



**CHILD CARE AND DEVELOPMENT FUND PLAN
FOR FFY 2008-2009**

This Plan describes the CCDF program to be conducted by the State for the period 10/1/07 – 9/30/09. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

The official text of the applicable laws and regulations govern, and the Lead Agency acknowledges its responsibility to adhere to them regardless of the fact that, for purposes of simplicity and clarity, the specific provisions printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text.

Public reporting burden for this collection of information is estimated to average 165 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

(Form ACF 118 Approved OMB Number: 0970-0114 expires [DATE])

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PART 1
ADMINISTRATION

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), 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)

1.1 Lead Agency Information (as designated by State chief executive officer)

| | |
|--|--|
| Name of Lead Agency: | Office of Children and Family Services (OCFS) |
| Address of Lead Agency: | 52 Washington Street Rensselaer, New York 12144 -2796 |
| Name and Title of the Lead Agency's Executive Officer: | Gladys Carrión, Esq., Commissioner Chief |
| Phone Number: | (518) 473-8437 |
| Fax Number: | (518) 474-9617 |
| E-Mail Address: | info@ocfs.state.ny.us |
| Web Address for Lead Agency (if any): | www.ocfs.state.ny.us |

1.2 State Child Care (CCDF) Contact Information (day-to-day contact)

| | |
|--|--|
| Name of the State Child Care Contact (CCDF): | Janice Molnar, Deputy Commissioner |
| Title of State Child Care Contact: | Division of Child Care Services New York State Office of Children and Family Services |
| Address: | 52 Washington Street Rensselaer, NY 12144 |
| Phone Number: | (518) 474-9454 |
| Fax Number: | (518) 474-9617 |
| E-Mail Address: | janice.molnar@ocfs.state.ny.us |
| Phone Number for child care subsidy program information (for the public) (if any): | 1-(800)-345-KIDS (5437) |
| Web Address for child care subsidy program information (for the public) (if any): | www.ocfs.state.ny.us |

1.3 Estimated Funding

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2007 through September 30, 2008. (§98.13(a))

CCDF: *\$314 million*

Federal TANF Transfer to CCDF: \$*

Direct Federal TANF Spending on Child Care: \$*

State CCDF Maintenance of Effort Funds: *\$102 million*

State Matching Funds: *\$ 104 million*

Total Funds Available: \$*

** Federal TANF transfer to CCDF, Direct Federal TANF Spending on Child Care and Total Funds Available will not be known until enactment of the SFY 2007-2008 and SFY 2008-2009 State Budgets and FFY 2007-2008 Federal Budget.*

1.4 Estimated Administration Cost

The Lead Agency estimates that the following amount (and percentage) of Federal CCDF and State Matching Funds will be used to administer the program (not to exceed 5 percent): *\$ 20.9 million (5 %)*. (658E(c) (3), §§98.13(a), 98.52)

1.5 Administration of the Program

Does the Lead Agency directly administer and implement all services, programs and activities funded under the CCDF Act, including those described in Part 5.1 – Activities & Services to Improve the Quality and Availability of Child Care, Quality Earmarks and Set-Aside?

Yes.

No. If no, use the table below to **identify** the name and type of agency that delivers services and activities. (If the Lead Agency performs the task, mark “n/a” in the box under “Agency.” If more than one agency performs the task, identify all agencies in the box under “Agency,” and **indicate** in the box to the right whether each is a non-government entity.)

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| Service/Activity | Agency | Non-Government Entity (see Guidance for definition) |
|------------------------------------|--------------------------|---|
| Determines individual eligibility: | | |
| a) TANF families | Social service districts | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| b) Non-TANF families | Social service districts | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Assists parents in locating care | Social service districts | <input checked="" type="checkbox"/> Yes CCR&R <input type="checkbox"/> No |
| Makes the provider payment | Social service districts | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Quality activities | Multiple agencies | <input checked="" type="checkbox"/> Both |
| Other: | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

If the Lead Agency uses outside agencies to deliver services and activities, **describe** how the Lead Agency maintains overall control.

Child care services and reimbursement to providers are implemented mainly through the use of subsidies, which are administered by local departments of social services. State regulations and assurances concerning the administration of the subsidy program are binding with the local departments of social services. In addition to this, OCFS maintains a Memorandum of Understanding with the State University of New York and the City University of New York to partially subsidize child care services for low income students enrolled in either of these two higher education systems. Further, through a Memorandum of Understanding 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.

New York State funds a variety of demonstration projects to explore alternative approaches to enhancing the quality of child care in the State. Projects may focus on various aspects of child care including: improving the process of eligibility determination through facilitated enrollment and expanding eligibility limits in certain economic zones or other innovative proposals. Several of such programs are listed below.

The 2005-2006 New York State Budget appropriated \$3.5 million in additional funds for all five of the existing facilitated enrollment projects at that time. This included the continuation of the Bronx, Brooklyn, and Liberty Zone New York child care subsidy pilot projects which will continue to be administered by the Consortium for Worker Education (CWE) on behalf of the union child care coalition of the New York State American Federation of Labor-Congress of Industrial Organizations. The program will continue to offer child care subsidies to working families with income up to 275 percent of the federal poverty level. A portion of the funds is being made available to CWE for activities such as facilitated enrollment, outreach and community education. The balance of the funds is allocated to the Administration for Children's Services in New York City for the actual subsidies incurred by clients enrolled through this demonstration project.

Another facilitated enrollment project to receive additional funds in the 2005-2006 budget was the child care subsidy project in Monroe County. The Monroe Chapter of the Union Child Care

Coalition of the New York State AFL-CIO has designated The Children's Institute, a not-for-profit well established community child care program, to administer the child care subsidy pilot project in Monroe County. The child care subsidy project will offer activities such as facilitated enrollment, outreach, and community education to working families in Monroe County with income up to 275 percent of the federal poverty level. A portion of the funds will go to The Children's Institute to administer the program, and the balance of funds is allocated to the Monroe County Department of Human Services for the actual subsidies incurred by clients enrolled through this demonstration project.

The fifth facilitated enrollment project to receive additional funding in the 2005-2006 budget is the Capital Region and Oneida County Child Care Facilitated Enrollment Demonstration Project. The New York State AFL-CIO's Workforce Development Institute, Inc. (WDI) is administering this pilot demonstration project in the Capital Region of Albany, Rensselaer, Schenectady and Oneida counties. This demonstration project seeks to facilitate the process of applying for child care subsidies for working families with income up to 275 percent of the federal poverty level.

In the 2006-2007 New York State Budget, there was \$8.3 million allocated in additional funds for the facilitated enrollment projects. \$4 million of the \$8.3 million is allocated for another child care subsidy pilot in Queens, New York which will be administered by CWE. This child care facilitated enrollment demonstration project will offer child care subsidies to working families with income up to 275 percent of the federal poverty level. It will follow the same model and provide the same services that have been provided through the other CWE facilitated enrollment projects. The remaining \$4 million will be additional funds used for the continuation of the Bronx, Brooklyn and Liberty Zone New York child care subsidy pilots. Except for \$300,000, which was allocated for the continuation of the Capital Region and Oneida County Child Care Facilitated Enrollment Demonstration Project, administered by the WDI.

The following are activities to improve the quality of child care described in Part 5 of this Plan:

- 1. A public awareness campaign is conducted via an agreement between OCFS and the State University of New York. State-funded resource and referral agencies also engage in public awareness activities in their local geographic areas.*
- 2. Resource and referral activities are conducted with a statewide network of not-for-profit community based agencies.*
- 3. Grants to improve the quality of programs – For family and group family day care, grants are part of the child care resource and referral services that are provided to child care communities statewide through OCFS contracts. For day care centers and school-aged child care program, grants are awarded via a competitive Request for Proposals process, which is administered directly by the OCFS.*
- 4. Monitoring activities – OCFS contracts with the New York City (NYC) Department of Health and Mental Hygiene for the provision of services to licensed group family day care homes, and to provide registration activities for family day care and school-*

age child care programs in NYC. OCFS has Memorandum of Understandings with 36 upstate counties for the provision of family day care and school age registration activities. In 2005 all the registration services have become performance based which will result in additional monitoring activities by OCFS.

Training activities are conducted through an agreement between OCFS and the State University of New York (SUNY), and contracts between OCFS and the American Red Cross, and the New York State Child Care Coordinating Council.

1.6 Use of Private Donated Funds

Will the Lead Agency use private funds to meet a part of the matching requirement of the CCDF pursuant to §98.53(e)(2)?

- *Yes. If yes, are those funds:
- Donated directly to the State?
 - Donated to separate entity designated to receive private donated funds?
Name: New York State Office of Children and Family Services
Address: 52 Washington Street, Rensselaer, New York 12144
Contact: Suzanne Zafonte Sennett
Type: Director, Bureau of Early Childhood Services

**New York State reserves the authority to make a formal decision to use private donated funds to meet a part of the matching requirement. Note that New York State has not received nor sought out private donations for the CCDF.*

How many entities are designated to receive private donated fund? 0

Provide information below for each entity:

Name:
Address:
Contact:
Type:

No .

1.7 Use of State Pre-Kindergarten (Pre-K) Expenditures for CCDF-Eligible Children

1.7.1 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF maintenance of effort (MOE) requirement?

Yes, and:

() The State assures that its level of effort in full day/full year child care services has not been reduced, pursuant to §98.53(h)(1).

(__ %) Estimated percentage of the MOE requirement that will be met with pre-K expenditures.(Not to exceed 20%.)

If the State uses Pre-K expenditures to meet more than 10% of the MOE requirement, the following **describes** how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

No.*

** New York State has not made a formal decision as to whether State Pre-K expenditures for CCDF eligible children will actually be used to meet MOE requirements. New York State is unprepared to estimate a percentage that would be met through this option at this time. Part of New York State's decision making related to this issue would be based on confirmation from HHS that such an action would not require UPK programs to use different procedures to enroll students whose costs were used to meet MOE.*

1.7.2 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF Matching Fund requirement? (§98.53(h))

Yes, and

(__%) Estimated percentage of the Matching Fund requirement that will be met with pre-K expenditures. (Not to exceed 20%.)

If the State uses Pre-K expenditures to meet more than 10% of the Matching Fund requirement, the following **describes** how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

No.

1.7.3 If the State answered yes to 1.7.1 or 1.7.2, the following **describes** State efforts to ensure that pre-K programs meet the needs of working parents: (§98.53(h)(2))

1.8 Improper Payments

1.8.1 How does the Lead Agency define improper payments?

The term "improper payment"

- *means any payment that should not have been made or that was made in an incorrect amount (including underpayments and overpayments) under*

statutory, contractual, administrative, or other legally applicable requirements; and

- *includes any payment to an ineligible recipient or provider, any payment for an ineligible service, any duplicate payment, and payment for services not received.*

1.8.2 Has your State implemented strategies to prevent, measure, identify, reduce and/or collect improper payments? (§98.60(i), §98.65, §98.67)

Yes, and these strategies are:

OCFS regulations address the prevention, measure, identification, reduction and collection of overpayments. Social services districts may establish additional standards for child care providers by inclusion of the standard in its Child and Family Services Plan and approval from OCFS. Strategies used across the State include:

Prevention measures:

- ♦ *Documentation requirements to establish eligibility,*
- ♦ *Verification of client or provider reported information,*
- ♦ *Periodic determination of eligibility to capture changes in circumstances,*
- ♦ *Issuance by OCFS of policy statements to districts,*
- ♦ *Training of department of social services staff on policies and procedures,*
- ♦ *Referral to the district's Front End Detection System (FEDS) of applications that suggest a higher than acceptable risk for erroneous payments prior to determining eligibility, and*
- ♦ *Disqualification penalties for child care assistance upon conviction or voluntary admission of fraud.*

Identification of errors:

- ♦ *Requirement that districts establish comprehensive fraud and abuse control activities,*
- ♦ *Requirement that districts conduct a need verification of a sample of cases to determine that there is a continued for child care,*
- ♦ *Requirement that districts review a sample of cases to compare Child and Adult Care Food Program monitoring forms with provider attendance forms to verify that child care services were provided on the dates listed,*
- ♦ *Requirement that legally-exempt caregiver enrollment agencies conduct annual on-site inspections of 20 percent of enrolled, legally-exempt family child care providers,*
- ♦ *Districts may use Eligibility Verification Review (EVR) procedures, which may include an intensive interview, documentation to verify identity, address and/or employment, computer searches and other checks to obtain leads and determine whether there may be other income, or employment,*
- ♦ *Monitoring of providers either through on-site visits or based on complaints or random selection,*
- ♦ *Investigation of cases in response to public complaints, and*

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- ◆ *Investigation of the cause of overpayments, and initiation of fraud investigation when appropriate.*

Reduction and collection of overpayments:

- ◆ *Mandatory recoupment procedures when fraud is involved,*
- ◆ *Process established for recovery of overpayment includes repayment plan,*
- ◆ *Fraud cases may be referred for prosecution, and*
- ◆ *Cooperation with repayment process is required for applicant/recipient to retain child care eligibility.*

No. If no, are there plans underway to determine and implement such strategies?

Yes, and these planned strategies are:

No.

PART 2
DEVELOPING THE CHILD CARE PROGRAM

2.1 Consultation and Coordination

2.1.1 Lead Agencies are required to *consult* with appropriate agencies and *coordinate* with other Federal, State, local, tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)). **Indicate** the entities with which the Lead Agency has consulted or coordinated (as defined below), by checking the appropriate box(es) in the following table.

Consultation involves the meeting with or otherwise obtaining input from an appropriate agency in the development of the State Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments (noted by the asterisk in the chart below).

Coordination involves the coordination of child care and early childhood development services, including efforts to coordinate across multiple entities, both public and private (for instance, in connection with a State Early Childhood Comprehensive System (SECCS) grant or infant-toddler initiative). At a minimum, Lead Agencies must coordinate with (1) other Federal, State, local, Tribal (if applicable), and/or private agencies responsible for providing child care and early childhood development services, (2) public health (including the agency responsible for immunizations and programs that promote children’s emotional and mental health), (3) employment services / workforce development, (4) public education, and (5) Temporary Assistance for Needy Families (TANF), and (6) any Indian Tribes in the State receiving CCDF funds (noted by the asterisks in the chart below).

| | Consultation in Development of the Plan | Coordination with Service Delivery |
|--|--|---|
| Other Federal, State, local, Tribal (if applicable), and private agencies providing child care and early childhood development services. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> * |
| Public health | <input type="checkbox"/> | <input checked="" type="checkbox"/> * |
| Employment services / workforce development | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> * |
| Public education | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> * |
| TANF | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> * |

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| | Consultation in Development of the Plan | Coordination with Service Delivery |
|---|--|---|
| Indian Tribes/Tribal Organizations, when such entities exist within the boundaries of the State | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Representatives of local government | <input checked="" type="checkbox"/> * | <input type="checkbox"/> |
| State/Tribal agency (agencies) responsible for | | |
| State pre-kindergarten programs | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Head Start programs | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Programs that promote inclusion for children with special needs | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Other (See guidance): | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Emergency Preparedness Officials or experts | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

* *Required.*

For each box checked above, (a) identify the agency providing the service and (b) describe the consultation and coordination efforts. Descriptions must be provided for any consultation or coordination required by statute or regulation.

OCFS consults with representatives of local government through the consolidated services planning process. This planning process requires local governments to assess their needs for child care services, to hold public hearings and to consider ways of meeting identified needs. As part of their assessment, local districts must involve all other appropriate organizations including child care resource and referral agencies, child care associations, Head Start Programs, economic development groups, pre-kindergarten programs and school districts. Local social services districts participate in a periodic technical assistance/ discussion conference call. Through telephone conferences we discuss ramifications of program and policy decisions, share operational implementation concerns and best practices, and develop strategies for the delivery of child care subsidy support programs.

- *The child care subsidy program is also a demonstration of intensive coordination with the New York State Office of Temporary and Disability Assistance (OTDA). All relevant child care policies and program procedures are coordinated with programs related to welfare reform and self sufficiency development administered by OTDA.*
- *The OCFS Program Development unit has obtained collaboration and support from the NYC Department of Health and Mental Hygiene (NYCDHMH), the NYC Administration for Children’s Services (ACS), and the NYC Human Resources Administration (HRA) in an effort that has improved the review process of day care grant proposals. In supporting our efforts, these NYC agencies provide qualified staff that then review day care start up*

or expansion, school age programs, and health and safety grant applications. OCFS Program Development staff coordinate all the review sessions on a quarterly basis.

- *The state child care administrator is currently chairing a task force for the State Early Intervention Council to develop coordinated health and safety standards across child care and congregate settings for the provision of early intervention services.*
- *Emergency Preparedness Plan - OCFS consults and coordinates its emergency preparedness plans with the New York State Emergency Management Office, Disaster Preparedness Commission. Under their leadership, OCFS developed a disaster preparedness plan that provides leadership and direction from its Home Office to the seven regional offices of the Bureau of Early Childhood Services. (attachment 2.1.1)*
- *In addition to the attached emergency preparedness plan, OCFS reviews and approves licensed and registered day care providers' emergency plans. Licensed and registered providers of day care must submit a written plan for the emergency evacuation of children from the premises for each shift of care provided (day, evening, night). Primary emphasis must be placed on the immediate evacuation of children. The plan, as approved by the Office, must be posted in a conspicuous place in the program or filed in a place in the program which is available to the parents of the children in care. The approved emergency evacuation plan must describe the following:*

(1) how children and adults will be made aware of an emergency;

(2) primary and secondary evacuation routes;

(3) methods of evacuation, including where children and adults will meet after evacuating the home, and how attendance will be taken; and

(4) notification of authorities and the children's parents.

2.1.2 State Plan for Early Childhood Program Coordination. *Good Start, Grow Smart* encourages States to develop a plan for coordination across early childhood programs. **Indicate** which of the following best describes the current status of the State's efforts in this area. **Note: Please check only ONE.**

- Planning.** Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
- Developing.** A plan is being drafted.
The draft is included as **Attachment 2.1.2.***
- Developed.** A plan has been written but has not yet been implemented.
The plan is included as **Attachment 2.1.2.**

- Implementing.** A plan has been written and is now in the process of being implemented. The plan is included as **Attachment 2.1.2.**
- Other (describe):**

*The plan is too early in its developing stage- no formal document is available as an attachment.

Describe the progress made by the State planning for coordination across early childhood programs since the date of submission of the 2006-2007 State Plan.

Indicate whether there is an entity that is responsible for ensuring that such coordination occurs. Indicate the four or more early childhood programs and/or funding streams that are coordinated and describe the nature of the coordination.

Describe the results or expected results of this coordination. Discuss how these results relate to the development and implementation of the State's early learning guidelines, plans for professional development, and outcomes for children.

Describe how the State's plan supports or will support continued coordination among the programs. Are changes anticipated in the plan?

The State Child Care Administrator is an active member of the Leadership Group of the Early Childhood Comprehensive Systems (ECCS) Planning Initiative. This committee was first established in December of 2004 to oversee the development and implementation of the planning initiative. The Leadership Group is comprised of senior staff from nine health, education, and human service agencies with a stake in early childhood [i.e. Department of Health, Council on Children and Families, Office of Children and Family Services, Office of Temporary and Disability Assistance, Office of Alcohol and Substance Abuse Services, Office of Mental Health, Office of Mental Retardation and Developmental Disabilities, Department of State, and the State Education Department]. This group developed a vision & mission statement and set the direction for the planning effort. The leadership group then convened a series of cross-disciplinary workgroup meetings to assess potential cross-cutting goals, current activities, and opportunities for early childhood system-building for children and families across three developmental periods: prenatal & transition to parenthood; infant & toddler (0-3); and preschool age (3-5). Approximately 50 people participated, including a large core of people who participated in all three developmental periods, with a smaller number of individuals who joined for more age-specific or content-specific expertise. These groups met monthly for full-day meetings between June 2004 and December 2004 and were assisted by a professional facilitator. BECS regional staff actively participated in the workgroup series. The collective work of this workgroup was then presented back to the leadership group in January 2005 for their review and

comment. This information was then used to draft the planning document which was recently completed for submission to the Federal Maternal and Child Health Bureau.

Public Health, Including Programs That Promote Children's Emotional and Mental Health

- *OCFS has developed a partnership with the NYSDOH and the New York State Department of Environmental Conservation (NYSDEC) to address issues of risk involving the health and safety of children in day care programs in a timely manner. Issues such as air and soil contamination, on or near day care programs, are jointly addressed by the three agencies and the provider. Concerns that have been addressed include buried gas tanks at defunct gas stations, and the presence of Perchloroethylene (Perc) in the air at dry cleaners.*
- *Issues of communicable disease at child care programs are addressed jointly with the State and local Health Departments.*
- *OCFS and NYSDOH collaborated on developing updated guidance and support documents and risk disclosure forms, used by day care providers and OCFS in evaluating a provider's prospective site of operation. In addition, OCFS is collaborating with NYSDOH in conducting comprehensive training sessions on environmental hazards for OCFS fire safety representatives. OCFS and NYSDOH are also planning statewide videoconferences for day care providers on the topic of environmental health and safety.*
- *Each September, the NYSDOH Immunization unit distributes a survey to schools, day care centers, and group family day care providers in the state to capture information on how many children have received each type of immunization. OCFS works with the NYSDOH Immunizations Office to see that all appropriate day care providers receive the survey, and are compliant in completing and returning the survey to NYSDOH.*
- *OCFS is involved in the New York State Potassium Iodide Task Force along with the New York State Emergency Management Office Disaster Preparedness Commission, New York State Education Department (NYSED), and NYSDOH. This task force was formed in January 2002 to assure that schools and day care sites within a ten mile vicinity of a commercial nuclear power plant are prepared in the event of a radiological emergency occurring at the plant. The plan for preparedness includes developing appropriate evacuation procedures in the event of a leak of radioactive iodine from the power plant and also the distribution of potassium iodide to schools and day care settings that provide care to children. In the event of a radiological emergency, potassium iodide may be administered to children under age 18 as a prophylactic measure to prevent the uptake of radioactive iodine into the thyroid. Since the original public distribution of Potassium Iodide in 2002, the FDA has approved a lower dose tablet, and also a liquid more suitable to administration to children. Plans are underway for the task force to present informational meetings, as well as distribute the liquid potassium iodide in the areas within a ten mile radius of a working nuclear power plant. This is planned during the summer /fall 2007.*

- *The U.S. Department of Health and Human Services has called for the elimination of lead poisoning (defined as blood lead level at or above 10 mcg/dL) among children aged six years and younger. In support of this goal, states and cities funded by Center for Disease Control's (CDC) lead poisoning prevention program – including New York State and New York City, which each receive CDC funding individually - are required to develop and implement plans to eliminate childhood lead poisoning by the year 2010. OCFS is partnering with NYSDOH and other stakeholders in eliminating lead. Our routine inspection and monitoring of providers enable us to identify programs with risk factors, ensure that the provider develops a safety plan, and refer them to the proper agencies for assistance in eliminating the risk.*
- *NYS OCFS - BECS is participating with NYC DOH, the lead agency and others in promoting good health and nutrition in children. While our regulations support appropriate nutritional and health standards, we are partnering with other stakeholders in doing whatever we can to further promote good nutrition and the effort to decrease the incidence of obesity. The epidemic of obesity has become one of the most pressing public health problems for New Yorkers, as well as Americans and most citizens of the world. To stop the obesity epidemic will not be easy. It will require the input, hard work and the skills, talents, and perseverance of many people, organizations, and groups including the medical community, educational community, business community, academia, government, and the general public. To address this important issue in New York State, a strategic planning process involved a steering committee and a wide array of stakeholders.*
- *Through NYS Innovative Programs Initiative voluntary agencies have received awards for the purpose of promoting the emotional and mental health of children attending day care facilities. One such program is researching best practices in managing the behaviors of children who are emotionally disturbed or present discipline challenges. By teaching the resulting best practices to day care providers statewide, we intend to reduce the number of children who are removed from day care settings because of their behavior. Another program is assessing the activity pattern resulting from active play as a means to address the epidemic of obesity in young children. All research and analysis results and outcomes will be available to day care providers through out the state.*
- *Healthy Child Care America Campaign- OCFS continues to collaborate with the NYSDOH to implement the shared New York State goals for Healthy Child Care America. The two agencies have developed ongoing consultative strategies on such areas as health care consultants, SID prevention and others.*

Public Education

- *Advantage After-School Programs- OCFS currently implements the Advantage After School Program (AASP). AASP offers safe and accessible places for school-aged children to learn and play after traditional school hours; research has shown that these are the hours when pre-adolescent and adolescent problem behaviors are most likely to occur. The selected programs are operated by community based organizations in*

partnership with schools. The total allocation for SFY 2006-07 is \$27.5 million, and is currently funding 193 AASPs at approximately 257 sites in schools and communities across the state, serving over 26,000 youth. The AASPs are designed around four program outcomes, three performance targets, and established Program Standards of Excellence

The Outcomes are:

- *To improve the social, emotional, academic and vocational competencies of school-age children;*
- *To prevent and reduce the incidence of out-of-wedlock adolescent pregnancies;*
- *To reduce other negative behaviors such as violence and crime; tobacco, alcohol and substance abuse; disengagement from school; school suspension; and truancy and health-compromising behaviors;*
- *To provide parents with a safe after school environment for their children.*

AASPs have three performance target areas that relate to the achievement of these four program outcomes. The three performance target areas for all programs are:

- *Child Performance – a measurement of how children that regularly attend the after school program will enhance their academic achievement.*
- *Youth Involvement/Attendance - a measurement of program quality as demonstrated by the consistency of attendance by the children enrolled in the after school program.*
- *Parental/Guardian Involvement – a measurement of program quality as demonstrated by parent satisfaction and participation.*

In addition to program outcomes and performance targets, AASPs operate around established Program Standards of Excellence. These standards cover staff ratios and qualifications; staff behaviors; inclusion of special populations; program activities; safety and health; space and equipment; youth and parent participation; school-community collaboration; and program leadership. In addition, programs serving children less than 13 years old must complete the registration process for School Age Child Care (SACC) outlined in OCFS Regulations.

- *OCFS has ongoing discussions on early learning guidelines with NYSED, to enhance our understanding of the educational system's expectations of what young children should know, understand and be able to do when they enter kindergarten. In order for child care programs to assist children in preparation for success in the educational system, programs should reinforce the competencies of early learning. A greater discussion of this is found in part 5.2, early literacy.*
- *OCFS continues its collaborative efforts with NYSED on the 21st Century School Initiative. This is a federally funded after school program which provides opportunities for academic enrichment and offers students an array of services, programs and activities designed to reinforce and complement the regular academic program of participating students.*

- *NYSDOH and NYSED continue to assist OCFS in addressing issues as they relate to the administration of medications in day care programs. In particular these two sister agencies have made recommendations on the use of health care consultants, health care plans and training issues for day care providers. Our collaborative efforts are aimed at resolving concerns about safety of medication management in child care settings.*

TANF

- *OCFS coordinates with the New York State Office of Temporary and Disability Assistance (OTDA) regarding child care programs and the delivery of child care services to TANF recipients in order to meet their work requirements.*

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) introduced major changes affecting families in receipt of public assistance. While the PRWORA addressed parental responsibility for families in receipt of public assistance, New York has extended this concept to low income families who are not on assistance. OCFS, OTDA and the New York State Department of Health worked in collaboration to develop a regulatory framework and to design a system that will work for all program areas, including: child care, child welfare, public assistance, medical assistance and child support

State Pre-K programs

- *State Education Universal Pre-kindergarten Education Program (UPK)-The State has provided a comprehensive early childhood education and development program for three and four-year-old children administered by public schools. The program provides the option to school districts either to provide the services themselves or through contract. At least 10% of their funding must be dedicated to contracts with other agencies. OCFS has collaborated with the NYSED to ensure that day care policy and standards are articulated to school districts seeking to contract with day care programs. OCFS is also an active participant on the Education Department's interagency advisory committee for this initiative.*

Head Start Programs

- *Child Care/Head Start Collaboration – OCFS continues to work with the Head Start Collaboration Project to address issues in the areas of communication, planning, regulatory flexibility, program design, and the provision of services to the entire family.*

Programs That Promote Inclusion for Children with Disabilities

- *Preschool Special Education Efforts – The State Education Department and OCFS are working collaboratively to integrate child care programs and approved special education preschools to coordinate, inclusive programs for children with special needs. This collaboration has resulted in a jointly signed letter to the approved special education preschools regarding their obligation to be licensed as day care center programs. In*

addition, the two agencies have collaborated to provide a video-conference training session to the child day care community on working with children with special needs.

- *The State Child Care Administrator sits on the New York State Early Intervention Coordinating Council. This creates a formal mechanism for coordinating efforts between the child care community and the Early Intervention Program to assist in meeting the needs of infants and toddlers with special needs.*

Higher Education

A variety of strategies are being used to build connections between higher education and the child care community.

- *OCFS created the Educational Incentive Program (EIP) to provide scholarships to help child care providers and staff obtain the training and education they need to provide quality care. The awards can be used for credit and non-credit bearing college courses and professional accreditation programs. In 2006, \$9.175 million was allocated for EIP and over 25,000 awards were issued. Over \$51 million has been awarded to scholarship recipients to date.*
- *OCFS continues to contract with the State University of New York to sponsor distance learning opportunities. A key initiative supported through the State University system is the provision of an educational teleconference each month. In 2006, 49,638 day care providers attended videoconference training.*
- *OCFS worked with the Infant Toddler Coalition of New York State to create a New York State Infant/Toddler certificate for child care professionals. The certificate is part of a strategy to improve professionalism, college-level preparation, and to provide “key rungs” on a career ladder within the field. The ultimate goal is to increase recruitment and retention of qualified child care providers.*

Child Care Resource and Referral Agencies (CCRR) – *OCFS funds a network of statewide CCRRs and consults with them regularly on key and emerging issues related to child care. OCFS sponsors regional sessions that bring the CCRRs together with State staff to augment regular communication.*

2.2 Public Hearing Process

Describe the Statewide 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), §98.14(c)) At a minimum, the description must provide:

Date(s) of statewide notice of public hearing: April 19 thru April 22, 2007
Manner of notifying the public about the statewide hearing: *Notice of public hearing was posted on the Office of Children and Family Services internet and intranet sites and published for 4 consecutive days in newspapers across the state as legal advertising starting on April 16, 2007*
Date(s) of public hearing(s): May 14, May 22 and May 24, 2007.

Hearing site(s): *Rensselaer, Rochester and New York City.*

How the content of the plan was made available to the public in advance of the public hearing(s): *Prior to the public hearing, the draft plan was available to the public and local departments of social services via posting on the OCFS internet and intranet sites. Alternatively, individuals were able to request a printed copy from OCFS.*

A brief summary of the public comments from this process is included as **Attachment 2.2.**

2.3 Public-Private Partnerships

Does the Lead Agency conduct or plan to conduct activities to encourage public-private partnerships that promote private-sector involvement in meeting child care needs?

Yes. If yes, **describe** these activities or planned activities, including the results or expected results.

No.

- 1) **The Innovative Program Initiative** – This program provides funding opportunities for participating public and private agencies to exercise their creativity in addressing emerging needs by developing proposals in the areas of research and program development. The initiative encourages new ideas from stakeholders in the daycare community. The initiative has begun to already provide effective strategies to improve the delivery and quality of child care services; expand child care services to areas where traditionally there has been a shortage of quality of child care; promote public-private partnerships; assessing, analyzing and responding to new and emerging needs; and researching and studying the needs of unique populations. The first seven organizations funded during the 2005-2007 time period produced: a book of teaching strategies for preschoolers with severe behavior challenges; and a program manual to assist legally exempt childcare providers in improving the quality of care they provide. The latest awards are as follows:

(1) *Organization Name: State University of New York at Cortland.*

Summary: The goal of this project is to improve the delivery and quality of childcare and educational services offered to preschool children in early childhood settings in the Cortland area by creating the Cortland Area Early Childhood Professional Development Service.

(2) *Organization Name: Fordham University*

Summary: This program has been funded to provide on-site training and technical assistance in the area of child trauma, creating safe and nurturing environments, and supporting the development of social and emotional competence in young children exposed to violence and substance abuse.

(3) *Organization Name: Sisters of Saint Joseph of Rochester, Inc*

Summary: *This program has been funded to complete a research initiative that will yield the best child care practices for caring for infants with special medical and developmental needs.*

(4) Organization Name: *New York State Association for the Education of Young People*

Summary: *This program has been funded to develop a Family Child Care Credential for family child care providers in New York State.*

(5) Organization Name: *Queens Child Guidance Center*

Summary: *This program has been funded to develop an Emotionally Responsive Child Care Training Curriculum and train staff to use the curriculum. The organization will develop best practices for children with serious emotional challenges.*

(6) Organization Name: *Young Men’s Christian Association of Watertown, NY*

Summary: *This program has been funded to assess impact on children’s activity patterns resulting from active independent play as a means to address the epidemic of obesity in young children.*

(7) Organization Name: *Family and Children’s Association*

Summary: *This program has been funded to develop and implement a bilingual daycare center for children attending the Hempstead School District’s half-day pre-K program.*

(8) Organization Name: *Buffalo Hearing & Speech Center*

Summary: *This program has been funded to assist with implementation of the Early Language to Literacy Project. It will assist children with difficulties acquiring oral language proficiency in early developmental stages.*

2) Child Care Resource and Referral (CCR&R) – *CCRR agencies funded by OCFS currently provide a variety of assistance and services to employers in the area of day care start-up. The programs have been asked to develop strategies that will recruit and retain child care providers and be responsive to the continued development of employer-supported child care.*

3) Healthy New York - *New York State has made quality child care and affordable health insurance two of its highest priorities. OCFS and the New York State Insurance Department continue to administer the Healthy New York initiative. Together, a special \$ 2 million dollar funding initiative was established. The program is an opportunity for registered and licensed day care programs to provide health insurance coverage through participating carriers. “Healthy NY” is administered by the NYS Insurance Department and offers uninsured small business owners a streamlined, yet comprehensive, benefit package at a reduced cost and it is available through all HMOs in New York State.*

4) Online Permits and Licensing Project (OPAL) - *OCFS is one of eight state agencies participating in the OPAL project. The OPAL project will ultimately result in on-line licensing*

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capabilities, with an interface between OPAL and the Child Care Facility System (CCFS) but at this point the process remains a manual one. A potential day care applicant submits via the OPAL website, www.NYS-Permis.org, a request for an application for one of five modalities of child care regulated by New York State. OPAL transmits the request directly to OCFS where the request is processed through the CCFS. 3,120 OPAL requests have been processed since its implementation in 2001.

PART 3

CHILD CARE SERVICES OFFERED

3.1 Description of Child Care Services

3.1.1 Certificate Payment System

Describe the overall child care certificate process, including, at a minimum:

- (1) a description of the form of the certificate (98.16(k));
- (2) a description of how the certificate program permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to choice of the provider; (658E(c)(2)(A)(iii), 658P(2), 98.2, 98.30(c)(4) & (e)(1) & (2)) and
- (3) if the Lead Agency is also providing child care services through grants and contracts, estimate the proportion of §98.50 services available through certificates versus grants/contracts, and explain how it ensures that parents offered child care services are given the option of receiving a child care certificate. (98.30(a) & (b)) This may be expressed in terms of dollars, number of slots, or percentages of services.

Attach a copy of your eligibility worker's manual, policy handbook, or other printed guidelines for administering the child care subsidy program as **Attachment 3.1.1**.

If these materials are available on the web, provide the appropriate Web site address (materials must still be attached to Plan):

Note: Eligibility worker's manuals, policy handbooks, or other printed guidelines for administering a child care subsidy program will be held for reference purposes only. Documents provided by Lead Agencies pursuant to this section will not be uniformly or comprehensively reviewed and will not be considered part of the Plan. All information required to be part of the Plan must continue to be set forth in the Plan.

The child care certificate takes the form of a voucher. Policies and procedures for the certificate program were developed by modifying existing voucher forms and systems support. All local departments of social services, with the exception of New York City, have available to use the child care certificate program developed by OCFS that interacts with OCFS eligibility authorization and payment systems. Erie County and New York City have developed and implemented a local equivalent child care certificate program which has been approved by OCFS.

Districts must inform parents applying for child care that they may:

- a) *Choose to have care provided by one of the child day care providers with which the district has contracted for the provision of child care services; or*

- b) *Request a child care certificate which enables families to select from a wide range of child care arrangements. The child care arrangements include care by licensed daycare centers, registered family day care providers, licensed group family day care providers, registered school-age child care programs, legally-exempt family child care providers, legally-exempt in-home child care providers, and legally-exempt group child care programs.*

Districts inform families of the full range of child care options, the types of care that are eligible for payment, and factors to consider when selecting child care. This information is provided verbally or in writing, as appropriate.

Families must be given full discretion in selecting and arranging for the purchase of child care services from eligible providers. However, the district may disapprove a provider chosen by a recipient in a child protective case if there is reason to believe that it would be contrary to the health, safety or welfare of the child. When a family elects to use a provider with which the district has a contract, the child must be enrolled with the provider selected by the family to the maximum extent practical.

When a family elects to use a child care certificate to self-arrange care, the district is responsible for preparing the certificate. The certificate and instructions for the provider must be issued directly to the family. A child care certificate is valid for a 30 day period commencing on the date of issue. During this period, the family may present the certificate to any eligible provider. If the family is unable to locate care during the 30 days, the family may request another certificate in order to continue to try to self-arrange care or may ask the district to arrange care with one of the child day care providers with which it contracts.

When a child care provider with whom the family has arranged care agrees to provide services to an eligible child, the family is responsible for signing the child care certificate and giving the certificate and the instruction sheet to the provider. The provider is responsible for completing the provider sections of the certificate and returning it to the district by the date specified. Once returned to the local department of social services, the approval is valid as long as the child is enrolled with the provider or until re-certification for the service is required, whichever occurs first.

Upon return of a child care certificate, the district reviews all submitted items to ensure that the provider selected by the family is eligible to receive payment. The district will notify the family or provider immediately if additional information is needed in order to determine that the provider is eligible to be paid from subsidy funds. Payment will be authorized for services that the provider has claimed. In order to facilitate on-going payment for services, the districts will send information about on-going billing processes to all eligible providers as soon as possible after return of the child care certificate.

In the New York State Child Care and Development Fund (CCDF) Annual Report (ACF-800) for the period October 1, 2005 through September 30, 2006, OCFS estimated that out of 225,158

children funded under CCDF, 181,813 children (80.7 percent) received child care services through certificates and/or cash, and 43,345 children (19.3 percent) through grants or contracts.

3.1.2 In addition to offering certificates, does the Lead Agency also have grants or contracts for child care slots?

Yes, and the following **describes** the types of child care services, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))

No.

Districts, as well as other sub-grantees identified in Section 1.5, may have contracts with day care centers, group family day care homes, family day care homes, and school-age child care programs as well as other organizations identified in Section 1.5.

3.1.3 The Lead Agency must allow for in-home care but may limit its use. Does the Lead Agency limit the use of in-home care in any way?

Yes, and the limits and the reasons for those limits are: (§§98.16(g)(2), 98.30(e)(1)(iv))

No.

Families must provide the in-home provider with all employment benefits required by State and/or Federal law and must pay the provider at least the minimum wage. In order to meet the needs of the category of families served, as described in Section 1.5, sub-grantees such as the State University of New York, the City University of New York, and the New York State Department of Agriculture and Markets provide subsidies for child care services through a network of child care agencies and programs, rather than in-home care.

3.1.4 Are child care services provided through certificates, grants and/or contracts offered throughout the State? (658E(a), §98.16(g)(3))

Yes.

No, and the following are the localities (political subdivisions) and the services that are not offered:

In order to meet the needs of the category of families served, as described in Section 1.5, the State University of New York, the City University of New York, and the New York State Department of Agriculture and Markets provide subsidies for child care services through a network of child care agencies and programs rather than through a child care certificate.

3.2 Payment Rates for the Provision of Child Care

The statute at 658E(c)(4) and the regulations at §98.43(b)(1) require the Lead Agency to establish payment rates for child care services that ensure eligible children equal access to comparable care.

These rates are provided as **Attachment 3.2A**.

The attached payment rates were or will be effective as of *October 1, 2007*.

Provide a summary of the facts relied on by the State to determine that the attached rates are sufficient to ensure equal access to comparable child care services provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:

- The month and year when the local market rate survey(s) was completed: *June 2007*. (§98.43(b)(2))
- A copy of the **Market Rate Survey instrument** and a **summary of the results** of the survey are provided as **Attachment 3.2B**. At a minimum, this summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings (**See Guidance for additional information.**)
- Does the Lead Agency use its **current** Market Rate Survey (a survey completed within the allowable time period –10/1/05 -9/30/07) to set payment rates?
 Yes.
 No.

At what percentile of the current Market Rate Survey is the State rate ceiling set? If you do not use your current Market Rate Survey to set your rate ceilings or your percentile varies across categories of care (e.g., type of setting, region, age of children), please describe and provide the range of variation in relation to your current survey. (**Please see Guidance for additional information.**)

- How the payment rates are adequate to ensure equal access to the full range of providers based on the results of the above noted local market rate survey (i.e., describe the relationship between the attached payment rates and the market rates observed in the survey): (§98.43(b))

Child care market rates effective October 1, 2007 are based upon a sample of licensed and regulated providers that were surveyed by telephone in June 2007. The sample of providers was drawn so that there was an adequate representation of the full range of providers within geographic areas. A Request for Application was issued to secure bids to conduct the telephone survey. The contractor was provided written materials and conducted the telephone survey in English and Spanish and had resources available to assist providers in other languages as needed.

The contractor collected the rate data by type of provider, age of the children in care, and length of time of the care. Data from the survey was analyzed and market rates were determined according to the following methodology that was used in the previous market rate survey. The rates from the survey were clustered into five distinct groupings of districts based on similarities of the rate data. Market rates were then established for each cluster at the 75th percentile. The rates established reflect variations in the cost of care for family day care homes, group family day care homes, day care centers, and school-age child care programs. Exceptions for specific districts to the cluster rates were established based on two criteria. There must be at least 10 rates per cell (age group, time period, and modality). The district's 75th percentile must be equal or greater than the 75th percentile for the corresponding county cluster plus 4% of the county cluster 75th percentile.

The market rate structure for providers of legally-exempt family child care and legally-exempt in-home child care reflects a standard market rate and an enhanced market rate. The standard market rate is set at 65% of the market rate established for registered family day care providers. This differential reflects the higher costs associated with meeting the higher regulatory standards to become a registered family day care provider. The enhanced market rate is set at 75% of the maximum reimbursement rate given to registered family day care providers. To receive the enhanced market rates, legally-exempt family child care providers and legally-exempt in-home child care providers must complete ten or more hours of 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. The State has not experienced reluctance from legally-exempt family child care providers and legally-exempt in-home child care providers to provide child care services to subsidized families at these rates.

Districts are required to make payments based on the actual cost of care up to the applicable market rate. Districts may establish in its Child and Family Services Plan, subject to approval by OCFS, differential payment rates for child care services provided by a regulated child care provider that has been accredited by nationally recognized child care organization and/or for child care services provided during the week-end, the night, or evening hours. The rate of payment established must not exceed 15 percent of the appropriate market rate. A district may request approval from OCFS for a differential greater than 15% for non-traditional and/or accredited programs upon a showing that the 15% is not sufficient to provide access.

- Does the Lead Agency consider any additional facts to determine that its payment rates ensure equal access? (§98.43(d))

Yes. If, yes, **describe**.

No.

- Does the State have a tiered reimbursement system (higher rates for child care centers and family child care homes that achieve one or more levels of quality beyond basic licensing requirements)?

Yes. If yes, **describe**:

Local social services districts are allowed to establish differential payment rates for child care services provided by licensed or registered child care providers or programs that have been accredited by a nationally recognized child care organization. A district that chooses to offer a differential payment must indicate this in its Child and Family Services Plan and receive approval from OCFS. The differential rates established by the district may be up to 15 % higher than the applicable market rates.

No.

3.3 Eligibility Criteria for Child Care

3.3.1 Age Eligibility

Does the Lead Agency allow CCDF-funded child care for children above age 13 but below age 19 who are physically and/or mentally incapable of self-care? (Physical and mental incapacity must then be defined in Appendix 2.) (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))

Yes, and the upper age is *under 18 years of age if the child has special needs; or is under 19 years of age if the child has special needs and is a full-time student in a secondary school or in an equivalent level of vocational or technical training.*

No.

Does the Lead Agency allow CCDF-funded child care for children above age 13 but below age 19 who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii))

Yes, and the upper age is *under 18 years of age if the child is under court supervision; or is under 19 years of age if the child is under court supervision and is a full-time student in a secondary school or in an equivalent level of vocational or technical training.*

No.

3.3.2 Income Eligibility

Complete columns (a) and (b) in the matrix below. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the SMI.

| Family Size | (a) 100% of State Median Income (SMI) (\$/month) | (b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85] | IF APPLICABLE | |
|-------------|---|--|--|---|
| | | | Income Level, lower than 85% SMI, if used to limit eligibility | |
| | | | (c) \$/month | (d) % of SMI [Divide (c) by (a), multiply by 100] |
| 1 | 2940 | 2499 | 1702 | 58% |
| 2 | 3845 | 3268 | 2282 | 59% |
| 3 | 4750 | 4037 | 2862 | 60% |
| 4 | 5655 | 4807 | 3442 | 61% |
| 5 | 6560 | 5576 | 4022 | 61% |

If the Lead Agency does not use the SMI from the most current year, **indicate** the year used:

**The Lead Agency uses the State Median Income (SMI) of the year 2007. State Median Income is based on the value for State Median Income for a family of four published in the Federal Register for use in the Low Income Home Energy Assistance Program (LIHEAP) for FFY 2007, and provided by the Bureau of Census and adjusted for family size.*

*** The income level for eligibility is set at 200 percent of the State Income Standard (SIS). The New York SIS is based on 2007 Health and Human Services poverty guidelines published in the Federal Register, Volume 72, Number 15.*

If applicable, the date on which the eligibility limits detailed in column (c) became or will become effective: June 1, 2007.

How does the Lead Agency define “income” for the purposes of eligibility? Please describe and/or include information as **Attachment 3.3.2**. (§§98.16(g)(5), 98.20(b))

The gross family income is used to determine eligibility for child care. Sources of income that are included in the financial eligibility determination are listed in Attachment 3.3.2.

- Is any income deducted or excluded from total family income (for instance, work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments)?

Yes. If yes, **describe** what type of income is deducted or excluded from total family income.

Exclusions from gross income are provided in Attachment 3.3.2.

No.

- Is the income of all family members included?

Yes.

No. If no, **describe** whose income is excluded for purposes of eligibility determination.

Income of all members of the child care services unit (CCSU) is included. The district may elect to include 18, 19, or 20 year old individuals in the same CCSU as their parent by indicating such option in the district's Child and Family Services Plan.

When low income teen parents reside with their parents, the income of the teen's parents is not included in the financial eligibility determination.

Income of grandparents or other individuals who are persons standing in loco parentis to the child is not considered in determining financial eligibility unless such individuals have accepted both legal and financial responsibility for such child.

3.3.3 Eligibility Based Upon Receiving or Needing to Receive Protective Services

Does the State choose to provide child care to children in protective services, as defined in Appendix 2? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))

Yes.

No.

Has the Lead Agency elected to waive, on a case-by-case basis, the fee and income eligibility requirements for cases in which children receive, or need to receive, protective services, as defined in Appendix 2? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

Yes.

No.

- Not applicable. CCDF-funded child care is not provided in cases in which children receive, or need to receive, protective services.

Does the State choose 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? (§§98.20(a)(3)(ii), 98.16(f)(7))

- Yes. (**NOTE:** This means that for CCDF purposes the State considers these children to be in protective services.)
- No.

3.3.4 Additional Eligibility Conditions

Has the Lead Agency established additional eligibility conditions?
(658E(c)(3)(B), §98.16(g)(5), §98.20(b))

- Yes, and the additional eligibility conditions are: (Terms must be defined in Appendix 2)
- No.

3.4 Priorities for Serving Children and Families

- 3.4.1 Please complete the table below regarding eligibility conditions and priority rules. For columns (a) through (d), check box if reply is “Yes”. Leave blank if “No”. Complete column (e) if you check column (d).

| Eligibility Category | (a) Guarantee subsidy eligibility | (b) Give priority over other CCDF- eligible families | (c) Same priority as other CCDF- eligible families | (d) Is there a time limit on guarantee or priority? | (e) How long is time limit? |
|--|--|--|--|--|---|
| Children with special needs | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Children in families with very low incomes | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Families | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

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| | | | | | |
|--|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------|
| receiving Temporary Assistance for Needy Families (TANF) | | | | | |
| Families transitioning from TANF | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 12 months |
| Families at risk of becoming dependent on TANF | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |

3.4.2 **Describe** how the State prioritizes service for the following CCDF-eligible children: (a) children with special needs, (b) children in families with very low incomes, and (c) other. Terms must be defined in Appendix 2. (658E(c)(3)(B))

New York State prioritizes service for families with children with special needs and children in families with very low income by identifying these children as federally mandated priorities and requiring districts to give these populations priority for services. Each district is required to prepare and submit to OCFS for approval a Child and Family Services Plan that includes a comprehensive overview of the district’s plan to provide child care services, including those funded under CCDF. In preparing its Plan, the district must adhere to the State issued guidelines which identify the federally mandated priorities of children with special needs and children of families with very low incomes. Each district establishes its own definition of “very low income” at or below 200 percent of the State Income Standard. The Plan submitted by districts must include an explanation of how children who are members of the federal priority categories will be targeted and given priority for services. Districts may elect to set aside funds to ensure that priority categories will be served.

The State mandates that districts provide child care assistance to families receiving public assistance with children under 13 years of age who need child care to engage in work or to participate in required work activity programs, to families transitioning from public assistance for a 12 month period, and to certain families that are working who chose child care in lieu of public assistance. In addition to these federal and State priorities, districts also may establish their own local priorities.

OCFS reviews each district’s Child and Family Services Plan, and evaluates whether the district has established adequate measures to implement these priorities. If a district’s Plan is inadequate, OCFS works with the district to make necessary changes. A Plan cannot be approved until all sections are determined to be adequate.

3.4.3 **Describe** how CCDF funds will be used to meet the needs of: (a) families receiving Temporary Assistance for Needy Families (TANF), (b) those attempting

to transition off TANF through work activities, and (c) those at risk of becoming dependent on TANF. (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

New York State employs an integrated approach to coordinate child care under TANF and the Child Care and Development Fund. New York State has created a seamless funding stream for supporting child care subsidies through the New York State Child Care Block Grant. The portion of the NYSCCBG used for child care subsidy payments is allocated to social services districts through an allocation methodology. The allocation methodology includes weighing factors for TANF work participation rates, low-income eligibility factors and other related population factors.

In addition, New York State has established the Flexible Fund for Family Services (FFFS) that incorporates TANF funding into a flexible allocation for districts to fund a broad array of TANF eligible services. The FFFS allows districts to make individual decisions about the level of funds to be directed among allowable services, including child care subsidy. To the extent that a district chooses to direct FFFS funds to child care, the funds will be formally transferred from TANF to the NYSCCBG.

The following families are guaranteed child care services:

- *A family that has applied for or is receiving public assistance when such services are needed for a child under 13 years of age in order to enable the child's parent(s) or caretaker relative(s) to participate in required activities.*
- *A family that has applied for and would otherwise be eligible for public assistance benefits, or was receiving public assistance and voluntarily closed their public assistance case while still eligible for public assistance, when such services are needed for a child under 13 years of age in order to enable the child's parent(s) or caretaker relative(s) to engage in work.*
- *A family which is receiving public assistance when such services are needed for a child under 13 years of age in order to enable the child's parent/caretaker relative to engage in work.*
- *A family whose public assistance case has closed or a family who chose child care in lieu of public assistance and is no longer financially eligible for public assistance for a period of up to 12 consecutive months, provided certain programmatic requirements are met.*

3.4.4 Has the Lead Agency established additional priority rules that are not reflected in the table completed for Section 3.4.1? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

Yes, and the additional priority rules are: (Terms must be defined in Appendix 2) *OCFS has not established other priority rules but permits local districts to establish other local priorities.*

No.

3.4.5 Does the Lead Agency serve all eligible families that apply?

Yes.

No.

3.4.6 Does the Lead Agency maintain a waiting list?

Yes. If yes, for what populations? Is the waiting list maintained at the State level? Are certain populations given priority for services, and if so, which populations? What methods are employed to keep the list current?

No. *The lead agency does not establish waiting lists but permits local districts to establish waiting lists.*

3.5 Sliding Fee Scale for Child Care Services

3.5.1 A sliding fee scale, which is used to determine each family's contribution to the cost of child care, must vary based on income and the size of the family. A copy of this sliding fee scale for child care services and an explanation of how it works is provided as **Attachment 3.5.1**.

The attached fee scale was or will be effective as of: *10/1/07*.

Will the Lead Agency use additional factors to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

Yes, and the following **describes** any additional factors that will be used:

OCFS has approved specific amendments to the sliding fee scale requested by districts. Examples include a maximum cap of 10% of family income and a full and part-time family fee.

No.

3.5.2 Is the sliding fee scale provided in the attachment in response to question 3.5.1 used in all parts of the State? (658E(c)(3)(B))

Yes.

No, and other scale(s) and their effective date(s) are provided as **Attachment 3.5.2**.

- 3.5.3 The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: \$16,600.

The Lead Agency must **select ONE** of these options:

- ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.
- ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
- SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The following describes these families:

Families receiving public assistance are not required to pay a fee. Further, those children served through the migrant worker child care network described in Section 1.5, are also exempt from a fee if earnings are below the State Income Standards.

- 3.5.4 Does the State allow providers to charge parents the difference between the maximum reimbursement rate and their private pay rate?

Yes.

A family may choose a provider whose rates exceed the state's market rate. In such situations the family is responsible for the difference between the provider's rate and the market rate.

No.

- 3.5.5** The following is an explanation of how the copayments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))

Due to the wide disparity of per capita income, consumer price levels and the cost, availability and accessibility of child care among geographic jurisdictions within New York State, each social services district selects, with the approval of OCFS, its own family fee percentage between 10% and 35%. The family share of child care costs is calculated by applying the family fee percentage against the amount of the family's annual gross income that is in excess of 100% of the State Income Standard, and must be applied equally to all families receiving child care services in the district.

The following chart illustrates the distribution of districts and children receiving subsidized child care by the county family fee policy. This includes New York City, which comprises 59% of the average monthly unduplicated number of children served statewide in FFY 2006, and places a cap at 10% of the annual gross income.

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| Family Fee Percentage | Number of Districts | Percent of Subsidized Children |
|-----------------------|---------------------|--------------------------------|
| 10%-14% | 4 | 1.8% |
| 15%-19% | 2 | 2.8% |
| 20%-24% | 12 | 5.2% |
| 25%-29% | 18 | 73.6% |
| 30%-34% | 4 | 1.4% |
| 35% | 18 | 15.2% |
| Total | 58 | 100% |

The chart below provides examples of the percent of family income that goes toward meeting the family fee when calculated at several family income amounts. Since each district establishes its own fee percentage, the chart illustrates the percentage of income at the lowest and the highest allowable fee percentage standards for a family of three.

| 1 Annual Family Income | Family Share as Percentage of Family Income* at: | | |
|------------------------|--|---------------------------|--|
| | <u>Lowest allowable fee percentage (10 %)</u> | <u>26% fee percentage</u> | <u>Highest allowable fee percentage (35 %)</u> |
| \$15,000 | Less than 1 % | Less than 1 % | Less than 1 % |
| \$20,000 | 1.4% | 3.7% | 5.0% |
| \$25,000 | 3.1% | 8.1% | 11.0% |
| \$30,000 | 4.3% | 11.1% | 15.0% |

*These values are based on the New York State Income Standard in effect on June 1, 2007, for a family of three, \$17,170.

PART 4 PARENTAL RIGHTS AND RESPONSIBILITIES

4.1 Application Process / Parental Choice

4.1.1 Please **describe** the process for a family to apply for and receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a) through (e)). At minimum, the description should include:

- How parents are informed of the availability of child care services and about child care options

- Where/how applications are made
- What documentation must parents provide
- How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4
- Length of eligibility period including variations that relate to the services provided, e.g., through collaborations with Head Start or pre-kindergarten programs
- Any steps the State has taken to reduce barriers to initial and continuing eligibility for child care subsidies

Attach a copy of your parent application for the child care subsidy program. If the application is available on the web, provide the appropriate Web site address (application must still be attached to Plan):

Parents/caretakers are informed of available child care services when they contact their social services district (district) seeking child care assistance and when they are working with a child care resource and referral agency (CCRR) to locate care. At that time, information is provided on the types of child care providers for which payment can be made; the assistance available to parent/caretakers to select a provider; the process for making application for financial assistance in paying for child care; the parent/caretaker's right to choose the child care provider; and the parent/caretaker's right to receive a child care certificate.

Additionally, OCFS maintains a website which provides information for parent/caretakers about financial assistance, including links to local districts and CCRRs for more assistance. Families can conduct a search for licensed and registered providers by county and zip code.

Applications for child care services are submitted to the district in the county in which the applicant lives. *In order to receive child care services, the applicant must:*

- Complete and submit an application for services to the district;*
- Supply documentation necessary to determine the family's eligibility for services;*
- Actively pursue child support or be found to have good cause not to actively pursue child support; and*
- Supply information regarding the child care provider chosen by the parent/caretaker. This information must be sufficient to allow the district to verify that the provider is eligible for payment and meets minimum health and safety standards.*
- Temporary Assistance recipients, whose cases are being closed, do not have to submit an application for transitional child care services. If there is a continuing need for child care, then eligibility must be determined prior to the closing of the Temporary Assistance case.*

Eligibility determinations are made by staff of the district. *The district is required to determine eligibility within 30 days of receiving an application. A notice of eligibility or ineligibility must be sent to applicants or recipients within 15 calendar days after the determination has been*

made. When the service is authorized to be delivered, the district is required to make provision for the delivery of such services within 15 calendar days after notification of eligibility.

All Temporary Assistance applicants and recipients are informed that their TANF benefits cannot be reduced or terminated if they are not participating in work requirements due to a lack of suitable child care through the LDSS-4148A, “What You Should Know About Your Rights and Responsibilities.” An optional notice, LDSS-4647, “Important Information About Child Care” is available for districts that want to provide an additional notice for this purpose.

The length of the eligibility determination period for child care services for low income families is 12 months or less. For TANF families, child care eligibility is tied to the family’s eligibility for Temporary Assistance and their participation in required or approved work activities. Income eligibility for TANF is reassessed periodically via mailers. Participation in required or approved activities is monitored on an ongoing basis.

New York State has taken steps to reduce barriers to initial and continuing eligibility for child care subsidies. These efforts include:

- *Recognizing the need for a continuity of support to enable parents to work, applicants and recipients for child care assistance are allowed to submit applications or recertification by mail.*
- *Districts are required to determine a family’s eligibility for transitional child care benefits concurrently with closing the Temporary Assistance case or the child care in lieu of Temporary Assistance case. The recipient is not required to complete a new application for child care benefits.*
- *The guarantee for child care assistance includes a family who has applied for and would otherwise be eligible for Temporary Assistance benefits, or was in receipt of Temporary Assistance benefits and voluntarily closed its Temporary Assistance case while still eligible for Temporary Assistance, when:
 - i) *Child care is needed for a child under 13 years of age in order to enable the child’s parent(s) or caretaker relative(s) to be employed for at least the number of hours that would be required if the family were in receipt of Temporary Assistance; and*
 - ii) *The family is eligible for Temporary Assistance but chooses to receive child care services in lieu of Temporary Assistance.**
- *The OCFS Website informs families that financial assistance may be available and how to obtain additional information. Additionally, it provides information on how to get help in finding child care.*
- *OCFS has approved the use of a child care only application developed by a district. This application simplifies the collection of information for families that are applying only for*

child care benefits. Local departments of social services must obtain OCFS approval to use this application.

- *Some districts are supporting demonstration efforts around facilitated enrollment. This is being done in the following sites, the Bronx, Brooklyn, and Liberty Zone in New York City; and Albany, Monroe, Oneida, Rensselaer and Schenectady Counties. Contracted agencies assist applicants by providing applications, information and assistance. They review completed applications and gather supportive documentation prior to passing the information on to the district for expeditious determination of eligibility.*

4.1.2 Is the application process different for families receiving TANF?

Yes. **Describe** how the process is different:

Applicants for Temporary Assistance who need child care in order to participate in activities required by the district and recipients of Temporary Assistance are not required to complete a separate application for child care assistance.

No.

4.1.3 The following is a detailed description of how the State ensures that parents are informed about their ability to choose from among family and group home care, center-based care and in-home care including faith-based providers in each of these categories.

1) *NYS has issued and distributed, as part of its “Think About Child Care” family education campaign, brochures to help all parents, not just those who are receiving a child care subsidy, in selecting quality child care to meet the needs of their children. Parents are provided with information on all types of child care settings, including legally-exempt child care. This publication is available on-line at the OCFS internet site, at child care resource and referral agencies, and at social services districts.*

2) *The parent is provided at the time of application with the LDSS-4148A, “What You Should Know About Your Rights and Responsibilities”, which advises the parent of his/her rights and responsibilities regarding child care. These include the following: the right to receive information about how to locate a child care provider, the right to choose the child care provider, who may be licensed or registered or legally-exempt from OCFS licensing and registration requirements such as a relative, friend, or neighbor. The parent is also informed that it is his/her responsibility to look for and choose a child care provider and that he or she must pay any family share of the cost of child care services.*

3) *A parent who is interested in arranging care with a legally-exempt provider is informed on the enrollment form that the parent is responsible for choosing the child care provider. The enrollment form contains a certification which the parent/caretaker must sign stating: “I certify that I have selected this provider to care for my children. I understand that it is my responsibility to monitor the quality of care furnished to my children.”*

4.1.4 Does the State conduct outreach to eligible families with limited English proficiency?

Yes. Describe how the State reaches out and provides services to eligible families with limited English proficiency, including how the State overcomes language barriers with families and providers.

No.

The State reaches out and provides services to families and providers with limited English proficiency by providing several forms in six languages. Most forms are available in both English and Spanish. The following is a list of such forms with additional forms in the process of being translated.

- *Common Application-(available in Haitian-Creole, Arabic, Chinese, Russian, Spanish and English)*
- *“What You Should Know About Your Rights and Responsibilities”-(available in Haitian-Creole, Arabic, Chinese, Russian, Spanish and English)*
- *“Think About Child Care” -(available in Arabic, Chinese, Russian, Spanish and English)*

The following forms are available in English and Spanish:

- *All Client Notices (Approval of your application, denial, intent to discontinue, intent to change, delinquent family share)*
- *Enrollment for legally-exempt family and in-home child care providers*
- *Enrollment of legally-exempt group child care providers*
- *Administration of Medication*
- *Instructions for Administration of Medication*
- *Employment of Minors*
- *Legally-Exempt Provider Training Form*

Social services districts use a variety of approaches to assist families with limited English proficiency. For example, one district uses a Language Poster and Language Cards to allow an individual to point to the language that they speak. The district contracts with an organization for interpreter services. The district also has Spanish speaking clerical staff in all its offices as well as in its child care subsidy unit. Another district sub-contracts with an organization that provides translation/interpretation services in over 75 languages for all program areas.

Many community organizations throughout the State offer translation and interpreter services and are often located near or within the same building as the social services district offices. Additionally, several of the Child Care Resource and Referral programs offer translation services to families applying for services. Finally, family members and friends often serve as the applicant/recipient’s most trusted translator/interpreter.

OCFS has begun the process of having the day care regulations translated and available in Spanish. Once completed, translation of the day care regulations into other languages will be researched.

Office of Children and Family Services is also in the process of having the family and group family day care provider handbooks translated and available in Spanish. The Provider handbooks cover issues found in all of the major sections of the regulations and are designed to present providers with a better understanding of the intent of the regulations in promoting health and safety. In addition, the handbooks give providers clear guidance on how to set up their program so that it operates in compliance with the regulations. The handbooks also direct providers to resources that they can use in supporting the children and families with whom they work.

4.2 Records of Parental Complaints

The following is a detailed description of how the State maintains a record of substantiated parental complaints and how it makes the information regarding such parental complaints available to the public on request. (658E(c)(2)(C), §98.32)

OCFS maintains a toll free telephone number, which parents and other individuals may use to file complaints about child day care providers. Through the use of computer automation, calls are routed immediately to the appropriate Regional Office which has responsibility for licensing and registration in the area from which the call is being placed. The complaint line is staffed by Office of Children and Family Services personnel.

Whenever a complaint is taken, it is immediately registered on the Child Care Facility System (CCFS) complaint tracking system. As the complaint is investigated and a determination is made, this system is updated, thus providing a record of the status of all complaints that have been filed.

OCFS Regional Offices, local departments of social services and child care resource and referral agencies have access to CCFS and are authorized to inform parents about the compliance history of any child day care provider. Information about complaints, as well as other investigations, is available to parents upon request. In most cases, such requests are verbal. It is OCFS's policy to respond verbally to verbal requests for information as clearly and completely as possible while maintaining appropriate confidentiality. The only time parents are instructed to submit written requests for information is when they want copies of documents.

The most common type of information requested verbally involves the compliance history and current status of a child day care provider; specifically whether there have been any complaints about the provider. When responding to such a request, OCFS assumes that the parent is interested in the compliance history and status of the provider in question, regardless of whether a violation came to light as the result of a complaint or some other inspection. Initially, OCFS staff will suggest to parents that, although more dated information may be available, it is usually

most helpful to look at a program's compliance history over the past two years. However, if the parents want information from a period prior to the last two years, that information will be shared.

4.3 Unlimited Access to Children in Child Care Settings

The following is a detailed description of the procedures in effect in the State for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), §98.31))

OCFS' regulations require that day care centers, school-age child care programs, family day care providers and group family day care providers give parents unlimited access to their children, on demand. Parents are also entitled to access the provider and the provider's premises whenever children are in care. Providers also must give parents access to written records regarding their children. Caregivers of legally-exempt children are required to attest that they will provide such access before payments can be approved. Any provider who is unwilling to give parents unlimited and on-demand access is not eligible to receive payments for services provided to eligible children.

4.4 Criteria or Definitions Applied by TANF Agency to Determine Inability to Obtain Child Care

The regulations at §98.33(b) require the Lead Agency 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.

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 Child Care 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. The TANF agency that established these criteria or definitions is the New York State Office of Temporary and Disability Assistance. The criteria are promulgated in regulation by the New York State Office of Children and Family Services and the criteria and definitions implemented by the New York State Office of Temporary and Disability Assistance.

- "appropriate child care":

Appropriate 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 department of social services 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 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.

In addition, the following definition is applied to determine inability to obtain child care:

- "accessible child care":

Accessible means the parent or caretaker relative is able, by available public or private transportation, to get the applicable child(ren) to and from the child care provider(s) taking into consideration the age and any special needs of the children.

PART 5
ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND AVAILABILITY OF
CHILD CARE

5.1 Quality Earmarks and Set-Asides

- 5.1.1 The Child Care and Development Fund provides earmarks for infant and toddler care and school-age care and resource and referral services as well as the special earmark for quality activities. The following describes the activities; identifies the entities providing the activities; and describes the expected results of the activities and, if the activities have been ongoing, the actual results of the activities. **For the infant and toddler earmark, the State must note in its description of the activities what is the maximum age of a child who may be served with such earmarked funds (not to exceed 36 months).**

Infants and toddlers:

New York State day care regulation defines an infant as a child up to 18 months of age; toddler means a child 18 months to 36 months of age. For purposes of this section infant/toddler is any child 36 months old or younger.

New York State, under the leadership of Governor Spitzer, endorses outcome based analysis of all state funded programs including early childhood quality initiatives. In the next two years, OCFS will be examining performance measure constructs which will seek to thoughtfully and accurately evaluate the actual results of its earmarked quality initiatives. OCFS's evaluation will include how to study the data available, the tools and staff needed to record and evaluate a data study as well as what resources are needed to evaluate results without competing for the very funds needed to subsidize future investments in quality enhancements. The following bullets describe the activities; identify the entities providing the activities; and describes the expected results of the activities.

- *Increased Infant Toddler Day Care Slots: OCFS recognizes a need for increased infant/toddler child day care slots in New York State and has prioritized start-up activities in this area. OCFS has given preference to proposals that include plans to increase day care slots for this target age group. As a result, 448 infant/toddler center-based slots have been created through OCFS day care funds since October 2, 2005.*
- *New York has released a Request for Proposal (RFP) for \$1.1 million in 2007 for the continuation of infant/toddler (I/T) services on a regional basis. The RFP will seek to further develop and coordinate the I/T services regionally in partnership with OCFS. The initiative will create I/T Technical Assistance Centers on a regional basis to promote an understanding of the importance of and strategies for improving the quality of care for infants and toddlers. The I/T initiative will be funded 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, including the Infant Toddler Certificate, and making available infant and toddler information on best practices in various mediums to the child care provider community. The I/T initiative currently has seven regional infant/toddler centers that are CCRRs that focus on specialized infant/toddler training and resources for child care providers. Both fees for service and the IEP program provide the on-going support for these specialized trainings and services.

- *Accreditation: Grants to help day care centers and family day care programs serving infants and toddlers become accredited continue to be part of the OCFS budget. The accreditation process is an arduous one, involving self-assessment and often requiring upgrades to program and resources, changes in staffing and enhancement of staff skills. To increase the number of accredited programs serving infants and toddlers, grants will be provided to cover actual application fees and onsite visits. Under the current request for proposal for Early Childhood Development Programs, day care providers are reimbursed for expenses after having completed an accreditation program. Successful applicants also receive a \$200 incentive above the actual accreditation cost. OCFS will continue to provide incentives for accreditation.*

Resource and referral services:

- *OCFS has released an RFP to award a contract(s) to a qualified not-for-profit organization(s) who demonstrates the ability to provide CCRR services for a county or counties/boroughs. All bids will require that the organization be able to meet performance milestones. There is approximately \$19 million in funding available to support both basic CCRR services and services to enroll and monitor legally- exempt providers serving low income families. The CCRRs provide parents, providers, employers, and the general community with information on the components of quality child care, referrals to child care programs, and technical assistance to programs. They also engage in local public awareness activities. CCRR agencies represent a critical link between the State's efforts to oversee and strengthen the child care system and those individuals in need of care. CCRRs are and will remain instrumental in helping public assistance recipients to locate and select child care arrangements which will support their participation in work activities. The CCRRs have refined their existing contracts to a true performance based format. The unit costs established for each of the milestone services provided will continue to be utilized for funding the CCRRs based upon the achievement of their milestones. The new contract format further enhances the CCRR relationship with the local department of social services by increasing the services and focus with the legally-exempt providers during the new contract term. The milestones remain directed at the welfare reform priorities of the local department of social services and support the on-going commitment to service low income families. With the release of the new RFP in 2007, the goal is to have a more streamlined and enhanced level of CCRR services provided statewide.*

- *The CCRR agencies continue their assistance and services to employers in the area of day care start up. Efforts to foster the development of employer supported child care remain a priority of the CCRRs.*
- *The CCRR's use of the OCFS web site and immediate access to the Child Care Facilities System (CCFS) has enhanced the provision of quality child care services to families. The single statewide database of all day care providers in the state has been established to provide a facility information system. This system has established the linkages with OCFS-BECS Home and Regional Offices with all the CCRR agencies, the local department of social services and other agencies performing day care registration services. This networking system is now maintained by the agencies responsible for licensing and registering child care programs. The system has greatly enhanced the state's child care infrastructure.*

The CCRRs are providing several new services:

- *On January 31, 2005, new legislation was implemented regarding how child care providers and parents will address the issue of the administration of medications in child day care settings. The CCRRs continue to be funded to assist child care providers in meeting one of the core components of the new requirement. Every child care provider that includes the provision of medications in its service delivery strategy must have a health care consultant of record who will review and approve the health care plan. The health care consultant services are to be a resource to the child care program in developing and maintaining appropriate procedures and safeguards. The CCRRs have been involved in supporting the new administration of medication legislation through informing the child care community of the new regulation designed to further safeguard the health and safety of children across New York State.*
- *New York State has always honored the primary role and rights of parents to decide the most appropriate child care settings for their children, and to assist parents with their child care decisions. On July 31, 2006, New York State implemented an expansion of the child care regulations addressing the enrollment and monitoring of legally-exempt child care. The revised regulations prescribe the enrollment of caregivers through the creation of legally-exempt caregiver enrollment agencies. Legally-exempt child care caregivers will be required to become enrolled through a legally-exempt caregiver enrollment agency in order to be eligible to receive child care subsidy payments. The CCRRs are the agencies that have received funding to become the legally-exempt caregiver enrollment agencies, with the exception of New York City. In New York City, a request for proposal was released on February 28, 2007 for not-for-profit organizations to bid on the provision of this service as a legally-exempt caregiver enrollment agency.*

New York State sponsors various training initiatives for the CCRR agencies.

The following is an example of topics covered with CCRRs both regionally as well as individual on-site technical assistance sessions.

*Management skills
Budgeting*

Board Responsibilities

Accountability

Supervisory Skills

Networking Training

Consumer Education

Milestone Services under performance based contracts

CCFS/Computer skills

Health Care Consultancy Services

Legally-Exempt Providers Services

- *There have also been new standards developed for the CCRRs entitled, “Criteria for Best Practices”, which began implementation in 2005. This has resulted in a certification process that will be a requirement for each CCRR that will be funded as a result of the 2007 CCR&R RFP. The state’s investment of funds in CCRRs for over 15 years have reached a stage where not only is performance based services critical but best practice standards are to be applied statewide for quality service for New York state’s children and families.*

School-age child care:

- *OCFS continues to promote the development of competent staff and quality school age programs through its support of the New York State School Age Credential (SAC) and School Age program Accreditation.*
- *The NYS School Age Credential (SAC) promotes quality services to children by providing specific standards, training and evaluation of school age providers. It provides an opportunity for adults working with school age children to gain professional recognition for demonstrating competence in their on the job skills. The SAC consists of approximately 120 hours of coursework in support of seven competency goals across fourteen skill areas: Professionalism, Child Development, Safety, Health, Self Guidance, Out of School Environments, Creative, Physical, Cognitive, Communication, Social, Families and Program Management. New York State currently has over 325 SAC graduates, with 194 new applications currently under review. The success of the credential’s implementation includes the early partnership between OCFS, Cornell University Early Childhood Program and the New York State School Age Care Coalition (NYSSACC). Financial support for the candidates continues to be provided through the Educational Incentive Scholarship Program. In addition, through regulatory support, OCFS maintains a raised bar on qualifications for early childhood and school age care professionals to remain employed in child care programs or to seek higher administrative positions.*

The statewide SAC Work Group, of which OCFS is a member, provides oversight to the credential initiative. In addition to the recruitment of credential candidates, they recruit and train Endorsers to assess the credential candidates. The training occurs regionally throughout the year and is a two-day course. A total of 30 Endorsers were trained this year. The SAC Endorsers provide consistency and quality control for the credential. The Endorsers conduct the candidate assessment and interviews, and ensure the assessment

process is conducted fairly and in accordance with uniform established standards so that the credential maintains integrity and credibility.

Currently, there are 18 Host agencies located in all the regions that offer credential training programs and support for the credential candidates. The expansion of Host agencies is a continuing priority.

- *In concert with the SAC initiative, OCFS' goal is to increase the number of accredited school age programs. It is anticipated that as we increase the professionalism of the school age care providers there will be an increased interest and pursuit of accreditation. In order to assist programs interested in accreditation, a cadre of Quality Advisors has been recruited and trained who are ready to provide technical assistance to programs interested in accreditation. Quality Advisors are typically trained annually and we currently have 48 trained Quality Advisors representing all regions of the State. Accreditation is a rigorous activity for programs, and through the diligent efforts of the Quality Advisors, we now have 35 accredited school age programs in New York State, with an additional eight in process. NYSSACC also serves as a Northeast Regional Point Affiliate for the National AfterSchool Association and schedules the program accreditation visits for not only New York programs, but five other northeast states as well. New York is also the only state Affiliate of the National After School Association that is represented on the National Accreditation Council, which oversees the accreditation process, with NYSSACC as its representative.*

The hosting of statewide training institutes for the school age community has been successful in furthering these important quality goals and many providers apply for the credential and programs inquire about accreditation following the institutes.

- *The NYS School-Age Credential (SAC) - The SAC is designed to support staff working in school age child care programs. Courses are offered in every region around the state. Candidates complete approximately 120 hours of classroom training for school age providers in 14 skill areas, and also complete a resource file and portfolio. The candidates work closely with an advisor who mentors them through the process. Evaluations completed by the parents and their children, and letters of recommendation are also required as a part of the credential preparation process. Once classroom work is completed, the candidate is evaluated by a trained Endorser to determine if he/she is competent in all 14 skill areas. As a result of achieving the credential, candidates are eligible for higher level jobs in the field. To date, over 325 candidates have successfully completed the program. An additional group of 194 candidates are currently seeking the credential. Participants working in state registered programs can use Educational Incentive Program (EIP) funding for this credential program.*

Through the support and assistance of OCFS, NYSSACC has continued to build on the success of the NYS SAC Credential, as not only the most successful SAC Credential program in the country, but enabling us to realize our most successful year to date last year by awarding 97 credentials.

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/07 – 9/30/09

5.1.2 The law requires that not less than 4% of the CCDF be set aside for quality activities. (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51) The Lead Agency estimates that the following amount and percentage will be used for the quality activities (not including earmarked funds) during the 1-year period: October 1, 2007 through September 30, 2008:

\$ 78 million (19%)

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/07 – 9/30/09

5.1.3 **Check** each activity the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the special earmark for quality activities). (658D(b)(1)(D), 658E(c)(3)(B), §§98.13(a), 98.16(h))

| Activity | Check if undertaking/will undertake | Name and type of entity providing activity | Check if this entity a non-governmental entity? |
|---|-------------------------------------|--|---|
| Comprehensive consumer education | <input checked="" type="checkbox"/> | * | <input type="checkbox"/> |
| Grants or loans to providers to assist in meeting State and local standards | <input checked="" type="checkbox"/> | * | <input type="checkbox"/> |
| Monitoring compliance with licensing and regulatory requirements | <input checked="" type="checkbox"/> | OCFS and contract agencies – local DSS and CCR&R | <input type="checkbox"/> |
| Professional development, including training, education, and technical assistance | <input checked="" type="checkbox"/> | * | <input type="checkbox"/> |
| Improving salaries and other compensation for child care providers | <input checked="" type="checkbox"/> | * | <input type="checkbox"/> |
| Activities in support of early language, literacy, pre-reading, and early math concepts development | <input checked="" type="checkbox"/> | * | <input type="checkbox"/> |
| Activities to promote inclusive child care | <input checked="" type="checkbox"/> | * | <input type="checkbox"/> |
| Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children | <input checked="" type="checkbox"/> | * | <input type="checkbox"/> |
| Other quality activities that increase parental choice, and improve the quality and availability of child care. (§98.51(a)(1) and (2)) | <input checked="" type="checkbox"/> | * | <input type="checkbox"/> |

* A comprehensive list cannot be provided as many grants are awarded through the contract process throughout the course of the plan period.

Non-governmental entities include:

- Non-governmental community or faith-based organizations,
- Child Care Resource and Referral Services,
- Schools/school districts, and

- *Child care providers.*

5.1.4 For each activity checked, **describe** the expected results of the activity. If you have conducted an evaluation of this activity, please **describe**. If you have not conducted an evaluation, **describe** how you will evaluate the activities, if applicable.

In the next two years, OCFS will be examining performance measure constructs which will seek to thoughtfully and accurately evaluate activities the Lead Agency will undertake to improve the availability and quality of child care (see 5.1.1)

Comprehensive Consumer Education

- *OCFS has continued its comprehensive parent education campaign called “Think About Child Care.” The campaign provides parents with information to help them choose safe, healthy, quality child care that will meet the needs of their children. Education campaign brochures are made available through CCRR’s, child care councils and local departments of social services. All materials are available in both English and Spanish and include a brochure and checklist for a parent’s use in selecting child care services. The campaign also includes a 30-second public service announcement for television that refers parents to a toll free informational telephone number, and a 25-minute video highlighting the experiences of five families who are selecting their child care arrangements. During the next year, a portion of the State’s CCDF allocation will support the placement and distribution of these materials throughout the State as well as the development of additional materials.*
- *Resource and Referral Programs – OCFS will continue to support the network of child care resource and referral agencies (CCRR) which currently exist in New York State. The CCRRs provide parents, providers, employers, and the general community with information on the components of quality child care, referrals to child care programs, and technical assistance to programs. They also engage in local public awareness activities. CCRR agencies represent a critical link between the State’s efforts to oversee and strengthen the child care system and those individuals in need of care. With the implementation of welfare reform, CCRRs have become instrumental in helping recipients to locate and select child care arrangements which will support their participation in work activities.*
- *A major issue identified by CCRR agencies is the need to improve the information available to them in regards to data on licensed and registered child care capacity. New York State is using a portion of its CCDF funds to implement a facility information system which provides a database of all regulated day care providers. The complete system is being developed in phases and will include a direct link with the CCRR network. The phase already released statewide provides CCRR agencies with the capability to access the database for basic demographic and licensing status information on providers. The linkage with the CCRR referral system is a project that continues to be developed.*

- *Local departments of social services have been given viewing access to the Child Care Facilities System (CCFS), the state run database of licensed and registered providers. This allows the local departments to view relevant information regarding regulated child care providers, such as known regulatory compliance issues, and enhances the ability of the district to provide parents with the information and referrals they need to select an appropriate child care provider.*
- *OCFS has updated its website to provide parents with consumer information related to selecting and monitoring their child care provider. A search of the OCFS website for a child care provider will provide the regulatory compliance history of a provider for the past 24 months. The website provides a list and chronology of all regulatory violations, the severity level assigned to the violation, and the current compliance status. The profile report also provides other important information, including whether the provider is approved to administer medication and the date of the last inspection conducted.*

Grants or Loans to Providers to Assist in Meeting State and Local Standards

- *OCFS funds CCR&Rs to provide health and safety grants to legally exempt providers who care for children whose families receive child care subsidies. The health and safety items and expenditures are intended to assist the legally exempt providers to provide a safe and healthy home setting for the children in their care.*
- *OCFS funds CCR&Rs to provide start-up grants to potential providers for health and safety items and other expenditures that will enable them to meet the regulatory requirements in order to become registered. The grants received will address health and safety issues and therefore create a quality child care environment for the children.*

Monitoring Compliance with Licensing and Regulatory Requirements

- *OCFS has made a major investment in the way we license and monitor child care, bringing our licensing offices into line with the recommendations set forth by the National Association for the Education of Young Children. OCFS will continue to fund staff to support statewide oversight, monitoring, and enforcement activities to promote a quality network of child care providers. This includes State staff who will, using the Child Care Facility System, (CCFS) to the extent of its development: register family day care homes and school-age child care programs; license day care centers and group family day care homes, inspect programs and carry out enforcement functions; operate the statewide toll-free complaint line; investigate complaints; conduct fingerprinting and safety assessments; develop consistent and appropriate policies and procedures for all staff activities; provide adequate on-going technical assistance and support for child care providers; and provide oversight for the statewide system. Staff is assigned to both the home office and the seven regional offices.*
- *OCFS has agreements with 37 upstate local department of social services, and one with the New York City Department of Health and Human Services (NYCDOHHS) to provide*

additional staff resources to conduct registration activities for family day care and school-age child care providers. In addition, in New York City the NYCDOHHS also provides licensing activities for group family day care providers. These activities include conducting all required inspections, investigating and tracking complaints and performing background checks, including fingerprinting and safety assessments. These agreements have proven to be a successful and cost-effective method for monitoring compliance with statutory and regulatory requirements. Through these arrangements, OCFS has increased the number of contracted registration and inspection staff persons to 235 statewide.

- *In 2005, New York State has developed a new performance based process. There are performance indicators that are the key elements that must be covered for the licensing/registration process. They are as follows:*

Initial Registrations/Licenses

All child care programs must be inspected prior to initial licensing or registration. While registered programs (school age and family day care) do not have to be inspected prior to renewal, OCFS continues to inspect 50% of all newly registered programs.

The Contractor will process and resolve initial registration/licensing applications within six (6) months of receipt including providing applicants with all appropriate notifications regarding the status of the applications.

Renewals of Registrations/Licenses

The Contractor will process and resolve completed applications for renewals of registrations/licenses, including providing providers with all appropriate notifications regarding the renewal process, prior to the applicable registration/license lapse date or will initiate enforcement action.

Complaint Investigations

The Contractor will initiate complaint investigations within the required time frames and make determinations on the complaints within 60 days.

Safety Assessments

The Contractor will conduct safety assessments based on the categories of arrests/convictions and submit the assessments to BECS within the required time frames.

As part of the New York State commitment to safe, quality day care programs, New York State requires criminal background checks for all applicants and current operators and assistants in day care centers, school-age child care programs, group family day care homes and family day care homes. Volunteers who may have regular and substantial contact with children and persons 18 years of age and older who live in family and group family homes also must be checked for criminal backgrounds.

OCFS allocates funds to pay for the fingerprinting charges and subsequent safety assessment workload. This requirement promotes child care as a professional service, employing responsible and safe caretakers and strengthens parental confidence in the safety and quality of care.

Inspections

The Contractor will conduct one quarter of the required number of annual 50% inspections for Family Day Care, School Age Child Care programs, Group Family Day Care and complete all required documentation.

While inspection alone is not a guarantee of quality, well-trained inspectors are a crucial link to the enforcement of regulatory standards and to promoting a commitment to continuous improvement among the provider community. As we give priority to funding the start-up of programs that will provide care to the currently under-served populations of infants, toddlers and school-aged children, we will emphasize the importance of enabling licensors to be prepared to inspect for compliance with our regulations and to furnish technical assistance regarding quality program issues. Specialized training was developed and delivered in each region for licensing staff and registrars that emphasized developmentally appropriate practice, using the Early Childhood Environmental Rating Scale (ECERS) for each modality. In addition, other topics presented to staffs included: A Regulator's Guide to Carrying Out Effective Complaint Investigation and Enforcement, The Role of the Licensor, Health and Safety Competencies for Becoming a Family or Group Family Day Care Provider and A Regulator's Guide to Developmentally Appropriate Practice. Further recognizing the need for on-going and easily accessed training, OCFS has developed a series of trainings that are taken via Ilic, an on-line in house computer based training with a live facilitator/ trainer. Staff can enroll and participate in Ilic while at their own workstations.

On-Site Case and Management Review

The Contractor will provide appropriate registration, licensing, and monitoring activities, maintain appropriate case files and make appropriate entries into CCFS in the time, manner and form required by the OCFS. The acceptable level of compliance will be determined by BECS based on a quarterly on-site case and management review. The quarterly on-site case review will include a review of a sample of case files regarding initial applications, renewal applications, 50% inspections, complaint investigations and other investigations chosen in accordance with a consistent sampling framework to determine whether: OCFS policies, procedures, and regulations are applied accurately; required observations are made during inspections and investigations; all applicable entries are made in case files and/or CCFS; proper notification is given to providers and parents, where applicable, within the required time frames; each facility has the necessary active fingerprint files and they are entered into CCFS upon receipt; inspections are conducted, when appropriate, to verify compliance with any corrective action plans and/or continued regulatory violations; appropriate and timely enforcement referrals are made and appropriate and timely follow-up activities are conducted in accordance with OCFS policies and directions including cooperating with OCFS's Legal

Division on enforcement activities and, when determined necessary by OCFS, testifying at fair hearings and/or court proceedings and assisting OCFS in responding to litigation. The management review will include a review of other documentation to determine whether staff: have participated in training required by OCFS related to the performance of registration/licensing duties and participated in management and supervisory sessions on a regional and Statewide basis, as required; provided technical assistance in regard to the start-up of new programs and compliance with existing programs and information on available training and funding resources applicable to family day care, school-age child care, group family day care programs; and provided parents and the general public with access to information regarding the compliance/complaint history of all regulated providers, as required.

Quarterly Standard Performance Level – Approved Staffing Plan

The Contractor staffing plan, including the percentage of time each staff works on the project, which has been approved by BECS, is maintained during the quarter. In the event of a staff vacancy, the contractor will be allowed a three-month period from the date the vacancy was created to fill the vacancy and bring staffing back up to the approved level. The Contractor is to provide BECS with the names of the staff assigned to register and license day care programs, the percentage of time those staff work on the program and the qualifications of those staff members as part of the quarterly on-site case and management review and when otherwise requested by BECS.

Professional Development, Including Training, Education and Technical Assistance

Training activities are conducted through an agreement with the State University of New York and contracts with OCFS, the American Red Cross, and the New York State Child Care Coordinating Council.

In 2001, OCFS doubled the number of hours of training mandated for operators, program directors, employees and assistants of day care centers, school-age child care programs, group family and family day care homes. The requirement is 30 hours of training every two years. Training will continue to focus on childhood development, health and nutrition, program development, safety and security, business management, day care regulations and child abuse prevention. All new providers must complete a minimum of 15 hours within the first six months as a child care provider. Fifteen hours of training on health and safety is a pre-licensing requirement for all family and group family day care providers, who are being licensed or registered for the first time. This health and safety training will count toward the provider's overall 30 hour training requirement. OCFS will be making additional training available to existing providers through a number of mechanisms, including an expansion of the Educational Incentive Program and the successful child care videoconferences.

Training is critical to the ability of providers to operate quality early childhood programs; therefore, OCFS will continue to fund training of child care providers. Ongoing training activities for providers include:

- *Videoconference training – In order to support the needs of providers to attend the required 30 hours of mandated training, videoconferences will be broadcast once a month, for a total of 12 sessions each year. Videoconferences focus on required training topics that emphasize the operation of safe, healthy and developmentally appropriate programs for children. This year, video conference topics included Using Authentic Praise with Young Children, Child Abuse and Maltreatment, Legal Issues, Understanding Day Care Regulations, Designing an Infant/Toddler Curriculum, Literacy and Internet Safety.*
- *Videoconference testing – In order to help us in assessing the effectiveness and impact of videoconference training, a requirement for videoconference testing was implemented. At the end of each videoconference, each provider must complete and pass a test in order to receive credit and a training certificate. The testing has been successfully implemented and provides valuable feedback. The results are analyzed and provide pertinent information regarding the learning points and topics that need to be addressed in upcoming videoconferences.*
- *Educational Incentive Program – A voucher/scholarship program, created by OCFS to help providers pay for credit bearing college courses, credentials, non-credit bearing courses, conference fees, and education and training they need to provide quality care. Priority is given to low income providers, providers serving low income children and children with special needs, and providers who are taking college courses, training in a series or seeking early childhood credentials. Providers must meet income guidelines in order to qualify for the program. In 2006, the application and informational booklet was available in Spanish and almost 40% of applicants submitted their requests through a new on-line process. Approximately 24,000 providers received awards distributed in this program year. Awards totaling \$9.175 million were issued for 2006.*
- *OCFS has developed two brochures for providers. The question-answer format of the brochures directs the provider's attention to how the training requirements affect them, which training is required, and when and where to receive training. The brochures also include information regarding scholarship funds available for educational activities.*
- *Management training for day care center directors – This program provides on-site individualized, intensive support, and technical assistance to programs which are out of compliance due to factors which relate, at least in part, to management issues. The regional office responsible for licensing and monitoring the center identifies participating programs. The amount of training offered has increased and two additional curricula were developed and delivered in 2005.*
- *Health and Safety Training – The updated 15-hour competency based Health and Safety curriculum continues to be successfully implemented statewide. Trainers are continually monitored. Providers can access the website for a list of certified trainers in each county. In response to requests from the field, a second curriculum for health and safety training for day care center staff is available as optional training.*
- *In response to the Quality Child Care and Protection Act, a health and safety competency-based training curriculum was implemented and delivered statewide.*

“Health and Safety: Competency for Becoming a Family or Group Family Day Care Provider” was developed by OCFS in collaboration with SUNY Early Childhood Education and Training program.

- *Competency-based training is more interactive than traditional training formats. Competency-based training is based on specific, measurable abilities directly related to instructional objectives. Trainees complete post-training tests and demonstration of skills as a measure of their achievement of the objectives. Trainers review this information, and offer additional instruction and mentoring to trainees who did not master the materials. Legally-exempt providers have the option of participating in Medication Administration Training and becoming certified/authorized in the administration of medication. Grants of up to \$100 are available to help cover the cost of the training. Participation in this training will enhance provider knowledge, skills and abilities.*
- *“Train the trainer” sessions are held as needed to meet demand. Those who apply to health and safety training positions must hold a Certificate of Trainer Competency. Currently, there are approximately 200 trainers who are certified to deliver this training. In 2006, 3,642 potential day care providers successfully completed this training. A statewide directory of certified trainers is available on-line.*
- *Child Care Subsidy Training - A training program is offered periodically for local district child care workers, supervisors, and contract staff to inform them of child care subsidy requirements, policies and procedures. A comprehensive resource manual is available on-line to assist workers. Telephone conferences are held to address new requirements and district implementation concerns.*
- *Infant child rescue breathing, CPR, First Aid, adult first aid, and CPR training to accommodate older children in school-age programs continues through a contract with the American Red Cross. OCFS is committed to continuing this critical health and safety training with 12,000 slots.*
- *Support for providers in attaining the New York State Infant/Toddler Certificate or the Child Development Associate (CDA) credential for infant/toddler teachers – The New York State Infant Toddler Coalition has made great progress in developing a certificate program specific for providers working with infants and toddlers. Funding is provided to support the expansion of its availability statewide through the Educational Incentive Program. In addition, the Educational Incentive Program provides scholarships to cover the cost of application and assessment fees for providers seeking the Child Development Associate for infant and toddler teachers.*
- *Grants to help day care centers serving infants and toddlers become accredited- The accreditation process is an arduous one, involving self-assessment and often requiring upgrades to program and resources, changes in staffing and enhancement of staff skills. To increase the number of accredited programs serving infants and toddlers, grants will be provided to cover actual accreditation fees and costs (based on NAEYC rates) that*

programs incur to bring their programs up to accreditation standards. This could include offsetting costs of substitutes while teachers are in training, absorbing the cost of lower teacher/child ratios until those costs can be included in the fee structure, and enhancing program space and materials.

- *Support for providers caring for school-age children is provided through the Educational Incentive Program (EIP). Through EIP, each provider, who is income eligible, can receive up to \$2,000 annually in scholarship awards to obtain credit and non credit bearing training. Providers are encouraged to enroll in the SAC Credential (120 hours) to develop their competencies and increase the overall quality of their programs.*
- *OCFS completed work on a Group Family Day Care Provider Handbook and Family Day Care Provider Handbook. The provider handbooks cover issues found in all of the major sections of the regulations and are designed to present providers with a better understanding of the intent of the regulations in promoting health and safety. In addition, the handbooks give providers concrete guidance on how to set up their program so that it operates in compliance with the regulations. The handbooks also direct providers to resources that they can use in supporting the children and families with whom they work. The provider handbooks were developed at the request of family based providers and they include the following topics:*
 - *Managing and Administering Your Program*
 - *Providing and Maintaining A Safe Environment Inside and Out*
 - *Fire Protection and Non-Medical Emergencies*
 - *Protecting and Promoting Children's Health*
 - *Reporting Child Abuse and Maltreatment*
 - *Preventing the Spread of Germs*
 - *Programming that Supports Growth and Development*
 - *Offering Healthy Food*
 - *Working with Families*
 - *Growth as a Professional*
- *Ongoing training is provided to enhance the knowledge and abilities of staff who work with child care providers, including:*
 1. *Child Care Subsidy Training — A training program has been implemented for legally-exempt caregiver enrollment agencies to inform them of legally-exempt provider enrollment requirements, policies and procedures.*
 2. *Licensing Training – Training continues to assist licensors in their tasks of inspecting for compliance and providing technical assistance regarding quality program issues. The training which ranges from 2 ½ to 4 days in duration covers the following topics: A Regulator's Guide to Carrying Out Effective Complaint Investigation and Enforcement, The Role of the Licensor, Health and Safety Competencies for Becoming a Family or Group Family Day Care Provider, A Regulator's Guide to Developmentally Appropriate Practice, and Using Effective Communication to Create and Maintain Professional Relationships. In addition, a new computer based, instructor led course was developed using our Learn Linc*

Training and software system. The training entitled “The Regulator’s Guide to Evaluating Provider’s Training” was introduced in July 2006, and continued throughout the year with positive results. Efforts are underway to develop more training for licensors using the Learn Linc system.

3. Technical Support – OCFS-BECS is working in conjunction with the Information Technology Bureau of OCFS (OCFS-IT), to complete development of an automated licensing system known as the Child Care Facility System (CCFS). This system establishes uniformity of both process and reporting among all areas of the State and among all agencies involved in the regulation of day care. OCFS has already installed PC’s and/or laptops and printers in all sites that will need access to the system either for inquiry, licensing/registration or inspection activities. These sites include state offices of OCFS, local departments of social services, all NYCDOHMH Bureau of Day Care offices, CRRR’s, the NYSDOH Child and Adult Care Food Program, and all registration subcontractors. Key components of the system already in place consist of the licensing and registration processes, which includes the generation of application packages, and tracking and monitoring of providers’ regulatory and statutory compliance, including complaint and inspection tracking. Currently being piloted is the safety assessment component of the system which interfaces with the OCFS Criminal History Review Unit’s database, and allows that whenever an individual residing or employed in regulated child day care has evidence of any criminal activity, a safety assessment is conducted to protect the safety of enrolled children. This component is scheduled to be completely deployed state-wide by September 2007. Planned functionality for the future includes the development of an enforcement component, as well as the design of field-based capability.

CCFS links BECS Home and Regional Offices with all CRRR agencies, local departments of social services and agencies performing day care registration activities, including the NYCDOHMH. In addition, it establishes a single state-wide database of all day care providers regulated by the State. At this time, all providers regulated by New York State are included in the CCFS, while all the group day care center providers regulated by Article 21 of New York City Health Code are maintained separately in the NYC Department of Health database. These providers may be moved into the CCFS database after the key components of the system have been implemented state-wide. CCFS provides reporting and communication capabilities among all key stakeholders. In addition, the capability for parents and other members of the public to search the CCFS database for regulated providers has been made available on the OCFS website. This web search offers profiles of selected providers, including contact information, capacity and compliance history. In addition, OCFS has developed a component in CCFS to track the enrollment of legally-exempt providers who are caring for children receiving a child care subsidy. OCFS is working on enhancements to CCFS to provide additional capabilities.

Improving salaries and other compensation for child care providers

- *A health care insurance initiative from the OCFS and the New York State Insurance Department continues. This pilot program in conjunction with “Healthy NY” is an opportunity for registered or licensed day care programs to provide health insurance coverage through participating carriers. The pilot demonstration would offer \$50 per month for individual coverage and \$100 per month for 2-adult or family premiums. The profiles of the eligible employers will be consistent with the general rules for Healthy NY. In addition, the provider must be a regulated child care provider with no current enforcement actions pending. New York State recognizes that day care business owners and sole proprietors may wish to provide health care benefits to their employees, but lack the financial resources to offer an affordable insurance plan. OCFS will administer this initiative that will further encourage participation in Healthy NY by specifically offsetting the cost of an insurance premium for registered or licensed day providers and their employees. A major challenge facing providers is the recruitment and retention of quality staff. Retention is best achieved when staff can be provided with benefits such as health insurance. Presuming continued good standing of the child care provider, the child care insurance incentive will be guaranteed for a 12-month period. After the end of the 12-month pilot, if funds remain, programs will be extended. After project funds are exhausted, it will be the child care provider’s decision whether to continue coverage under the Healthy NY Program at the regular premium rates. As of January 2007, there are 211 providers participating in the program providing coverage for 394 individuals and 110 families.*
- *Management training for day care directors: A comprehensive annual training program will be provided at five locations across New York State for new day care directors. The training program will cover key topics to help prepare, support and retain day care directors. The management training topics will include: Regulations/Policies and Procedures/Leadership Training; Fiscal Management Institute, The Budget; Strengthening Supervisory Skills for Child Care Center Directors; and Educating, Motivating and Retraining Staff Through Quality Orientation. In addition, there will be onsite follow up, and technical assistance visits provided to new directors after attending the training.*

Activities in support of early language, literacy, pre-reading and early math concepts development

- *The New York State Department of Health is also currently working on an initiative called The Early Childhood Comprehensive Systems (ECCS) Planning Initiative (summarized previously in Section 2.1.2): One of its proposed goals is that all children have access to high quality early care and education that addresses all developmental domains and prepares children for success in school. OCFS recognizes this goal as the broad umbrella under which all New York State agencies will construct an early literacy plan for state-wide rollout.*

- *This year, the State Child Care Administrator and the Head Start Collaboration Project Director have partnered in the development of a program to address the training and literacy needs of early care and education providers with low literacy skills. While New York State has some of the highest regulatory standards in the nation for people providing early care and education, many people working as classroom assistants and family child care providers lack the literacy skills needed to provide quality services. Numerous training programs exist to help providers meet licensing standards. However, providers with low literacy skills cannot fully benefit from these trainings if they are unable to read and communicate effectively. More importantly, they are less able to support the development of literacy and language skills in children.*
- *To address the needs of these providers, the Head Start Collaboration Project, the State Child Care Administrator, SUNY Research Foundation’s Strategic Training Group, and Literacy New York (formerly Literacy Volunteers of New York State) have developed a program that uses existing early care and education training curricula as the context to provide adult literacy instruction. The training is provided in a multiple day format directed at existing trainers of early care and education programs. This program offers participants an opportunity to learn more about the needs of people with low literacy and how they can use existing training materials to meet those needs. Two sessions of the training were provided this year (2007) to child care resource and referral agency trainers and to trainers working in family child care networks in New York City.*
- *OCFS collaborates with NYSED, NYSDOH, local child care and early childhood development programs, educators and educational administrators to enhance child care programs. Activities in support of early language, literacy and numeracy are integral throughout our approach to quality child care. Research has shown that assisting children in developing the skills necessary for school readiness leads to higher achievement in later years. Training child care professionals to support and encourage early learning results in environments that are more conducive to early learning development. Training for providers facilitates the development of children’s language and literacy skills, scientific thinking and mathematical performance.*
- *Some of the activities include: Development of accreditation programs for day care programs; creation of professional development programs and incentives for child care staff, including the Infant–Toddler certificate; provision of technical training; coordination with Universal Pre-Kindergarten, and training for licensing staff regarding developmentally appropriate practice. We have 12 videoconferences each year to support child care providers. Topics may focus on program development, principles of childhood developments, meeting the needs of children in the program or other relevant subjects.*
 - *Everyday Science: Experiments and Experiences*
 - *Ezra Jack Keats: An Author Study*
 - *Songs, Laughter and the Written Word: How Children Learn to Read*

- *Sing It Again: Interacting with Children Through Music*
- *Ooey, Goopy and Fun: How to Make Your Program Child Centered*
- *OCFS completed a draft (in-process) document concerning early literacy guidelines. The draft plan is designed to provide guidance to teachers, families, and administrators on what most children should know and be progressing towards as they enter kindergarten. The guidelines are not a curriculum outline for early childhood educators, but are a framework for communicating a shared set of expectations for preschool children among professionals in the field of literacy. The guidelines are not intended to be used by educators to determine whether or not a child is “ready” to enter kindergarten. Instead, the guidelines will be utilized to guide the literacy development of children through effective instructional strategies and appropriate assessments within classroom settings.*

Activities to Promote Inclusive Child Care

- *New York State is integrating the concept of inclusion into all aspects of its activities. OCFS promotes inclusive child care programs through health and safety grants, including grants which are available to centers and school age child care programs to promote compliance with the Americans with Disabilities Act.*
- *Additionally, many of the 12 videoconferences sponsored annually for child care providers promote developmentally appropriate care. They address how providers can meet the need of children in their program who have physical or emotional challenges in a variety of topics, including:*
 - *Talking with Families about Difficult Topics*
 - *Managing Difficult Behaviors*

Healthy Child Care America and Other Health Activities Including Those Designed to Promote the Social and Emotional Development of Children

- *OCFS has completed and distributed its policy statement regarding child care for children with special needs. A higher reimbursement rate is available for care provided to children with special needs when child care providers are providing appropriate additional child care services related to the children’s special needs, and/or the providers are incurring additional costs as the result of caring for such children.*
- *OCFS continues to collaborate with the Department of Health to implement the shared New York State goals for Healthy Child Care America. The two agencies have developed ongoing consultative strategies on such areas as health care consultants, SIDS prevention and others.*
- *The majority of the educational videoconferences sponsored by OCFS each month address how child care providers can promote the social and emotional development of children. Each videoconference begins with a 5 – 10 minute segment titled “Safety First” which focuses on current safety issues, health alerts and product recalls. Topics*

in 2006 included car seat safety, water safety, heat and young children, childhood obesity, shaken baby syndrome and the prevention of lead poisoning.

- *The Office of Children and Family Services adopted new regulations concerning administration of medication in day care programs. As of January 31, 2005, child care providers who opt to administer medications to children in their care must complete the following regulatory requirements:*
 - *Select a health care consultant;*
 - *Become authorized to administer medication by successfully completing an OCFS or OCFS approved administration of medication training course(MAT)*, a CPR course, and a First Aid course;*
 - *Prepare a health care plan that meets the needs of the children attending the day care program;*
 - *Have the health care plan reviewed and approved by a health care consultant; and*
 - *Submit the health care plan to the appropriate OCFS Regional Office for OCFS approval.*

**MAT training is an eight-hour competency based course developed by OCFS in collaboration with the State Department of Health, State Education Department, and professional associations representing health care professions, as well as child care professionals and parents themselves. The MAT course certifies day care providers to administer medications in a day care setting for seven routes: oral, topical, inhaled, medicated patches, eye, ear, and emergency injection of epinephrine using an auto-injector device. Recertification is required every three years.*

As of December 2006, over 19,000 child day care employees have been trained to administer medications in child day care programs.

Other Quality Activities that Increase Parental Choice and Improve the Quality and Availability of Child Care

- *OCFS allows districts to establish unique local standards in their Child and Family Services Plans to improve the quality of child care to meet their identified needs. For example, in New York City, the Administration for Children's Services (ACS) has contracted with community-based organizations to work with day care providers to enhance their abilities to provide safer, healthier and higher quality family day care.*
- *OCFS has contracted with legally-exempt caregiver enrollment agencies to enroll legally-exempt child care providers who care for children receiving a child care subsidy. The enrollment agencies conduct sex offender background checks and conduct annual inspections of 20 percent of legally-exempt family child care providers that do not participate in the federal Child and Adult Care Food Program. They also review the Child Care Facility System to determine if the provider has a history of having a day care license or registration denied, suspended or revoked.*

- *Local social services districts check each legally-exempt family and in-home child care provider against its child welfare database to determine if the provider has had his/her parental rights terminated or had a child removed from his/her care.*
- *As an incentive to promote the quality of care provided in informal subsidized child care settings, the market rates provide a higher reimbursement rate for those informal child care providers who attend at least ten hours of training annually and improve their training and skills.*

5.2 Good Start, Grow Smart Planning and Development

This section of the Plan relates to the President's *Good Start, Grow Smart* initiative which is envisioned as a Federal-State partnership that creates linkages between CCDF, including funds set-aside for quality, and State public and private efforts to promote early learning. In this section, each Lead Agency is asked to assess its State's progress toward developing voluntary guidelines on language, literacy, pre-reading, and early math concepts and a plan for the education and training of child care providers. The third component of the President's *Good Start, Grow Smart* initiative, planning for coordination across at least four early childhood programs and funding streams, was addressed in Section 2.1.2.

5.2.1 Status of Voluntary Early Learning Guidelines. Indicate which of the following best describes the current status of the State's efforts to develop, implement, or revise research-based early learning guidelines (content standards) for three to five year-olds. **NOTE: Check only one box to best describe the status of your State's three-to-five-year-old guidelines.**

- Planning.** The State is planning for the development of early learning guidelines. Expected date of plan completion: _____
- Developing.** The State is in the process of developing early learning guidelines. Expected date of completion: March, 2008
- Developed.** The State has approved the early learning guidelines, but has not yet developed or initiated an implementation plan. The early learning guidelines are included as **Attachment 5.2.1.**
- Implementing.** In addition to having developed early learning guidelines, the State has embarked on implementation efforts which may include dissemination, training or embedding guidelines in the professional development system. The guidelines are included as **Attachment 5.2.1.**
- Revising.** The State has previously developed early learning guidelines and is now revising those guidelines. The guidelines are included as **Attachment 5.2.1.**
- Other (describe):**

Describe the progress made by the State in developing, implementing, or revising early learning guidelines for early learning since the date of submission of the 2006-2007 State Plan. Efforts to develop early learning guidelines for children other than those addressed in *Good Start, Grow Smart* (i.e., children birth to three or older than five) may be described here.

OCFS continues to work with its sister agencies (NYSDOH, SED) to revise its draft (in-process) document concerning early literacy guidelines. The draft plan is designed to provide guidance to teachers, families, and administrators on what most children should know and be progressing towards as they enter kindergarten. The guidelines are not a curriculum outline for early childhood educators, but are a framework for communicating a shared set of expectations for preschool children among professionals in the field of literacy. The guidelines are not intended to be used by educators to determine whether or not a child is “ready” to enter kindergarten. Instead, the guidelines will be utilized to guide the literacy development of children through effective instructional strategies and appropriate assessments within classroom settings.

If developed, are the guidelines aligned with K-12 content standards or other standards (e.g., Head Start Child Outcomes, State Performance Standards)?

Yes. If yes, **name standards**.

No.

If developed, are the guidelines aligned with early childhood curricula?

Yes. If yes, **describe**.

No.

Have guidelines been developed for children in the following age groups (check if guidelines have been developed):

Birth to three. Guidelines are included as Attachment 5.2.1

Birth to five. Guidelines are included as Attachment 5.2.1

Five years or older. Guidelines are included as Attachment 5.2.1

If any of your guidelines are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan):

5.2.2 **Domains of Voluntary Early Learning Guidelines.** Do the guidelines for three-to-five-year-olds address language, literacy, pre-reading, and early math concepts?

Yes.

No.

Do the guidelines for children three-to-five-year-olds address domains not specifically included in *Good Start, Grow Smart*, such as social/emotional, cognitive, physical, health, creative arts, or other domains?

Yes. If yes, **describe**.

No.

OCFS recognizes that in order for children to fully develop literacy skills, attention and focus in the other developmental domains is imperative. If all of the developmental domains are not attended to, then any type of learning and further development is hindered. Each of the following developmental domains is addressed, in addition to literacy skills, to provide each child with a strong physical, emotional, social, and cognitive foundation for later academic success:

Gross Motor: *Refers to the large muscles in the arms, legs, and torso. Gross motor skills include: running, walking, jumping, dancing, etc.*

Fine Motor: *Refers to the small muscles in the hands and fingers. Fine motor skills include: picking up blocks and/or other manipulatives, cutting with scissors, tying shoes, etc.*

Cognitive Development: *Refers to the processes of thinking, understanding, and problem solving. As children grow, not only do they pick up more knowledge through their experiences, they actually change the way that they think. Cognitive development is facilitated through allowing children to problem solve on their own and providing them with toys and play time that encourages thinking and problem solving experiences.*

Linguistic Development: *Refers to language and communication. Language is a system of symbols that individuals use to communicate. Language includes speaking and listening, as well as reading and writing. Language includes both expressive and receptive language. Expressive language refers to how a child is able to communicate, through speaking, his thoughts, feelings, needs, and wants. Receptive language refers to how a child understands other people's expressive language and what is being asked of them.*

Social Development: *Refers to the development of relationships. Relationships first develop with parents and siblings and then with other adults and peers. It also refers to the child's growing understanding of societal norms and attitudes.*

Emotional Development: *Refers to the emergence of primary and secondary emotions. Primary emotions refer to emotions such as anger and happiness. Secondary emotions, which are more complex, refer to emotions such as jealousy and empathy. Emotional development also includes the way that the child feels about him/ herself and the people around him/ her.*

The New York State Education Department, in a paper addressed to the Board of Regents, identifies a comparable list (to the one above) of developmental domains or performance indicators as measures of school readiness. The State Education Department's paper also recognizes that kindergarten is no longer the entry point for many children's formal education. Because demographics show that the majority of children are cared for in settings outside their homes, the Education Department's stated goal is to "take on a more active role in partnering with state networks to disseminate information on access to quality early education to all parents of children birth to age 3." OCFS is partnering with the Education Department to both facilitate this link and to formalize the proposed guidelines for early literacy activities and school readiness.

The New York State Department of Health is also currently working on an initiative called The Early Childhood Comprehensive Systems (ECCS) Planning Initiative (summarized previously in Section 2.1.2): One of its proposed goals is that all children have access to high quality early care and education that addresses all developmental domains and prepares children for success in school. OCFS recognizes this goal as the broad umbrella under which all New York State agencies will construct an early literacy plan for state-wide rollout.

This year, the State Child Care Administrator and the Head Start Collaboration Project Director have partnered in the development of a program to address the training and literacy needs of early care and education providers with low literacy skills. While New York State has some of the highest regulatory standards in the nation for people providing early care and education, many people working as classroom assistants and family child care providers lack the literacy skills needed to provide quality services. Numerous training programs exist to help providers meet licensing standards. However, providers with low literacy skills cannot fully benefit from these trainings if they are unable to read and communicate effectively. More importantly, they are less able to support the development of literacy and language skills in children.

To address the needs of these providers, the Head Start Collaboration Project, the State Child Care Administrator, SUNY Research Foundation's Strategic Training Group, and Literacy New York (formerly Literacy Volunteers of New York State) have developed a program that uses existing early care and education training curricula as the context to provide adult literacy instruction. The training is provided in a multiple day format directed at existing trainers of early care and education programs. This program offers participants an opportunity to learn more about the needs of people with low literacy and how they can use existing training materials to meet those needs. Two sessions of the training were provided this year to child care

resource and referral agency trainers and to trainers working in family child care networks in New York City.

Given the investment of all three departments (Education Department, Department of Health and OCFS) in early learning guidelines and school readiness, OCFS plans, as its next step, the interagency discussion of work strategies and collaboration between the three identified departments.

5.2.3 Implementation of Voluntary Early Learning Guidelines. Indicate the strategies the State used or expects to use in **implementing its early learning guidelines.**

Check all that apply:

- Disseminating materials to practitioners and families
- Developing training curricula
- Partnering with other training entities to deliver training
- Aligning early learning guidelines with licensing, core competencies, and/or quality rating systems
- Other. Please describe: incentives for providers who complete training and maintain a child care setting that aligns with guidelines.

| Indicate the stakeholders that are (or expect to be) actively supporting the implementation of early learning guidelines. | Indicate the programs that mandate or require the use of early learning guidelines. |
|--|--|
| | <input type="checkbox"/> Publicly funded (or subsidized) child care |
| <input checked="" type="checkbox"/> Head Start | <input type="checkbox"/> Head Start |
| <input checked="" type="checkbox"/> Education/Public pre-k | <input type="checkbox"/> Education/Public pre-k |
| <input checked="" type="checkbox"/> Early Intervention | <input type="checkbox"/> Early Intervention |
| <input checked="" type="checkbox"/> Child Care Resource and Referral | <input type="checkbox"/> Child Care Resource and Referral |
| <input checked="" type="checkbox"/> Higher Education | <input type="checkbox"/> Higher Education |
| <input type="checkbox"/> Parent Associations | <input type="checkbox"/> Parent Associations |
| <input type="checkbox"/> Other. Please describe: | <input type="checkbox"/> Other. Please describe: |

How are (or will) cultural, linguistic and individual variations (be) acknowledged in implementation?

OCFS recognizes the cultural, linguistic and individual variations of the children in child care settings. OCFS defines culture as a term that encompasses economic, ethnic, racial, social structural and other dimensions that constitute a collection of influences on children’s early learning opportunities. According to the National Research Council the recent growth in the US

population is almost exclusively the result of growth in the Latino community and Asian community, - two groups that are themselves extremely diverse. There is an increase of children entering school with little or no English proficiency and whose cultural and educational backgrounds may not correspond to the norms and expectations they encounter when they start schooling. With this in mind, OCFS will develop a plan of implementation that recognizes diversity as an opportunity for all students to acquire an expanded repertoire of languages, skills and capacities to function effectively as citizens in a multicultural society.

How are (or will) the diversity of child care settings (be) acknowledged in implementation?

OCFS respects the dignity, worth, and uniqueness of each individual child; OCFS will develop an implementation plan that will recognize that children are best understood in the context of family, culture and society.

Materials developed to support implementation of the guidelines are included as **Attachment 5.2.3**. If these are available on the web, provide the appropriate Web site address:

- 5.2.4 **Assessment of Voluntary Early Learning Guidelines.** As applicable, **describe** the State's plan for:
- (a) Validating the content of the early learning guidelines
 - (b) Assessing the effectiveness and/or implementation of the guidelines
 - (c) Assessing the progress of children using measures aligned with the guidelines
 - (d) Aligning the guidelines with accountability initiatives

At this juncture in the process, OCFS has not yet developed an assessment process. In creating the assessment process, OCFS will consider the Supports for Early Literacy Assessment (SELA) developed by New York University, Steinhardt School of Education, Child and Family Policy Center which focuses assessment on the child care setting. Young children's progress will be considered based on the assessment guidelines developed by OCFS. OCFS will work together with partners to determine which assessment tools will be most beneficial. Assessment results will be utilized to revamp and strengthen New York State's early learning guidelines and provide child care programs with information that will allow them to improve literacy development for young children.

Written reports of these efforts are included as **Attachment 5.2.4**. If these are available on the web, provide the appropriate Web site address (reports must still be attached to Plan):

- 5.2.5 **State Plans for Professional Development.** **Indicate** which of the following best describes the current status of the State's efforts to develop a professional development plan for early childhood providers that includes all the primary

sectors: child care, Head Start, and public education. **NOTE: Check ONLY ONE box to best describe the status of your State's professional development plan.**

- Planning.** Indicate whether steps are under way to develop a plan. If so, describe the entities involved in the planning process, time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
- Developing.** A plan is being drafted. The draft or planning documents are included as **Attachment 5.2.5.**
- Developed.** A plan has been written but has not yet been implemented. The plan is included as **Attachment 5.2.5.**
- Implementing.** A plan has been written and is now in the process of being implemented, or has been implemented. The plan is included as **Attachment 5.2.5.**
- Revising.** The State previously developed a professional development plan and is now revising that plan, or has revised it since submitting the 06-07 State Plan. The revisions or the revised plan are included as **Attachment 5.2.5.**
- Other (describe):*** see below

Describe the progress made by the State in planning, developing, implementing, or revising the professional development plan since the date of submission of the 2006-2007 State Plan.

Family Child Care Credential - Professional development is a crucial component in all of New York State's quality care initiatives and OCFS remains a leader of states in the field of provider development. Consistent with its support of the credentialing process and its proven benefits to children in care, OCFS has begun collaboration with the NYS Association for the Education of Young Children in developing a Family Child Care Credential for providers in NYS. Experts in the Early Care & Education field are in the process of developing a Family Child Care Credential for providers in NYS. Its purpose will be to increase the professionalism of the family child care field by giving individuals recognition for the expertise required to care for all children regardless of modality and particularly in family child care.

The credential will be competency based with the requirement of a criteria application submission. A broad assessment will be developed to measure competencies using a variety of assessment tools. This project includes a marketing component to insure that family child care providers and the larger community are aware of its existence and importance in providing quality care for New York's children.

Child Care Facility System (CCFS)

OCFS is currently entering training data into an electronic licensing application named the Child Care Facility System (CCFS). CCFS records the following provider training information:

the title of the training program, the topic covered, the sponsoring agency, the type of training (computer based, classroom etc.) and the date and hours of training received. One of the important advantages of having this computer based recording system is that data can be reviewed and used for program analysis. Examples of the type of information OCFS can review is: what is the scope of the training programs being offered across the state, what topics may be less available, what may be the training deficiencies, and are specific regulatory violations associated with training deficiencies. The CCFS system puts OCFS in a much better position to target our resources and training efforts to the population of providers that truly needs them.

30 Hour Training Requirement

As part of the Quality Child Care and Protection Act, NYS day care regulations require each regulated provider to complete 30 hours of training every two years.

Health and Safety Training

All prospective family and group family day care providers are required to attend 15 hours of health and safety training and to demonstrate competence in safety, supervision, SIDS, child abuse and maltreatment, infection control, health and food and water safety before they may obtain a license. For 2007, this requirement continues its additional special infant issues component. Participants can use EIP funding to be reimbursed for this program if they complete the registration or licensing process successfully.

Video Conference Training

OCFS sponsors teleconferences on a monthly basis, which bring recognized child care experts to child care providers at 96 sites across New York State. Providers may receive credit for their participation in the teleconferences towards their required 30 hours of training. Averages of 4,000 providers participate in each session.

The NYS Infant/Toddler Certificate of Completion

The Infant/Toddler Certificate program for child care professionals consists of 12-credits of college coursework offered at community colleges in three competency areas: Infant and Toddler Development, Environment and Its Relationship to Learning and Development, and Family Communication and Professional Collaboration. Participants can use EIP funding for this program.

The NYS School-Age Credential (SAC)

The SAC is designed to support staff working in school age child care programs. Courses are offered at 11 locations around the state. The candidates complete 120 hours of classroom training for school-age providers in 14 functional areas, and also a resource file and portfolio. The candidates work closely with an advisor who mentors them through the process. A Local Assessment Team (LAT) consisting of the advisor, an “endorser” and a parent observe the candidate in the classroom. Once classroom work is completed, the candidate is evaluated by the LAT to determine if he/she is competent in all 14 functional areas. As a result of achieving the credential, candidates are eligible for higher level jobs in the field. Participants can use EIP funding for this program credential.

The NYS Children’s Program Administrator’s Credential

The Administrator’s Credential is a six-course, 18–credit program for child care administrators or those seeking to be administrators. The coursework consists of the following three credit courses that have an additional one credit hour practicum component: Administering Children’s Programs, Financial Planning and Management of Children’s Programs, and Operations Management of Children’s Programs. Participants can use EIP funding for this program.

The Educational Incentive Program (EIP)

This scholarship program is available for staff working in regulated programs. The EIP can be used to cover the cost of credit bearing college courses taken toward achieving credentials such as the NYS SAC, the Administrator’s Credential, CDA, the Infant-Toddler Certificate of Completion, non-credit college courses, conferences and workshops. Each provider is eligible for up to \$2000 each year according to income guidelines.

Additionally, New York State has provided support to the contracted Child Care Resource and Referral agencies to enhance their abilities to support child care providers. These opportunities include conferences, sponsored by New York State, for over 190 CCRR staff on topics including: teaching regulatory understanding and compliance, special considerations for infants and toddlers in family daycare, providing effective technical assistance to providers, rural and urban issues for providing effective resource and referral services, parent outreach and support, communication skills, and consumer education.

Medication Administration Training (MAT)

OCFS adopted regulations in 2005 requiring all providers who opt to administer medication to children to attend an OCFS approved Medication Administration Training (MAT). MAT training is an eight-hour competency based course developed by the OCFAS in collaboration with the State Health Department, State Education Department, and professional associations representing health care professions as well as child care professionals and parents themselves. The MAT course certifies day care providers to administer medications in a day care setting for seven routes: oral, topical, inhaled, medicated patches, eye, ear, and emergency injection of epinephrine using an auto-injector device. A refresher course and/or testing is required every three years.

If your State has developed a plan for professional development, does the plan include (**Check EITHER yes or no for each item**):

| | Yes | No |
|---|--------------------------|--------------------------|
| Specific goals or desired outcomes | <input type="checkbox"/> | <input type="checkbox"/> |
| A link to Early Learning Guidelines | <input type="checkbox"/> | <input type="checkbox"/> |
| Continuum of training and education to form a career path | <input type="checkbox"/> | <input type="checkbox"/> |
| Articulation from one type of training to the next | <input type="checkbox"/> | <input type="checkbox"/> |
| Quality assurance through approval of trainers | <input type="checkbox"/> | <input type="checkbox"/> |
| Quality assurance through approval of training content | <input type="checkbox"/> | <input type="checkbox"/> |

STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/07 – 9/30/09

| | | |
|--|--------------------------|--------------------------|
| A system to track practitioners' training | <input type="checkbox"/> | <input type="checkbox"/> |
| Assessment or evaluation of training effectiveness | <input type="checkbox"/> | <input type="checkbox"/> |
| State Credentials – Please state for which roles (e.g. infant and toddler credential, directors' credential, etc.) | <input type="checkbox"/> | <input type="checkbox"/> |
| Specialized strategies to reach family, friend and neighbor caregivers | <input type="checkbox"/> | <input type="checkbox"/> |

For each **Yes** response, **reference** the page(s) in the plan and briefly **describe**.

For each **No** response, **indicate** any plans the Lead Agency has to incorporate these components.

Are the professional development opportunities described in the plan available:

Note: Check either yes or no for each item):

| | Yes | No |
|--------------------------------------|--------------------------|--------------------------|
| Statewide | <input type="checkbox"/> | <input type="checkbox"/> |
| To Center-based Child Care Providers | <input type="checkbox"/> | <input type="checkbox"/> |
| To Group Home Providers | <input type="checkbox"/> | <input type="checkbox"/> |
| To Family Home Providers | <input type="checkbox"/> | <input type="checkbox"/> |
| To In-Home Providers | <input type="checkbox"/> | <input type="checkbox"/> |
| Other (describe): | <input type="checkbox"/> | <input type="checkbox"/> |

Describe how the plan addresses early language, literacy, pre-reading, and early math concepts development.

New York State OCFS meets quarterly with the Day Care Training Advisory Committee to identify emerging training needs and develop new training strategies to assess and evaluate training initiatives and the appropriateness of training modalities as well as to address issues of the special needs population. The advisory council has over 100 members statewide. It is coordinated by the State University of New York and composed of higher education representatives, child care provider organizations, community based training organizations, and CCRRs. With the assistance of the Training Advisory Council, OCFS will continue to offer initiatives that enhance early language, literacy, pre-reading and numeracy.

Are program or provider-level incentives offered to encourage provider training and education?

Yes. **Describe**, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts.

No. If no, **describe** any plans to offer incentives to encourage provider training and education, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts?

Yes, New York State offers several incentives to encourage provider training and education. We recognize that good quality child care is related to enhanced language, literacy, pre-reading and numeracy skill development in children. In order to improve the quality of child care across New York State, we have created a number of programs to encourage child care providers to develop their own skills, and consider child care as a profession. Our initiatives include formal recognition of achievement thorough credentials as well as financial incentives.

The New York State School Age Credential (described previously in 5.2.5)

The Infant/Toddler Certificate or the Child Development Associate (CDA) credential for infant/toddler teachers (described previously in 5.2.5)

Accreditation of Day Care Centers

Grants are available to encourage day care centers serving toddlers and infants to bring their programs up to accreditation standards. Awards cover the actual accreditation fees that programs incur during the accreditation process. OCFS will continue to provide incentives for accreditation.

The Educational Incentive Program (EIP)

This scholarship program is available for staff working in regulated programs. The EIP can be used to cover the cost of credit bearing college courses taken toward achieving credentials such as the NYS SAC, the Administrator's Credential, CDA, the Infant-Toddler Certificate of Completion, non-credit college courses, conferences and workshops. Each provider is eligible for up to \$2000 each year according to income guidelines.

As applicable, does the State assess the effectiveness of its professional development plan, including the achievement of any specified goals or desired outcomes?

Yes. **Describe** how the professional development plan's effectiveness/goal is assessed.

No. **Describe** any plans to include assessments of the professional development plan's effectiveness/goal achievement.

- *Over 7500 child care providers will continue their professional development through scholarships for credit and non-credit bearing courses from the Educational Incentive Program.*
- *An estimated 80,000 providers will participate in video conference training featuring best practice in early childhood.*
- *An estimated 100 candidates will successfully complete the School-Age Care Credential.*
- *An additional four host agencies will provide the SAC Credential expanding statewide coverage.*
- *The Education Incentive Program will continue to provide scholarships for child care providers.*
- *Applicants who wish to be family or group family providers will participate in the 15 hour health and safety training and will pass the competencies, prior to the issuance of license or registration by OCFS.*
- *A health and safety training curriculum will be developed for child care centers.*
- *The Infant -Toddler Certificate of completion will continue to be available and will be supported through the EIP program.*
- *The NYS Program Administrators Credential will continue to be available and supported through the EIP program.*
- *The new regional Infant Toddler Specialists will provide technical assistance and training to providers who care for infants and toddlers in their region.*

Does the State assess the effectiveness of specific professional development initiatives or components?

Yes. **Describe** how specific professional development initiatives or components' effectiveness is assessed.

No. **Describe** any plans to include assessments of specific professional development initiatives or components' effectiveness.

The State will assess the effectiveness of its efforts through the following:

- *OCFS will evaluate the usefulness of video conferences through review of training evaluations which are completed by participants at each video conference.*
- *SAC Credential candidates will demonstrate competency in each of the 14 functional areas in order to receive the SAC Credential.*
- *Health and safety trainees will be able to show competency in each of the seven competency areas before they may apply for a license.*
- *The Day Care Training Advisory Committee will continue to convene upstate and downstate quarterly to assess current training effectiveness.*
- *CCRR training effectiveness will be reported quarterly by the training provider*

As applicable, does (or will) the State use assessment to help shape or revise its professional development plan?

Yes. **Describe** how assessment informs the professional development plan.

No. **Describe** any plans to include assessment to inform the professional development plan.

The State will use assessment to help shape professional development efforts and training/education for child care providers as follows:

- *The School-Age Care Program Improvement workgroup will focus on expanding SAC Credential and other school-age training supports throughout the state and will assess training needs through focus groups.*
- *OCFS evaluates the video conferences through review of training evaluation surveys completed at each video conference.*
- *The Day Care Training Advisory Committee will continue to convene upstate and downstate quarterly to assess current and emerging training needs.*
- *OCFS completes an annual training needs assessment for Child Care Resource and Referral Programs.*

The Core Body of Knowledge Framework

For more than a decade NYS has been an integral partner in researching, developing and implementing the “Core Body of Knowledge”, a framework for child care providers to utilize in enhancing their professional development. National research demonstrates that the quality of young children's experiences in early child care settings is directly related to specific preparation in early childhood education obtained by the adults caring for and educating them.

This Core Body of Knowledge identifies the following purposes:

- *Identify the knowledge and behavioral expectations for all adults providing care and education for young children.*
- *Assist public and private sector agencies and associations in developing guidelines for staff qualifications and on going staff development.*
- *Facilitate agreements among agencies that provide professional development.*
- *Define terms that are clearly and consistently utilized when developing and communicating about professional development activities.*
- *Serve as the framework for decisions and practices carried out by those engaged in early childhood education settings.*

Competency levels and knowledge bases are established in six sections:

- *Child Growth and Development*
- *The Environment, Curriculum and Content*

- *Families In Society*
- *Child Assessment*
- *Communication*
- *Professionalism and Leadership*

Based on the framework and competencies provided through this core body of knowledge, NYS has developed three professional credentials that have been described in this section. They are the NYS Children's Program Administrator's Credential, The NYS School Age Credential and The NYS Infant Toddler Certificate.

PART 6

HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(Only the 50 States and the District of Columbia complete Part 6.)

{PRIVATE }The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements. The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: <http://nrc.uchsc.edu/>.

6.1 Health and Safety Requirements for Center-Based Providers (658E(c)(2)(F), §§98.41, §98.16(j))

6.1.1 Are all center-based providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation?

Yes. Answer 6.1.2, skip 6.1.3, and go to 6.2.

No. **Describe** which center-based providers are exempt from licensing under State law and answer 6.1.2 and 6.1.3.

***Legally-exempt group** child care means care provided by those caregivers other than caregivers of legally-exempt family child care and legally-exempt in-home child care, which meet all applicable State or local requirements for such child care programs. Caregivers of legally-exempt group child care include, but are not limited to:*

- *pre-kindergarten and nursery school programs for children three years of age or older, and programs for school-age children conducted during non-school hours, operated by public school districts or by private schools or academies which provide elementary or secondary education or both in accordance with the compulsory education requirements of the Education Law, provided that such pre-kindergarten, nursery school or school-age programs are located on the premises or campus where the elementary or secondary education is provided;*
- *nursery schools and programs for pre-school-aged children operated by non-profit agencies or organizations, or private proprietary agencies which provide services for three or less hours per day;*
- *summer day camps operated by non-profit agencies or organizations or private proprietary agencies in accordance with Subpart 7-2 of the State Sanitary Code;*
- *day care centers, family day care homes and other child care programs located on*

Federal property which are operated in compliance with the applicable Federal laws and regulations for such child care programs; and

- *Day care centers, family day care homes and other child care programs located on tribal property which are operated in compliance with the applicable tribal laws and regulations for such child care programs.*

6.1.2 Have center licensing requirements as relates to staff-child ratios, group size, or staff training been modified since approval of the last State Plan?
(§98.41(a)(2)&(3))

Yes, and the changes are as follows:

No.

6.1.3 For center-based care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- Health and safety training

*Child care subsidy regulations include health and safety requirements for legally-exempt family child care, legally-exempt in-home child care and legally-exempt group child care. These standards cover the three bulleted areas below as well as other important aspects of care. They are included in **Attachment 6**.*

- The prevention and control of infectious disease (including age-appropriate immunizations)

NY Public Health Law Sections 225-229 establish the State Sanitary Code which deals with matters affecting the security of life or health or the preservation and improvement of public health in New York State. With regard to the prevention and control of infectious diseases, the State Sanitary Code: specifies the communicable diseases which are dangerous to the public health; designates the communicable diseases which must be reported to the State or local departments of health; establishes procedures and responsibilities for the reporting of such diseases; and establishes protocols for the isolation, quarantine or other restrictions of persons with highly communicable diseases and the carriers of such diseases. To further assist in the prevention of such diseases, the hand washing and diapering protocols recommended by the Center for Disease Control are distributed to all caregivers who are exempt from State regulation.

Section 2164 of NY Public Health Law provides that persons in parental relationship to a child must have such child immunized against poliomyelitis, mumps, measles, diphtheria, rubella and haemophilus influenza type b (HIB), in accordance with a schedule approved by the NYSDOH. A schedule of immunizations is distributed to all child day care providers, including those who

are exempt from regulation. Section 2164 also provides that the parents or guardians who are unable to pay for the services of a private health practitioner must present their child(ren) to the county health department which will administer the needed immunizations at no charge. If a physician licensed to practice medicine in New York State certifies that an immunization may be detrimental to a child's health, the requirement is waived until it is determined that such immunization is no longer detrimental to the child's health. Further, parents or guardians who hold genuine and sincere religious beliefs which are contrary to the administration of immunizations cannot be compelled to have their child(ren) immunized.

- Building and physical premises safety

NY Executive Law Sections 370-383 (State Uniform Fire Prevention and Building code). This code is found in 9 NYCRR Exec., Subtitle S, Chapters I and II and 19 NYCRR State Parts 441-444.

- Health and safety training

Providers of legally-exempt child care must complete and submit enrollment forms in order to be paid for services provided to children who are receiving a child care subsidy. Upon receipt, review and verification of an enrollment form, the legally-exempt caregiver enrollment agency provides health and safety information. This includes information on: preventing child abuse and maltreatment; the NYSDOH recommended immunization schedule; building and physical premises safety checklist; emergency phone number list; exit drills; guidelines from the Center for Disease Control on hand washing and diaper changing; administration of medication, and where to get additional training and technical assistance.

6.2 Health and Safety Requirements for Group Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.2.1 Are all group home providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:

- Yes. Answer 6.2.2, skip 6.2.3, and go to 6.3.
- No. **Describe** which group home providers are exempt from licensing under State law and answer 6.2.2 and 6.2.3.

6.2.2 Have group home licensing requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

- Yes, and the changes are as follows:
- No.

6.2.3 For group home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

6.3 Health and Safety Requirements for Family Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.3.1 Are all family child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:

- Yes. Answer 6.3.2, skip 6.3.3, and go to 6.4.
- No. **Describe** which family child care providers are exempt from licensing under State law and answer 6.3.2 and 6.3.3.

Legally-exempt family child care means:

- *child care for one or two children provided outside the child's own home in a residence by a caregiver who is at least 18 years of age, or who is less than 18 years of age and meets the requirements for the employment of minors as set forth in Article 4 of the New York State Labor Law, and who is chosen and whose services are monitored by the child's caretaker; or*
- *child care for more than two children provided outside the child's own home in a residence by a caregiver who provides such care for less than three hours per day; or*
- *child care provided by a relative within the third degree of consanguinity of the parent(s) or step-parent(s) of the child or children except where such relative is a person legally responsible for, or the caretaker relative of, such child or children. Relatives within the third degree of consanguinity of the parent(s) or step-parent(s) of the child include: the grandparents of the child; the great-grandparents of the child; the great-great-grandparents of the child; the aunts and uncles of the child, including the spouses of the aunts and uncles; the great-aunts and great-uncles of the child, including the spouses of the great-aunts and great-uncles; the siblings of the child; and the first cousins of the*

child, including the spouses of the first cousins.

Legally-exempt in-home child care means:

- *Child care furnished in the child's own home by a caregiver who is chosen and monitored by the child's caretaker.*

6.3.2 Have family child care provider requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

Yes, and the changes are as follows:

The State now offers two rates for legally-exempt family and in-home providers, a standard rate and an enhanced rate. The enhanced rate is available to providers that can demonstrate they have completed ten or more hours of training in one or more of the following areas:

1. Principles of early childhood development;
2. Nutrition and health needs of infants and children;
3. Child day care program development;
4. Safety and security procedures;
5. Business record maintenance and management;
6. Child abuse and maltreatment identification and prevention; and
7. Statutes and regulations pertaining to child day care and child abuse and maltreatment.

Providers who cannot demonstrate they have received ten or more hours of training in the above topics would be eligible for the standard rate.

No.

6.3.3 For family care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

*Child care subsidy regulations include health and safety requirements for legally-exempt family child care, legally-exempt in-home child care and legally-exempt group child care. These standards cover the three bulleted areas below as well as other important aspects of care. They are included in **Attachment 6**.*

The prevention and control of infectious disease (including age-appropriate immunizations)

NY Public Health Law Sections 225-229 establish the State Sanitary Code which deals with matters affecting the security of life or health or the preservation and improvement of public health in New York State. With regard to the prevention and control of infectious diseases, the State Sanitary Code: specifies the communicable diseases which are dangerous to the public

health; designates the communicable diseases which must be reported to the State or local departments of health; establishes procedures and responsibilities for the reporting of such diseases; and establishes protocols for the isolation, quarantine or other restrictions of persons with highly communicable diseases and the carriers of such diseases. To further assist in the prevention of such diseases, the hand washing and diapering protocols recommended by the Center for Disease Control are distributed to all caregivers who are exempt from State regulation.

Section 2164 of NY Public Health Law provides that persons in parental relationship to a child must have such child immunized against poliomyelitis, mumps, measles, diphtheria, rubella and haemophilus influenza type b (HIB), in accordance with a schedule approved by the State Department of Health. A schedule of immunizations is distributed to all child day care providers, including those who are exempt from regulation. Section 2164 also provides that the parents or guardians who are unable to pay for the services of a private health practitioner must present their child(ren) to the county health department which will administer the needed immunizations at no charge. If a physician licensed to practice medicine in New York State certifies that an immunization may be detrimental to a child's health, the requirement is waived until it is determined that such immunization is no longer detrimental to the child's health. Further, parents or guardians who hold genuine and sincere religious beliefs which are contrary to the administration of immunizations cannot be compelled to have their child(ren) immunized.

- Building and physical premises safety

NY Executive Law Sections 370-383 (State Uniform Fire Prevention and Building code). This code is found in 9 NYCRR Exec., Subtitle S, Chapters I and II and 19 NYCRR State Parts 441-444.

- Health and safety training

Providers of legally-exempt child care must complete and submit enrollment forms in order to be paid for services provided to eligible children. Upon receipt, review and verification of an enrollment form, the legally-exempt caregiver enrollment agency provides health and safety information. This includes information on: preventing child abuse and maltreatment; NYSDOH recommended immunization schedule; building and physical premises safety checklist; emergency phone number list; exit drills; guidelines from the CDC on hand washing and diaper changing; administration of medication, and where to get additional training and technical assistance.

In order to promote the quality of care, OCFS established an enhanced rate of reimbursement for those legally-exempt family and in-home providers who complete ten hours of child care training. A one-day course in medication administration is available for legally-exempt providers.

6.4 Health and Safety Requirements for In-Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.4.1 Are all in-home child care providers paid with CCDF funds subject to licensing under the State law reflected in the NRCHSCC's compilation referenced above?

Yes. Answer 6.4.2, skip 6.4.3, and go to 6.5.

No. **Describe** which in-home child care providers are exempt from licensing under State law and answer 6.4.2 and 6.4.3.

6.4.2 Have in-home health and safety requirements that relate to staff-child ratios, group size, or training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

Yes, and the changes are as follows:

No.

6.4.3 For in-home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

*Child care subsidy regulations include health and safety requirements for legally-exempt family child care, legally-exempt in-home child care and legally-exempt group child care. These standards cover the three bulleted areas below as well as other important aspects of care. They are included in **Attachment 6**.*

The prevention and control of infectious disease (including age-appropriate immunizations)

NY Public Health Law Sections 225-229 establish the State Sanitary Code which deals with matters affecting the security of life or health or the preservation and improvement of public health in New York State. With regard to the prevention and control of infectious diseases, the State Sanitary Code: specifies the communicable diseases which are dangerous to the public health; designates the communicable diseases which must be reported to the State or local departments of health; establishes procedures and responsibilities for the reporting of such diseases; and establishes protocols for the isolation, quarantine or other restrictions of persons with highly communicable diseases and the carriers of such diseases. To further assist in the prevention of such diseases, the hand washing and diapering protocols recommended by the CDC are distributed to all caregivers who are exempt from State regulation.

Section 2164 of NY Public Health Law provides that persons in parental relationship to a child must have such child immunized against poliomyelitis, mumps, measles, diphtheria, rubella and haemophilus influenza type b (HIB), in accordance with a schedule approved by NYSDOH. A schedule of immunizations is distributed to all child day care providers, including those who are exempt from regulation. Section 2164 also provides that the parents or guardians who are

unable to pay for the services of a private health practitioner must present their child(ren) to the county health department which will administer the needed immunizations at no charge. If a physician licensed to practice medicine in New York State certifies that an immunization may be detrimental to a child's health, the requirement is waived until it is determined that such immunization is no longer detrimental to the child's health. Further, parents or guardians who hold genuine and sincere religious beliefs which are contrary to the administration of immunizations cannot be compelled to have their child(ren) immunized.

- Building and physical premises safety

NY Executive Law Sections 370-383 (State Uniform Fire Prevention and Building code). This code is found in 9 NYCRR Exec., Subtitle S, Chapters I and II and 19 NYCRR State Parts 441-444.

- Health and safety training

Providers of legally-exempt child care must complete and submit enrollment forms in order to be paid for services provided to eligible children. Upon receipt, review and verification of an enrollment form, the legally-exempt caregiver enrollment agency provides health and safety information. This includes information on: preventing child abuse and maltreatment; the NYSDOH recommended immunization schedule; building and physical premises safety checklist; emergency phone number list; exit drills; guidelines from the CDC on hand washing and diaper changing; administration of medication, and where to get additional training and technical assistance.

In order to promote the quality of care, OCFS established an enhanced rate of reimbursement for those legally-exempt family and in-home providers who complete ten hours of child care training. A one-day course in medication administration is available for legally-exempt providers.

6.5 Exemptions to Health and Safety Requirements

At Lead Agency option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care) may be exempted from health and safety requirements. (658P(4)(B), §98.41(a)(1)(ii)(A))
Indicate the Lead Agency's policy regarding these relative providers:

- All** relative providers are subject to the same requirements as described in sections 6.1 - 6.4 above, as appropriate; there are **no exemptions** for relatives or different requirements for them.

**Under NYS Education law, certain specified relatives are exempt from the regulations regarding administration of medication.*

- All** relative providers are **exempt** from all health and safety requirements.

- Some or all** relative providers are subject to different health and safety requirements from those described in sections 6.1 - 6.4. The following describes those requirements and identifies the relatives they apply to:

6.6 Enforcement of Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how health and safety requirements are effectively enforced:

- Are child care providers subject to routine unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?
 - Yes, and the following indicates the providers subject to routine unannounced visits and the frequency of those visits:
 - No.

For licensed and registered providers

Inspections can be unannounced, scheduled or as a result of a complaint. All school-age programs and family day care homes must be and will continue to be part of a full program inspection prior to initial registration. While registered programs will not have to be inspected before renewal, OCFS inspects 50% of registered programs annually. Child day care centers and group family day care homes will continue to be part of a full program inspection before they receive a license for the first time and when their licenses are due for renewal. The licenser then issues an inspection letter and when necessary works with the provider to develop a corrective action plan in a timely manner. In those cases where the provider fails or refuses to make the necessary corrections, the provider is generally referred for an enforcement action, as stated under 18 NYCRR, section 413.

For legally-exempt child care providers

Local districts may request approval from OCFS of additional standards for providers of legally-exempt child care. For example, unannounced visits to the home or facility have been approved by OCFS as an additional local standard.

OCFS regulations require legally-exempt caregiver enrollment agencies to conduct on-site inspections on an annual basis of at least 20% of the currently enrolled legally-exempt family child care providers that do not participate in the Child and Adult Care Food Program (CACFP). Providers who are participating in CACFP receive routine visits from the NYSDOH. Any concerns related to the provision of child care are shared with the local departments of social services. Enrollment agencies will work with the legally-exempt providers to assist them with meeting health and safety requirements.

- Are child care providers subject to background checks?
 - Yes, and the following types of providers are subject to background checks (indicate when such checks are conducted):
 - No.

For licensed and registered providers

As part of its commitment to safe, quality day care programs, New York State has enacted legislation to require criminal background checks for all applicants, current operators and assistants in day care centers, school-age child care programs, group family day care homes and family day care homes. Volunteers who may have regular and substantial contact with children, and persons 18 years of age and older who live in family and group family homes, also must be checked for criminal backgrounds.

OCFS allocates funds to cover the fingerprinting charges and subsequent safety assessment workload that has been generated as a result of the mandates. The fingerprinting requirement promotes child care as a professional service, employing responsible and safe caregivers and strengthens parental confidence in the safety and quality of care.

For legally-exempt providers

Providers of legally-exempt child care that are enrolled with the legally-exempt caregiver enrollment agencies are required to attest to the criminal history on behalf of themselves, all employees, assistants, volunteers and household members age 18 years or older. Local districts may request approval of additional standards for providers of legally-exempt child care.

OCFS requires the following background checks for caregivers of legally-exempt family and legally-exempt in-home child care that are caring for a child receiving a child care subsidy:

- 1. A check against the New York State Sex Offender Registry maintained by the New York State Division of Criminal Justice Services, via the Registry's toll free telephone number, to determine if the caregiver; any employee of the caregiver; any volunteer who has the potential for regular and substantial contact with children in care; and, for caregivers of informal family child care, each household member age 18 or older are listed on the New York State Sex Offender Registry for committing a sex offense.*
- 2. A local child welfare database check to determine if the caregiver has ever had his or her parental rights terminated or had a child removed from his or her care by court order under Article 10 of the Family Court Act.*
- 3. A check against the New York State Office of Children and Family Services Child Care Facility System to determine whether the caregiver has ever been denied a day care license or registration or had a day care license or registration suspended or revoked.*

- Does the State require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)

Yes, and the following **describes** the State’s reporting requirements and how such injuries are tracked (if applicable):

No.

The New York State Code of Rules and Regulations (NYCRR) Title 18 includes the requirement for providers to report to OCFS any fatality, serious injury or infectious illness of an enrolled child which occurred while the child was in care or being transported by the provider. Refer to 18 NYCRR sections: 414.15 (14), 416.15 (14), 417.15 (14), 418-1.15 (14), 418-2.15 (14).

- Other methods used to ensure that health and safety requirements are effectively enforced:

OCFS maintains a toll free telephone number, which parents, and other individuals may use to file complaints about child day care providers. Through the use of computer automation, calls are routed immediately to the appropriate Regional Office which has responsibility for licensing and registration in the area from which the call is being placed. The complaint line is staffed by OCFS personnel.

Whenever a complaint is taken, it is immediately registered on the Child Care Facility System (CCFS) complaint tracking system. As the complaint is investigated and a determination is made, this system is updated, thus providing a record of the status of all complaints that have been filed. Providers receive written notification of violations through letters generated from CCFS and once compliance is accomplished, a compliance letter is issued to the provider and the complaint is closed.

Local departments of social services and child care resource and referral agencies inform parents that information about the compliance history of any child day care provider can be obtained by contacting the appropriate Regional Office. OCFS makes information about complaints, as well as other investigations, available to parents upon request. In most cases, such requests are verbal. It is OCFS’s policy to respond verbally to verbal requests for information as clearly and completely as possible while maintaining appropriate confidentiality. The only time parents are instructed to submit written requests for information is when they want copies of documents.

The most common type of information requested verbally involves the compliance history and current status of a child day care provider; specifically whether there have been any complaints about the provider. When responding to such a request, OCFS assumes that the parent is interested in the compliance history and status of the provider in question, regardless of whether a violation came to light as the result of a complaint or some other inspection. Initially, OCFS staff will suggest to parents that, although more dated information may be available; it is usually

most helpful to look at a program's compliance history over the past two years. However, if the parents want information from a period prior to the last two years, that information will be shared.

Both regulated and legally-exempt child care providers are required to report any errors in the administration of medication to the OCFS regional office, or in NYC, the Department of Health and Mental Hygiene (DOHMH).

6.7 Exemptions from Immunization Requirements

The State assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the State public health agency. (§98.41(a)(1))

The State exempts the following children from immunization (check all that apply):

- Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
- Children who receive care in their own homes.
- Children whose parents object to immunization on religious grounds.
- Children whose medical condition contraindicates immunization.

PART 7
HEALTH AND SAFETY REQUIREMENTS IN THE TERRITORIES

(Only the Territories complete Part 7)

7.1 Health and Safety Requirements for Center-Based Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all center-based care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

7.2 Health and Safety Requirements for Group Home Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all group home care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

7.3 Health and Safety Requirements for Family Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all family child care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)

- Building and physical premises safety
- Health and safety training

7.4 Health and Safety Requirements for In-Home Providers in the Territories

(658E(c)(2)(F), §98.41(a), §98.16(j))

For all in-home care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

7.5 Exemptions to Territorial Health and Safety Requirements

At Lead Agency option, the following relatives may be exempted from health and safety requirements: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care). (658P(4)(B), §98.41(a)(1)(ii)(A)). Indicate the Lead Agency's policy regarding these relative providers:

- All** relative providers are subject to the same requirements as described in sections 7.1 - 7.4 above, as appropriate; there are **no exemptions** for relatives or different requirements for them.
- All** relative providers are **exempt** from all health and safety requirements.
- Some or all** relative providers are subject to **different** health and safety requirements from those described in sections 7.1 - 7.4 and the following describes those different requirements and the relatives they apply to:

7.6 Enforcement of Territorial Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how Territorial health and safety requirements are effectively enforced:

Are child care providers subject to routine unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?

Yes, and the following **indicates** the providers subject to routine unannounced visits and the frequency of those visits:

No.

Are child care providers subject to background checks?

Yes, and the following types of providers are subject to background checks (indicate when such checks are conducted):

No.

Does the Territory require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)

Yes, and the following **describes** the Territory's reporting requirements and how such injuries are tracked (if applicable):

No.

Other methods used to ensure that health and safety requirements are effectively enforced:

7.7 Exemptions from Territorial Immunization Requirements

The Territory assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the Territorial public health agency. (§98.41(a)(1))

The Territory exempts the following children from immunization (check all that apply):

- Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
- Children who receive care in their own homes.
- Children whose parents object to immunization on religious grounds.
- Children whose medical condition contraindicates immunization.

APPENDIX 1
PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures that:

- (1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- (2) The parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- (3) In cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) The child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- (5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- (6) That children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) That CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 109-149)

The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))
- (2) It maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))

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- (3) It will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices. (658E(c)(2)(D))
- (4) It has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (5) there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) Procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

APPENDIX 2 ELIGIBILITY AND PRIORITY TERMINOLOGY

For purposes of determining eligibility and priority for CCDF-funded child care services, lead agencies must **define** the following *italicized* terms. (658P, 658E(c)(3)(B))

- *attending* (a job training or educational program; include minimum hours if applicable) -
A person will be considered to be attending a program if the person is enrolled and is participating in a job training or education program for the period of time required for the particular client under the regulations of the New York State Office of Children and Family Services or the New York State Office of Temporary and Disability Assistance.
- *in loco parentis* -
A person standing in loco parentis means a guardian, caretaker relative or any other person with whom a child is living who has assumed responsibility for the day-to-day care and custody of the child.
- *job training and educational program* -
Job search activities; job skills training; job development and placement; vocational education training and job readiness activities when authorized for the particular client under the regulations of the New York State Office of Children and Family Services or the New York State Office of Temporary and Disability Assistance.

Educational activities include but are not limited to secondary and other education when authorized for the particular client under the regulations of the New York State Office of Children and Family Services or the New York State Office of Temporary and Disability Assistance. Secondary education and post secondary education are defined as including:

- (a) An approved program of vocational training or rehabilitation, which, for purposes of this section, includes enrollment in a two-year undergraduate college program with a specific vocational objective. Under this requirement child care services shall be authorized only for the following programs:
 - (i) those which have a specific occupational goal and are conducted by an institution licensed or approved by the State Education Department other than a college or university. Enrollment in more than two such consecutive training programs is not allowable;
 - (ii) those undergraduate or community college programs with a specific vocational sequence leading to an associate degree or certificate of completion within a determined time frame which shall not exceed 30 consecutive calendar months;
 - (iii) those pre-vocational skill training programs such as basic education and literacy training;

- (iv) those demonstration projects designed for vocational training or others as approved by the State Department of Labor;
 - (v) those programs leading to a high-school diploma or high-school equivalency diploma;
 - (vi) notwithstanding the potential of some vocational training programs as detailed above, to allow for the eventual attainment of a bachelor's degree or like certificate of completion for a four-year college program, this regulation does not permit the renewal of such vocational training program enrollment for any additional period.
- (b) A two year program other than one with a specific vocational sequence leading to an associates degree or certificate of completion, or a four year college or university program leading to a bachelor's degree provided:
- (i) the program is reasonably expected to improve the earning capacity of the caretaker;
 - (ii) the caretaker is and continues to participate in non-subsidized employment whereby the caretaker works at least 17 ½ hours per week and 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
 - (iii) the caretaker can demonstrate his or her ability to successfully complete the course of study.
- *physical or mental incapacity* (if the Lead Agency provides such services to children age 13 and older) –
Physical or mental incapacity of a child exists when the child is a special needs child as defined below.
 - *protective services* –
Families who need child care in order for their children to be protected include:
 - a) 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.
 - b) A family receiving public assistance or with income up to 200% 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.
- c) A family with an open child protective services case when it is determined on a case-by-case basis that such child care is needed to protect the child.
- *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.
 - *special needs child* –
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.
 - *very low income* –
Local social service districts define the income level, which 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 local districts have established "very low income" range from 100% -200% of the State Income Standard.
 - *working* (include minimum hours if applicable) –
An individual is considered working when, in accordance with the regulations of the Office of Children and Family Services or the New York State Office of Temporary and Disability Assistance as applicable, if he or she is engaged in work. For an individual receiving public assistance, engaged in work is defined by the district in its employment plan submitted to and approved by the New York State Office of Temporary and Disability Assistance. For an individual who is not receiving public assistance, engaged in work means that the individual:
 - a) 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; or
 - b) is 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.

- Additional terminology related to conditions of eligibility or priority established by the Lead Agency:

(a) Actively pursuing child support –

For all households in which a parent is continually absent, the custodial parent/caretaker seeking a child care subsidy through the Child Care and Development Fund must demonstrate that he or she has court-ordered child support in place, is actively pursuing a court order for child support, or he or she has good cause not to actively pursue child support.

(b) Seeking employment –

For an individual who is not receiving public assistance, seeking employment means making in-person job applications, going on job interviews, registering with the New York State Department of Labor's Division of Employment Services Office to obtain job listings, and participating in such other job seeking activities that are approved by the district. Districts can opt to pay for child care for low income families who are seeking employment by including such families in their Child and Family Services Plans.