increasing the number of Day Care Center/Home or Afterschool providers participating in the Child and Adult Care Food Program. This will result in an increase in the number of children who attend Day Care Center/Home or Afterschool Programs receiving the nutrition assistance they need. The funding amount of \$250,000 will be awarded through a competitive bid process to a not-for-profit organization that demonstrates the ability to implement this outreach initiative on a statewide basis.

Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9.

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

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) \_\_\_\_\_

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_

## 7.2 Quality Rating and Improvement System

7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?

Yes, the State/Territory has a QRIS operating State/Territory-wide. Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available The QRIS, QUALITYstarsNY, is administered by the City University of New York, a public institution of higher education; overseen by the ECAC and the State Education Department (SED). QUALITYstarsNY operates in all 10 regions

throughout the state. Nearly 600 sites are currently participating. The link is: [qualitystarsny.org](http://qualitystarsny.org).

Yes, the State/Territory has a QRIS but not fully operating State/Territory-wide. Provide a link, if available.

No, but the State/Territory is in the development phase

No, the State/Territory has no plans for development

a) If yes, check all that apply to your QRIS.

Participation is voluntary

Participation is mandatory for providers serving children receiving subsidy. If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.) \_\_\_\_\_

Participation is required for all providers

Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels

Supports and assesses the quality of child care providers in the State/Territory

Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers

Embeds licensing into the QRIS. Describe \_\_\_\_\_

Designed to improve the quality of different types of child care providers and services

Describes the safety of child care facilities

Addresses the business practices of programs

Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood system and the ratings of the programs in which the child is enrolled

Provides, to the maximum extent practicable, financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services. If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality \_\_\_\_\_

Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating

b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.

- Licensed child care centers
- Licensed family child care homes
- Legally-exempt providers
- Early Head Start programs
- Head Start programs
- State pre-kindergarten or preschool program
- Local district supported pre-kindergarten programs
- Programs serving infants and toddlers
- Programs serving school-age children
- Faith-based settings
- Other. Describe. Two types of legally-exempt group programs are eligible to participate in QUALITYstarsNY: 1) SED-registered nursery schools, and 2) programs contracted by a local school district to provide Universal Pre-K services, but that are not licensed programs.

7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory. The ECAC Quality Improvement Work Group created a Data Monitoring, Accountability and Evaluation sub-group that intended to prepare a plan for evaluating the implementation of QUALITYstarsNY. Presently, no funds are available for an external evaluation. Until such time as funds do become available, in-house assessment activities have focused on process evaluation, specifically the re-rating process.

### 7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe.

Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families. Describe. \_\_\_\_\_

Establishing or expanding the operation of community or neighborhood-based family child care networks. Describe. The New York City Administration for Children's Services (ACS), EarlyLearn NYC program was designed to better integrate Head Start and other child care programs provided through contracts with the city into a standardized and improved system for providing subsidized care. This includes expanding services in communities that are defined as having the greatest need, as well as increasing child care slots for infants and toddlers. Home-based providers serve the youngest children in the EarlyLearn NYC model. Rather than contract with individual family child care and group family child care providers, ACS contracts with family child care networks. These networks recruit, oversee, and provide administrative oversight and support, and eligibility determination to family-based providers. In an effort to build continuity of care and provide families with a smooth transition when their child ages out of the family child care setting, each network is expected to link with a child care center.

Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe. OCFS offers numerous professional development opportunities that promote and expand provider's services to infants and toddlers. The OCFS E-learning training sessions available online to providers are as follows: *Managing Challenging Behavior: Birth to 18 Months, Supervision of Children, Obesity Prevention (infant nutrition), Early Intervention, Keeping Children Safe: Prevention of Lead Poisoning and Other Dangers to Children, Preventing Sudden Infant Death Syndrome and Promoting Safe Sleeping, Preventing Shaken Baby Syndrome (SBS), and Mandated Reporter Online Training.* In addition, OCFS hosts videoconference trainings on topics that focus on early childhood issues, such as Understanding Brain Injury and Prevention. Family and group family day care providers must

complete a competency-based training in health and safety topics focused on children’s needs such as: hand washing, infection control, diapering, medical emergencies, emergency preparedness, preventing shaken baby syndrome, working to prevent SIDS, protecting children from abuse and maltreatment, cleaning and sanitizing, food safety and infant feeding and safety and body fluids. Regulatory requirements address these standards as well.

In 2015, OCFS introduced and allows as an option the concept of continuity-of-care classrooms in child care centers. The continuity-of-care model requires that the center make every effort to establish and maintain a primary relationship between teachers and children and their respective families over a period of years. In the continuity-of-care model, infants/toddlers and their teachers stay together until all children in the group are 36 months of age. The core concept in continuity of care is the practice that assigns a child to one teacher who becomes responsible for the child and for communication with the child’s parents. The teachers must develop positive relationships with each child assigned to his/her care, tending to their physical and emotional needs and working together with a second group teacher or assistant teacher in the group who maintains this same relationship with another small number of children assigned to her/him. While each teacher is assigned to a small number of children, both are also responsible as a back-up for each other’s assigned children when a need arises to safeguard the health and safety of any child in the classroom.

Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care. Describe \_\_\_\_\_

Providing coaching and/or technical assistance on this age group’s unique needs from Statewide networks of qualified infant-toddler specialists. Describe. OCFS has Infant/toddler specialists in each region of the state providing technical assistance to promote an understanding of the importance of and strategies for improving the quality of care for infants and toddlers in order to meet their unique needs.

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. OCFS coordinates with the NYS Department of Health, Division of Family Health, Bureau of Early Intervention, and local Early Intervention Programs administered by municipal governments, to ensure early intervention services are provided for infants and toddlers with disabilities through State-approved early intervention program providers (early intervention specialists). The number of requests for child care for children with developmental or educational disabilities and/or in response to the “Policy Statement on Inclusion of Children with Disabilities in Early Childhood Programs,” released jointly by the Departments of Education (ED) and Health and Human Services (HHS) on September 14, 2015, states that all young children with disabilities should have access to inclusive high-quality early childhood programs, where they are provided with individualized and appropriate support in meeting high expectations.

Developing infant and toddler components within the State's/Territory's QRIS. Describe.

Developing infant and toddler components within the State/Territory's child care licensing regulations. Describe. OCFS completed a major overhaul to its child day care regulations in 2015. There were important quality issues addressed relative to infants and toddlers. One such change in regulation is the allowance to operate continuity-of-care classrooms. The continuity-of-care model requires that the center make every effort to establish and maintain a primary relationship between teachers and children and their respective families over a period of years. In the continuity-of-care model, infants/toddlers and their teachers stay together until all children in the group are 36 months of age. The core concept in continuity of care is the practice that assigns a child to one teacher who becomes responsible for the child and for communication with the child's parents. The teachers must develop positive relationships with each child assigned to his/her care, tending to their physical and emotional needs and working together with a second group teacher or assistant teacher in the group who maintains this same relationship with another small number of children assigned to her/him. Additionally OCFS regulations reduce screen time activities, requires daily physical activity, institute safe sleep measures, allow only healthy beverages and meals and snacks meeting CACFP standards in day care centers, and encourages breast feeding-friendly environments.

Developing infant and toddler components within the early learning and development guidelines. Describe. The Council on Children and Families (the Council), which serves to coordinate the state health, education and human services agencies, is housed with the Lead Agency and, as such, works very closely with the Division of Child Care Services. The Council, through the Early Childhood Advisory Council (ECAC), has developed early learning guidelines for children birth through age 5; The New York State Education Department (SED) has developed early learning standards for what children should be able to know and do by the end of their pre-school experience, upon entering kindergarten. The early learning guidelines developed by the ECAC's Workforce Development Work Group were formally released to the field in April 2012. They have been aligned with the State Education Department's Pre-Kindergarten Standards.

Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care. Describe. The New York State Infant/toddler (I/T) service initiative has been funded since 2002 and addresses the unique and special needs of the I/T population statewide. The services include providing technical assistance to providers on best practices in serving infant and toddlers, assisting providers in addressing issues that have been identified in their program(s), working with providers as they develop new infant and toddler care, promoting and facilitating child care staffing to obtain specialized training in serving the infant and toddler population, and making available to the child care provider community infant and toddler information on best practices in various

mediums. Currently, Regional I/T Technical Assistance Centers provide services for the purpose of improving the quality of I/T care within the region.

Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being. Describe \_\_\_\_\_

Other. Describe \_\_\_\_\_

- 7.3.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State's progress in improving the quality of child care programs and services in the State/Territory. OCFS is mandated to submit a biennial report to the Governor and Legislature on CCR&R services that includes evaluating the infant/toddler regional services that have been performed over each past two-year period. This report includes results of the seven CCR&R regional lead agencies efforts to create a statewide framework to promote an understanding of the importance of, and strategies for, improving the quality of care for infants and toddlers.

#### **7.4 Child Care Resource & Referral**

- 7.4.1 Describe the status of the child care resource and referral system (as discussed in Section 1.7)

State/Territory has a CCR&R system operating State/Territory-wide. Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated and if it is voluntary There are 36 CCR&Rs that make up the New York State network of CCR&Rs. The CCR&R's network of services include referrals to child care providers and programs, information on what constitutes quality child care, and technical assistance to child care providers and programs. The referral service assists families in making appropriate child care arrangements. This service is provided through in-take and consulting/counseling that leads to the development of an appropriate child care plan. This includes referrals to child care programs/providers that meet the family's needs (regulated care) and/or assistance in the development of a child care plan using parental care, legally-exempt care, in-home agencies or camps or a combination of care options. Information provided includes, but is not limited to: quality indicators, financial assistance, health/safety requirements and complaint policies. In addition, these families are provided with resource materials on how to choose appropriate child care and if appropriate, with referrals to other human services.

State/Territory has a CCR&R system operating in a few localities but not fully operating State/Territory-wide. Describe \_\_\_\_\_

State/Territory is in the development phase

- 7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the

State/Territory. OCFS maintains performance-based contracts with the CCR&Rs agencies that it funds. CCR&R services are, therefore, presented in a performance-based format. The contract structure has been created to establish a reasonable level of CCR&R services on a per county basis in New York State. Contract payments are based on the number of CCR&R milestones achieved. There are defined measurable milestones with associated unit costs to be used for payment purposes. The milestone numbers reflect a reasonable level of service for each proposed county within the available funding allocated per county. The CCR&R contracts are not only to establish measurable performance standards, but also to see that quality services are provided. There is also a category of CCR&R core functions that includes activities and services that are not captured in the measurable milestones, but remain services that CCR&Rs are contractually required to provide.

## **7.5 Facilitating Compliance with State Standards**

- 7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards? Describe. OCFS mandates provider compliance with inspections, monitoring, training, and health and safety standards by requiring cooperation with OCFS licensors and agents of the state. OCFS has a practice of progressive enforcement tactics when violations occur. In situations of imminent danger to children, OCFS will move to suspend the license or registration immediately. Enforcement can take the form of fines, suspension, revocation, or denial of licensure/registration or renewal.
- 7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory. As a result of OCFS' research into actions that result in quality improvement, OCFS changed its inspection/monitoring goals to include routine, quarterly monitoring visits to licensed and registered programs. Unannounced inspections encourage compliance with regulatory standards. OCFS conducts unannounced inspections and monitoring of all programs unless the reason for the inspection is relative to initial applications or renewal activities. OCFS is also working toward the development and piloting of a differential monitoring system during this cycle of the CCDF plan.

## **7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services**

- 7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings. Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children. Presently, 560 programs participate in QUALITYstarsNY, New York State's quality rating and improvement system. QUALITYstarsNY standards captures quality in four domains: Learning Environment, Family Engagement, Qualifications and Experience, and Management and Leadership. Star ratings (from 1-5 stars) are based on the results of documentation review and the administration of the applicable *Environment Rating Scale*.
- 7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory. There are approximately 21,000 regulated child care programs in New York State, more than 14,000 of which served at least one subsidized child in federal fiscal year 2014. Therefore, the Lead Agency determined that until QUALITYstarsNY goes statewide, New York State needs a quality "shorthand" to evaluate the quality of child care programs and services and expand consumer education as to what constitutes quality in a child care program. This will help parents make more informed decisions about the child care arrangement they choose for their child. New York State's approach is to create a system of quality indicators that capture the elements of a child care program's characteristics above and beyond regulatory compliance.

The upfront development costs are being underwritten by a group of private foundations. OCFS is drawing upon the expertise of its sister agencies by working in partnership with the NYS Department of Health, the NYS Office of Mental Health, and other agencies. In addition, private foundation funding is providing OCFS with the services of an outside expert (Dr. Richard Fiene, Director, Research Institute for Key Indicators, and a retired professor from Pennsylvania State University).

It is important that the initiative be fiscally neutral once it is implemented, so a leaner approach to site inspections is needed. Thus, with Dr. Fiene's assistance, New York is developing a system of differential monitoring using existing regulatory staff to collect additional quality data. More than 50,000 child care inspections are conducted every year, the majority of which have no regulatory violations. The time that is saved using a differential monitoring approach will be used to collect additional information about program quality. The first step is supporting OCFS to move from a conventional program inspection and monitoring system to a differential monitoring system. Using the key indicator methodology process employed in other states, Richard Fiene and his colleagues seek to identify the strongest predictors of full regulatory compliance in child care centers and family child care homes. To date, a draft set of indicators that will be the foundation of an approach to differential monitoring of family-based child care has been created. Work is beginning to identify quality indicators that are already embedded in the state's child care regulations, along with other indicators identified by research as predictive of program quality, such as those that are included in QUALITYstarsNY and New York's Early Learning Guidelines. In addition, the New York State Department of Health has offered to develop a set of health indicators that will include both physical and social-emotional indicators (developed in collaboration with the New York State Office of Mental Health). Still to come: indicators from other domains, differential monitoring frameworks created for other modalities of care, with corresponding quality indicators, piloting, systems changes, staff training, and finally, statewide implementation.

## **7.7 Accreditation Support**

7.7.1 Does the State/Territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

- Yes, the State/Territory has supports operating State/Territory-wide. Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation AfterSchool Works! NY offers a rigorous program accreditation for SACC programs that is available statewide. OCFS offers an Educational Incentive Program (EIP) that reimburses child care staff for training expenses taken to meet child care topics listed in regulation. The EIP program, however, prioritizes those training dollars toward course work completed in accreditation in the Child Development Associate (CDA) Credential, the New York State Children's Program Administrator Credential, School-Age Child Care Credential, Infant and Toddler Child Care

and Education Credential or the Infant Toddler Child Development Associate Credential, as well as Family Child Care Accreditation administered by the National Association for Family Child Care, and the National Administrator Credential. Approximately eight percent of EIP training dollars are awarded to reimburse credential training and college course work.

- Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide. Describe \_\_\_\_\_
- No, but the State/Territory is in the development phase
- No, the State/Territory has no plans for development

7.7.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory OCFS will evaluate the state's progress on improving SACC program quality through accreditation by tracking how many programs gain accreditation through AfterSchool Works! NY and how many programs are informed about the accreditation option through resources on program quality provided by OCFS on its website and through other materials disseminated to providers.

## 7.8 Program Standards

7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development? Please describe. Relevant efforts are described throughout this Plan.

7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory Assuming that this question refers to 7.8.1, existing evaluation efforts are described elsewhere in the Plan.

## 7.9 Other Quality Improvement Activities

- 7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten. Relevant efforts are described throughout this Plan. In addition, OCFS has relationships with various advocacy groups and agencies who are able to offer professional development and conference opportunities for school-age providers as well as develop targeted technical assistance to further meet the needs of providers.

## **8 Ensure Grantee Program Integrity and Accountability**

Under CCDF, program integrity and accountability activities are grounded in the State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

### **8.1 Program Integrity**

- 8.1.1 Describe how the State/Territory ensures that their definitions for violations have been modified, and program integrity procedures revised to reflect new requirements.

Families are required to report a change in their circumstances such as change in: income, household composition, employment or other approved activity, and provider.

The Child Care Time and Attendance system (CCTA) tracks the child's attendance, calculates bills according to the New York State market rate structure, and applies the rules of the funding source used to pay for child care services. CCTA allows districts to run pre-defined reports that help the LDSS operate their child care subsidy program more efficiently.

OCFS is currently piloting a data analytics system referred to as the Child Care Program Integrity. This system obtains data from at least four different applications and analyzes the data to determine the likelihood of fraudulent activity by providers and parents.

LDSSs are allowed to periodically require that parents check in with the LDSS to determine if there have been any changes to the family's circumstances. These check ins are designed not to be overly burdensome to the families.

8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements. Check all that apply.

Issue policy change notices

Issue new policy manual

Staff training

Orientations

Onsite training

Online training

Regular check-ins to monitor implementation of the new policies. Describe. OCFS holds conference calls with all regional office managers every other week to discuss progress and issues of concern across the state. This type of forum has been helpful in maintaining consistency across regions and a clear understanding of requirements.

Other.

8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF. The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements. OCFS' primary methods of monitoring sub-recipients are internal controls either present within or dependent on multiple databases used for the authorization, payment, and claiming of child care throughout the state; routine training of monitoring staff, front-line district staff and providers; and district audits, including the CCDF Improper Payment Review and district investigation units. Database internal controls include Welfare Management System (WMS) authorizations, Benefit Issuance and Control System (BICS) payments, claims and vendor files, Child Care Facility System (CCFS) provider demographics, licensing and enrollment information, Child Care Time and Attendance (CCTA) child care service provision detail and payment detail, and Child Care Program Integrity (CCPI). New York City currently uses WMS NYC for Public Assistance eligibility and payments and the Automated Child Care Information System (ACCIS) for child care eligibility determinations, authorizations and payments. Various built-in edits

identify or stop questionable activity such as paying a non-licensed provider, or paying above the state maximum rate. Reports are available that highlight potential anomalies. All LDSSs are required to complete and submit to OCFS a multi-year Child and Family Services Plan and annual plan update to report on how they administer their child care program. OCFS reviews these plans to make sure that the LDSS is in compliance with federal and state requirements. In addition, OCFS, through a contract, offers two-day regional trainings to LDSS staff that administer the local child care subsidy program.

**Definition:** “Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93). Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as “vendors”). The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified.”

8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

- a) Check which activities the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.
- Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
  - Run system reports that flag errors (include types) Describe: CCTA flags the number of payments overridden. WMS allows districts to identify what other services the client receives and if the client is in receipt of services in another district.
  - Review of enrollment documents, attendance or billing records
  - Conduct supervisory staff reviews or quality assurance reviews
  - Audit provider records
  - Train staff on policy and/or audits

Other. Describe. The New York City Human Resources Administration routinely matches Public Assistance data from WMS NYC to ACCIS. WMS statewide data is routinely matched to Social Security Administration (SSA) data to verify validity of the social security number and related demographic data.

A district self-assessment instrument to identify internal control strengths and weaknesses, measure compliance with regulations and reviews of specific child care cases is under development. New York City is currently working on implementing CCTA and the Benefit Issuance and Control System (BICS). This will have a number of benefits, including merging of non-NYC and NYC data into a single database, thus reducing the possibility of child care duplication and duplication of effort simplifying training, achieving long-term reduction in maintenance costs, improving quality of attendance information, and resulting in improved edits.

None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines \_\_\_\_\_

b) Check which activities the Lead Agency has chosen to conduct to identify administrative error.

Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))

Run system reports that flag errors (include types). Describe CCTA flags the number of payments overridden. WMS allows districts to identify what other services the client receives and if the client is in receipt of services in another district.

Review of enrollment documents, attendance or billing records

Conduct supervisory staff reviews or quality assurance reviews

Audit provider records

Train staff on policy and/or audits

Other. Describe. NYC Human Resources Administration routinely matches public assistance data from WMS NYC to ACCIS. WMS statewide data is routinely matched to SSA data to verify validity of the social security number and related demographic data.

A district self-assessment instrument to identify internal control strengths and weaknesses, and measure compliance with regulations and reviews of specific child care cases is under development. New York City is currently working on implementing CCTA and the Benefit Issuance and Control System (BICS). This will have a number of benefits including merging of non-NYC and NYC data into a single database, thus reducing the possibility of child care duplication and, duplication in effort simplifying training, achieving long-term reduction in maintenance costs, improving quality of attendance information, and resulting in improved edits.

None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines \_\_\_\_\_

8.1.5 Which activities (or describe under "Other") the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory? The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under "Other") the Lead Agency will use for unintentional program violations?

Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount \_\_\_\_\_

Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)

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 composition of unit below

Other. Describe. Require that district reverse claims (federal payments) related to improper payments.

None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, include action steps and completion timelines \_\_\_\_\_

b) Check which activities the Lead Agency will use for intentional program violations or fraud?

Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount \_\_\_\_\_

Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)

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 composition of unit below

Other. Describe. In addition to LDSSs reversing improper federal claims, LDSSs typically refer significant Intentional Program Violations or fraud to local, state, or federal criminal investigatory agencies. In New York City, by far the largest local district in the state, the NYC Department of Investigations is typically the agency contacted. Additionally, many districts have created fraud investigation units for various forms of social services fraud.

None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, include action steps and completion timelines \_\_\_\_\_

c) Check which activities the Lead Agency will use for administrative error?

Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount \_\_\_\_\_

Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)

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 composition of unit below

Other. Describe. OCFS communicates through various methods to local regional staff, LDSS providers and clients what the state policies, procedure and regulations and when necessary it clarifies issues relating to identified administrative issues. Some of the methods used for communication include state- and LDSS-run websites, administrative directives, LDSS letters, state and LDSS trainings, and through direct communications.

None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, include action steps and completion timelines \_\_\_\_\_

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified. \_\_\_\_\_

Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified. \_\_\_\_\_

Prosecute criminally

Other. Describe Local social services districts. NYS regulations prescribe actions including client and provider sanctions, recoupments and disqualifications. Some of these actions are listed below:

- With the exception of child care services authorized as a child protective or child preventive service, a recipient or former recipient of child care services who has been convicted of or has voluntarily admitted to, on or after May 15, 2004, fraudulently receiving child care services is subject to a disqualification from the child care subsidy program.
- A recipient or former recipient who has been convicted of or has voluntarily admitted to fraudulently receiving child care services on or after May 15, 2004, and the CCSU for which he or she is a member, are disqualified from receiving child care services for periods of time varying from six months to five years determined by the dollar amount of the fraud and by the number of convictions or admission of fraudulently receiving child care.
- The failure of a family receiving child care services to pay the family share for such services established by the social services district or to cooperate with such district to develop an arrangement satisfactory to the district to make full payment of all delinquent family shares constitutes an appropriate basis for suspending or terminating such child care services in accordance with the procedures set forth in state regulations.
- A family share also may be required of any family to recoup an overpayment for a child care services regardless of whether any member of the family is receiving public assistance.
- A person convicted of a felony or misdemeanor against children or, for caregivers of legally exempt family child care, whose household includes an individual convicted of such a crime may not be enrolled by a legally-exempt caregiver enrollment agency as a child care caregiver.
- A social services district may disqualify a provider from receiving payment for child care services provided under the child care subsidy program if a provider: (a) is criminally convicted of fraud; (b) is found to be civilly liable for fraud; (c) has voluntarily

admitted to filing a false claim for reimbursement for child care services; (d) has been disqualified from the Child and Adult Care Food Program, by the New York State Department of Health and/or its sponsoring agency, for submission of false information on the application, submission of a false claim for reimbursement or failure to keep required records on the application, submission of a false claim for reimbursement or failure to keep required records; (e) has failed to comply with the terms of a repayment plan with the social services district, or (f) has a conviction of any activity that occurred in the past seven (7) years that indicated a lack of business integrity; or (g) has been found by a social services district, after the social services district has conducted an administrative review in accordance with clause (ii) of this subparagraph, to have submitted a false claim(s) to a social services district for reimbursement.

- Overpayments for child care services made as a result of payment for aid continuing for a caretaker who loses a fair hearing must be recovered as prescribed in regulation.

New York State Office of Children and Family Services (OCFS) also maintains regional offices that monitor child care provider licensing and assess the health and safety of provider sites. These offices may suspend provider licensing under certain circumstances. OCFS also conducts periodic local district audits which often address both client and provider eligibility. Districts are instructed to redress audit overpayments, typically through recoupment, and to adjust district fund claiming as required. OCFS and local districts refer cases to local and or state law enforcement (e.g., New York City Department of Investigation, NYS Office of the Welfare Inspector General, local district attorneys) in cases of suspected criminal activity based on thresholds that vary by jurisdiction.