

OMB Control No: 0970-0114

Expiration date: XXXX

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 200 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and completing the form.

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.



Child Care and Development Fund (CCDF) Plan

for

State/Territory _____

FFY 2019–2021

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

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

Table of Contents

Introduction and How to Approach Plan Development1

1 Define CCDF Leadership and Coordination With Relevant Systems3

1.1 CCDF Leadership 3

1.2 CCDF Policy Decision Authority 4

1.3 Consultation in the Development of the CCDF Plan..... 7

1.4 Coordination With Partners To Expand Accessibility and Continuity of Care 10

1.5 Optional Use of Combined Funds, CCDF Matching and Maintenance-of-Effort Funds 17

1.6 Public-Private Partnerships 21

1.7 Coordination With Local or Regional Child Care Resource and Referral Systems 22

1.8 Disaster Preparedness and Response Plan..... 23

2 Promote Family Engagement Through Outreach and Consumer Education 26

2.1 Outreach to Families With Limited English Proficiency and Persons With Disabilities 26

2.2 Parental Complaint Process..... 27

2.3 Consumer Education Website 29

2.4 National Website and Hotline 34

2.5 Additional Consumer and Provider Education 35

2.6 Procedures for Providing Information on Developmental Screenings..... 38

2.7 Consumer Statement for Parents Receiving CCDF Funds 39

3 Provide Stable Child Care Financial Assistance to Families.....40

3.1 Eligible Children and Families..... 41

3.2 Increasing Access for Vulnerable Children and Families 51

3.3 Protection for Working Families..... 54

3.4 Family Contribution to Payments..... 58

4 Ensure Equal Access to Child Care for Low-Income Children 62

4.1 Parental Choice in Relation to Certificates, Grants, or Contracts 62

4.2 Assessing Market Rates and Child Care Costs 65

4.3 Setting Payment Rates..... 68

4.4 Summary of Facts Used To Determine That Payment Rates Are Sufficient To Ensure Equal Access 70

4.5 Payment Practices and the Timeliness of Payments..... 71

4.6 Supply-Building Strategies To Meet the Needs of Certain Populations 73

5 Establish Standards and Monitoring Processes To Ensure the Health and Safety of Child Care Settings 75

5.1 Licensing Requirements..... 76

5.2 Health and Safety Standards and Requirements for CCDF Providers 77

5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers 97

5.4 Criminal Background Checks 103

6 Recruit and Retain a Qualified and Effective Child Care Workforce 114

6.1 Professional Development Framework 115

6.2 Training and Professional Development Requirements..... 119

6.3 Early Learning and Developmental Guidelines..... 123

7	Support Continuous Quality Improvement.....	125
7.1	Quality Activities Needs Assessment for Child Care Services.....	126
7.2	Use of Quality Funds.....	128
7.3	Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds	129
7.4	Quality Rating and Improvement System.....	134
7.5	Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers	136
7.6	Child Care Resource and Referral	140
7.7	Facilitating Compliance With State Standards	140
7.8	Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services	141
7.9	Accreditation Support	141
7.10	Program Standards	142
7.11	Other Quality Improvement Activities	142
8	Ensure Grantee Program Integrity and Accountability.....	142
8.1	Internal Controls and Accountability Measures To Help Ensure Program Integrity	143

Introduction and How to Approach Plan Development

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

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

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

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

CCDF Plan Submission

States and territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions on the ACF-118 site could be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities. (See <http://www.section508.gov/> for more information.)

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

1 Define CCDF Leadership and Coordination With Relevant Systems

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

1.1 CCDF Leadership

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

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

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

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Vermont Department for Children and Families

Street Address: 280 State Drive, NOB 1 North

City: Waterbury

State: Vermont

ZIP Code: 05671

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

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name:

Lead Agency Official Last Name:

Title:

Phone Number:

Email Address:

1.1.2 Who is the CCDF Administrator?

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the state's or territory's CCDF program. ACF will send programmatic communications, such as program announcements, program instructions, and data collection instructions, to the designated contact identified here. If there is more than

one designated contact with equal or shared responsibility for administering the CCDF program, please identify the Co-Administrator or the person with administrative responsibilities and include his or her contact information.

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Melissa

CCDF Administrator Last Name: Riegel-Garrett

Title of the CCDF Administrator: Policy Director

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

Street Address: 280 State Drive, NOB 1 North

City: Waterbury

State: Vermont

ZIP Code: 05671

Phone Number: 802-989-9865

Email Address: Melissa.riegel-garrett@vermont.gov

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

CCDF Co-Administrator First Name: Anne

CCDF Co-Administrator Last Name: Rada

Title of the CCDF Co-Administrator: Child Care Benefits Administrator

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

Street Address: 280 State Drive, NOB 1 North

City: Waterbury

State: Vermont

ZIP Code: 05671

Phone Number: 802-241-0822

Email Address: anne.rada@vermont.gov

Description of the role of the Co-Administrator: CCDF Plan maintenance

1.2 CCDF Policy Decision Authority

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

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

- All program rules and policies are set or established at the state or territory level.
- Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.
 1. Eligibility rules and policies (e.g., income limits) are set by the:
 - State or territory
 - Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
 - Other. Describe: .
 2. Sliding-fee scale is set by the:
 - State or territory
 - Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
 - Other. Describe: .
 3. Payment rates are set by the:
 - State or territory
 - Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
 - Other. Describe: .
 4. Other. List other program rules and policies and describe (e.g., quality rating and improvement systems [QRIS], payment practices):

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

- a) Who conducts eligibility determinations?
- CCDF Lead Agency
 - Temporary Assistance for Needy Families (TANF) agency
 - Other state or territory agency
 - Local government agencies, such as county welfare or social services departments
 - Child care resource and referral agencies
 - Community-based organizations
 - Other.

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

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

c) Who issues payments?

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

1.2.3 What processes will the Lead Agency use to monitor administrative and implementation responsibilities performed by agencies other than the Lead Agency as indicated above, such as through written agreements or monitoring and auditing processes (98.11(a)(3))? Describe those processes and any indicators or measures used to assess performance. Twelve Community Child Care Support Agencies (CCCSA) receive grants to provide child care financial assistance eligibility determination and referral services to families. Performance measures are written into the grant specifications and the Child Development Division monitors these measures for compliance through BFIS data extracts and on-site case file audits. Performance measures include:

Referral:

1. 80% of referral clients have been offered information about quality care indicators.
2. 80% of referral clients surveyed indicate that the service was helpful to them.
3. 75% of regulated child care programs with referral information updated in 3 months in BFIS.

Child Care Financial Assistance:

1. 10% maximum improper payment rating for Subrecipient, as determined by the CDD's annual case review process.
2. 75% of CCFAP applications are initiated within 7 business days of receipt.
3. 75% of CCFAP eligibility will be determined (or the applications closed) within 30 days of initial application.

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

related programs (98.15(a)(11)). Assure by describing how the Lead Agency makes child care information systems available to public agencies in other states to the extent practicable and appropriate. When requested division staff meet with other states to share the child care information system created for Vermont, Bright Futures Information System (BFIS). Multiple states have requested tours of the software; however, most would like customized options for their state, which is not easily accomplished with BFIS and states have opted out of receiving any additional information.

1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally-identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)). Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally-identifiable information. CDD grants and contracts related to CCDF assistance contain the following safeguards:

- Protected Health Information: The Grantee shall maintain the privacy and security of all individually identifiable health information acquired by or provided to it as a part of the performance of this grant. The Grantee shall follow federal and state law relating to privacy and security of individually identifiable health information as applicable, including the Health Insurance Portability and Accountability Act (HIPAA) and its federal regulations.
- Other Confidential Consumer Information: The Grantee agrees to comply with the requirements of AHS Rule No. 08-048 concerning access to information. The Grantee agrees to comply with any applicable Vermont State Statute, including but not limited to 12 VSA §1612 and any applicable Board of Health confidentiality regulations. The Grantee shall ensure that all its employees and subgrantees performing services under this agreement understand the sensitive nature of the information that they may have access to and sign an affirmation of understanding regarding the information's confidential and non-public nature.
- Social Security numbers: The Grantee agrees to comply with all applicable Vermont State Statutes to assure protection and security of personal information, including protection from identity theft as outlined in Title 9, Vermont Statutes Annotated, Ch. 62.

1.3 Consultation in the Development of the CCDF Plan

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

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

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

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

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

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

- a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments. The Child Development Division in the Department for Children and Families (DCF/CDD) state co-administrator met with leadership from the Vermont Association of Planning and Development Agencies (VAPDA) to obtain their input in the development of Vermont's CCDF Plan. The CCDF preprint was shared ahead of the meeting and the meeting included an orientation to the plan, the ongoing implementation work of the lead agency and gathering their input on the development of the plan. VAPDA is a non-profit corporation composed of the eleven Regional Planning Commissions of Vermont created and operating under the provisions of the Municipal and Regional Planning and Development Act. The mission of VAPDA is to increase the effectiveness of Vermont's Regional Planning Commissions, and public and private planning by the Municipalities, Regions and the State of Vermont. Vermont's Municipal and Regional Planning and Development Act includes Planning Goal 13: To ensure the availability of safe and affordable child care and to integrate child care issues into the planning process, including child care financing, infrastructure, business assistance for child care providers, and child care work force development.
- b) Describe how the Lead Agency consulted with the State Advisory Council. The Lead Agency's Deputy Commissioner represents DCF as the Commissioner's Designee on the Building Bright Futures Statewide Advisory Council (BBF SAC). She serves on the Executive Committee of the BBF SAC and is currently a Co-Chair. The SAC received a brief presentation of information about the CCDF Plan under development and designated their Early Learning and Development (ELD) Committee to consult on the plan development. In January of 2018, the CCDF co-administrator presented to the ELD on the information contained in the preprint, discussed the timeline and activities for developing the Plan and committee members provided input. In June of 2018, the ELD reviewed and provided final input to the final draft of the Plan (following the incorporation of feedback through the public hearing and comment period).
- c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. N/A
- d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan. The Early Childhood Interagency Collaboration Team (EICT) acts as an interagency coordinating body to address issues and programs of shared concern and to coordinate services and supports for children and families to advance positive educational outcomes from the earliest years. The CCDF State Plan has been a topic on their shared agenda. The EICT meets bi-monthly and includes representatives from the Governor's Office, the Agency of Education, the Agency of Human Services Secretary's Office, the Vermont Department of Health (maternal Child Health), the Department for Children and

Families (Child Development Division), and the Building Bright Futures Council (Executive Director).

- 1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)). *Reminder:* Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:
- a) Date(s) of notice of a public hearing. 5/2/2018 *Reminder:* Must be at least 20 calendar days prior to the date of the public hearing.
 - b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include specific website links if used to provide notice. The notice was posted on the division's blog (<http://dcf.vermont.gov/cdd-blog/child-care-and-development-fund-ccdf-state-plan-public-hearing>) which is a fully compliant website tool. In addition, an email announcement was sent to anyone that is interested in receiving information from the division, which includes advocacy groups, parents, legislators and the general public. An email announcement went to all regulated child care programs, center based, afterschool and family child care homes, and was sent to Child Care Financial Assistance eligibility agencies, referral agencies and parent child centers.
 - c) Date(s) of the public hearing(s). 5/23/2018 *Reminder:* Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan.
 - d) Hearing site(s) or method(s), including how geographic regions of the state or territory were addressed. Individuals could attend in person in Waterbury, VT, which is a central location easily accessible off the interstate. The meeting location was in a fully accessible meeting space. Also, individuals could attend the hearing using Skype for Business technology on their computers or call in to a phone number. In addition, comments could be submitted by SurveyMonkey.
 - e) How the content of the Plan was made available to the public in advance of the public hearing(s). The plan was made available to the public on 5/16/2018 on the division's website: <http://dcf.vermont.gov/cdd-blog/child-care-and-development-fund-ccdf-state-plan-public-hearing>, and was emailed out to the groups identified above.
 - f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan?
- 1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)).
- a) Provide the website link to where the plan, any plan amendments, and/or waivers are available. <http://dcf.vermont.gov/cdd/reports>
 - b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe the strategies below, including any relevant website links as examples.

- Working with advisory committees. Describe: [REDACTED]
- Working with child care resource and referral agencies. Describe: [REDACTED]
- Providing translation in other languages. Describe: [REDACTED]
- Sharing through social media (e.g., Twitter, Facebook, Instagram, email). Describe: [REDACTED]
- X Providing notification to stakeholders (e.g., provider groups, parent groups). Describe: Once the plan is approved provider groups, and others interested in division reports who opt into email are notified by email announcement.
- Other. Describe: [REDACTED]

1.4 Coordination With Partners To Expand Accessibility and Continuity of Care

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

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

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

Include in the descriptions the goals of this coordination, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school; enhancing and aligning the quality of services; linking comprehensive services to children in child care settings; or developing the supply of quality care for vulnerable populations. Check who you will coordinate with and describe all that apply.

- X (REQUIRED) Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns. Describe the coordination goals and process: The Vermont Association of Planning and Development Agencies (VAPDA). The mission of VAPDA is to increase the effectiveness of Vermont's Regional Planning Commissions, and public and private planning by the Municipalities, Regions and the State of Vermont. Vermont's Municipal and Regional Planning and Development Act includes Planning Goal 13: To ensure the availability of safe and affordable child care and to integrate child care issues into the planning process, including child care financing, infrastructure, business assistance for child care providers, and child care work force development. Regina Mahony, from the Chittenden County Regional Planning Commission is engaged with the lead agency and its partners in the development and

deployment of a Vermont Child care Supply & Demand Study. Work with VAPDA during the 2019-2021 plan cycle will include identifying and providing the support needed by regional and local planning commissions to effectively realize Planning Goal 13.

- X (REQUIRED) State Advisory Council on Early Childhood Education and Care (or similar coordinating body) (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe the coordination goals and process: Building Bright Futures (BBF) is Vermont's Governor designated State-wide Advisory Council (SAC) charged with creating an integrated system of services for Vermont children and families, from the prenatal period through age eight. BBF has a statewide network of Regional Councils that link community-based planning and program development with the SAC. BBF also has a committee structure to ensure full engagement of stakeholders in planning, development and implementation of statewide priorities. BBF's committee structure is a central strategy for plan coordination and implementation and to that end Lead Agency Staff serve and lead on each of these committees. In addition, we engage with BBF's Regional Council leadership regularly by participating in monthly coordination calls and attending their regional meetings as needed/requested. The goals of this coordination include: aligning the quality of services; promoting constructive partnerships across sectors; providing high quality full day-full year ELD programs that meet the needs of children and families; linking comprehensive services to children in ELD settings; ensuring continuity of care; smoothing transitions for children between programs and as they age into school; and building the capacity for high quality ELD opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in

- Does the Lead Agency have official representation and a decision-making role in the State Advisory Council (or similar coordinating body)?
- No
- X Yes

- (REQUIRED) Indian tribe(s) and/or tribal organization(s), at the option of individual tribes. Describe the coordination goals and process, including which tribe(s) was consulted:

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

- X (REQUIRED) State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool). Describe the coordination goals and process: DCF/CDD is responsible for IDEA Part C. We co-administer this program with the Agency of Education who is responsible for IDEA Section 619 under an Interagency Agreement that has been approved by the Federal Department of Education. In Vermont Early Intervention (IDEA Pat C) is embedded in Children's Integrated Services (CIS) within DCF/CDD. CIS is a unique model for integrating early childhood health, mental health,

evidence-based home visiting, family support, early intervention and specialized child care services for pregnant and postpartum women and children birth to age six. The model is designed to improve child and family outcomes for vulnerable populations by providing family-centric holistic services, effective service coordination, flexible funding to address gaps in services, prevention, early intervention, health promotion and accountability. DCF/CDD administers CIS overseeing services delivered to children and families by 12 regional CIS coalitions of local partners unified under a single fiscal agent in each region. CIS services and supports are delivered in homes and in early learning and development (ELD) settings. The goals of this coordination include: building the capacity for high quality ELD opportunities for children with high needs; linking comprehensive services to children in ELD settings; supporting families to build protective factors that improve their stability and capacity as children's first teachers; supporting the success of children with high needs in ELD settings, and smoothing transitions for children between programs and as they age into school.

- (REQUIRED) State/territory office/director for Head Start state collaboration. Describe the coordination goals and process: The Head Start State Collaboration Office (HSSCO) is in the Statewide Systems and Community Collaboration Unit in DCF/CDD. The HSSCO Director attends monthly meetings of the Head Start Association and acts as a liaison between Head Start grantees and state agencies, including DCF/CDD, AHS and the Agency of Education (AOE). Supporting partnerships between Head Start grantees and prekindergarten programs in public school and community settings and promoting Head Start/Early Head Start -Child Care Partnerships is a strategic priority for CDD. The goals of this coordination include: providing high quality full day-full year ELD programs that meet the needs of children and families; linking comprehensive services to children in ELD settings; ensuring continuity of care; smoothing transitions for children between programs and as they age into school; and building the capacity for high quality ELD opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in.
- (REQUIRED) State agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals and process: The Vermont Department for Health (VDH) is the State agency responsible for public health, including immunizations and, like CDD/DCF, is a part of the Agency of Human Services. Coordination happens at all levels: commissioners and deputy commissioners across AHS meet weekly with the Secretary and central office leadership; The deputy commissioner of the Maternal Child Health Division (MCH) of VDH meets monthly with the deputy commissioner of CDD; leadership and staff of CDD and MCH serve together on BBF Committees advancing strategies in Vermont's Early Childhood Action Plan and MCH staff attend the weekly systems and community collaboration unit team meetings. The goals of this coordination include: a holistic, cross-sector approach to early childhood development and learning; enhancing the health and safety of early learning and

development programs; aligning quality of services; coordinating services to families; and linking comprehensive services to children in ELD settings.

- (REQUIRED) State agency responsible for employment services/workforce development. Describe the coordination goals and process: The Vermont Department of Labor (DOL) is the State agency responsible for employment services/workforce development CDD works in partnership with DOL on childcare workforce training needs by meeting regularly with staff from DOL's Workforce Development Division. One area of collaboration is our shared support for the Vermont Child Care Apprenticeship Program, administered by Vermont Child Care Industry and Careers Council (VCCICC). Goals for this coordination are to ensure Vermont's child care workforce and child care employers have the supports they need to provide high quality services to working Vermonter's with young children and to build the supply of high quality ELD opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in.
- (REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK). Describe the coordination goals and process The Vermont Agency of Education is responsible for public education and co-administers prekindergarten (preK) with AHS/DCF/CDD. Leadership from AOE and AHS/DCF/CDD work together on the Early Childhood Coordination Team (EICT) to coordinate services and supports for children and families to advance positive educational outcomes from the earliest years. The EICT maintains a broad view of the collective work across the early childhood world to foster a collaborative and collective approach across state government to realizing the promise of every Vermont child. This broad view includes federal and state grants that support this vision, such as the Early Learning Challenge-Race to the Top grant and the Preschool Development and Expansion grant and early childhood programs with shared inter-agency responsibility, including, but not limited to: Publicly Funded PreK under Act 166: Monitoring, Fingerprinting, Program Evaluation; Head Start Collaboration; Vermont Early Learning Standards; Special Education IDEA Part C and 619; Kindergarten Readiness Survey and VT Step Ahead Recognition System (STARS). DCF/CDD and Agency of Education (AOE) co-administer publicly funded prekindergarten education to support a robust mixed delivery system that meets the needs children and families. Education Funds for publicly funded PreK are layered with Head Start funding, CCDF subsidies and parent paid tuition to increase affordable access to high quality early care and learning services in socio-economically diverse programs; While AOE employs the PreK coordinator, the PreK interagency-team meets bi-weekly to address implementation of universal PreK
The goals of coordination include: providing viable options for part day or full day services for families; ensuring continuity of care; smoothing transitions for children between programs and as they age into school, enhancing and aligning quality of services across settings, linking comprehensive services to children in early learning and development (ELD) settings and building the capacity for high quality ELD opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in.

- (REQUIRED) State/territory agency responsible for child care licensing. Describe the coordination goals and process: DCF/CDD is the entity responsible for child care licensing.
- (REQUIRED) State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination goals and process: The Agency of Education is responsible for the CACFP. DCF/CDD staff, 3Squares VT (SNAP) staff and AOE CACFP staff consult with Hunger Free Vermont and food security advocates to promote meals and nutrition services for children as part of early childhood and school age programs and to increase food security and healthy nutrition for young children and their families. Leadership from the Agency of Education (AOE) and DCF/CDD participate together on the BBF SAC. The BBF Subcommittee Early Childhood Wellness Committee oversees Result #1 of Vermont's Early Childhood Action Plan which includes a strategy to "Increase participation in existing food and nutrition programs and expand capacity of such programs." CDD is an active participant on that committee with AOE representatives. The goals of this coordination include: aligning and improving the quality of ELD services; ensuring children have access to nutritious meals and snacks in ELD settings, and linking comprehensive services to children in ELD settings
- (REQUIRED) McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons. Describe the coordination goals and process: The Vermont Agency of Education is the designated McKinney-Vento state coordinating agency for homeless education. Staff from the DCF/CDD and the HSSCOD, sits on an interagency group convened by the Agency of Human Services to address family homelessness with the AOE Coordinator of the McKinney-Vento Homeless Liaisons. The group coordinates and aligns efforts around addressing the needs of homeless children and families including early learning and development and education. The goals of this coordination include: providing access to high quality ELD programs for vulnerable populations; linking comprehensive, trauma informed services to ELD programs; and smoothing transitions for children between programs or as they age into school.
- (REQUIRED) State/territory agency responsible for employment services and workforce development. Describe the coordination goals and process: Duplicate question.
- (REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program. Describe the coordination goals and process: The Economic Services Division (ESD) is responsible for the Reach Up Program (Vermont's TANF) and is in DCF with CDD. Deputies in both divisions are on the DCF Leadership Team which meets weekly. The two divisions work closely together on budget and policy development and supporting families to achieve economic stability. They collaboratively implement a two-generation approach to mitigating the impacts of poverty on family well-being and child development. CDD staff provides training and technical assistance regarding child care to Reach Up workers. The goals of this coordination include: providing viable options for part day or full day services for families; ensuring continuity of care; smoothing transitions for

- children between programs and as they age into school, enhancing and aligning quality of services across settings; linking comprehensive services to children in early learning and development (ELD) settings ; coordinating services to families; and building protective factors in families to support and enhance their capacity as their children's first teachers.
- (REQUIRED) Agency responsible for Medicaid and the state Children's Health Insurance Program. Describe the coordination goals and process: [The Department for Vermont Health Access \(DHVA\)](#), in AHS, is responsible for Medicaid and the state Children's Health Insurance Program: [Dr Dynasaur](#) and is part of the Agency for Human Services (AHS) as is DCF/CDD. DHVA Leadership sit on the AHS Integrated Family Services (IFS) Leadership Team and on the AHS Interagency Policy and Operations Team with the CCDF Co-Administrator. DCF/CDD leadership work with staff in DHVA to creatively leverage Medicaid resources to provide supports for children with high needs eligible for Medicaid to ensure their success in early learning and development programs. The goals of this coordination include: aligning quality of services; coordinating services to families; linking comprehensive services to children in ELD settings; and smoothing transitions for children between programs and as they age into school.
 - (REQUIRED) State/territory agency responsible for mental health. Describe the coordination goals and process [The Department of Mental Health \(DMH\)](#) is responsible for mental health and is part of the AHS with DCF/CDD. Commissioners and deputy commissioners across AHS meet weekly with the Secretary and central office leadership. Representatives from DMH also sit on the AHS Integrating Family Services (IFS) Leadership and Implementation Teams with CDD staff. The teams each meet three times a month to integrate child and family services across the agency. The Children's Integrated Services (CIS) Unit in CDD includes a focus on [Early Childhood and Family Mental Health](#) that includes mental health consultation in early learning and development (ELD) programs. Staff from DMH consult with CDD staff to develop, implement and improve those services to support the social and emotional development of children. CIS staff from CDD are co-located with DMH staff as part of the IFS effort. The goals of this coordination include: a holistic, cross-sector approach to early childhood development and learning; supporting the social-emotional development of children in early learning and development programs; aligning quality of services; coordinating services to families; and linking comprehensive services to children in ELD settings.
 - (REQUIRED) Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Describe the coordination goals and process: [DCF/CDD contracts individually with 12 regional Community Child Care Support Agencies \(CCCSA\)](#) to: determine income eligibility and referral for the Child Care Financial Assistance Program (CCFAP). The CCCSAs manage certificates that link children in eligible families with participating providers; and provide consumer education and referral services for families, particularly families participating in CCFAP. CDD program staff and leadership meet regularly with leadership in member agencies. We worked closely together to reasonably interpret consumer education requirements in the CCDBG Act of 2014 and incorporate

these into CCCSA grants. On an on-going basis the CCCSAs and CDD work with BBF Regional Councils, child care providers and providers of professional development to assess and increase the capacity for high quality early care and learning programs to serve children and families in their communities. The goals of this coordination include: providing viable options for part day or full day services for families; ensuring continuity of care; smoothing transitions for children between programs and as they age into school, enhancing and aligning quality of services across settings, linking comprehensive services to children in early learning and development (ELD) settings and building the capacity for high quality ELD opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in..

- (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals and process: [Vermont Afterschool, Inc](#) is an independent 501C-3 organization that works with afterschool programs, advocates, and partners throughout the state to strengthen out-of-school time programming for children and youth in Vermont, to expand the number and types of programs being offered, and to improve access for all children and youth regardless of race, creed, color, religion, sexual orientation, family income, family situation, or geographic location. Under the guidance of a strong and diverse Partnership Advisory Council, Vermont Afterschool provides and supports training and technical assistance to programs and practitioners, awards grants and recognition for innovation and quality improvement, and hosts statewide events and conferences. The work of Vermont Afterschool is supported by private funds from the C.S. Mott Foundation and the Noyce Foundation, federal and state funds from both Vermont Agency of Education and the Child Development Division in the Department of Children and Families, Vermont Agency of Human Services (including CCDF quality funds) and funding from the Vermont Student Assistance Corporation.

- (REQUIRED) Agency responsible for emergency management and response. Describe the coordination goals and process: [The Vermont Agency of Human Services, Emergency Management and Department of Public Safety](#) are responsible for the state's Continuity of Operations Plan (COOP) and State Emergency Operations Plan. The Department for Children and Families-Child Development Division coordinated the development of the Emergency Response Planning Guide for Child Care Providers. These plans were developed in coordination with the Agency of Human Services, Department of Health, Agency of Education, Regional Planning Commissions, committee members from the State Advisory Council and others. The goals of this coordination include: technical assistance to child care providers, continuation of subsidy payments and determination of eligibility, provide emergency child care services where needed, and ensure post disaster recovery services are in place.

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

- State/territory/local agencies with Early Head Start – Child Care Partnership grants. Describe:
- State/territory institutions for higher education, including community colleges. Describe:
- Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services. Describe:
- State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe:
- Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment. Describe:
- State/territory agency responsible for child welfare. Describe:
- State/territory liaison for military child care programs. Describe:
- Provider groups or associations. Describe:
- Parent groups or organizations. Describe:
- Other. Describe:

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

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

As a reminder, CCDF funds may be used in collaborative efforts with Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between the Head Start and CCDF is strongly encouraged by sections 640(g)(1)(D) and (E); 640(h); 641(d)(2)(H)(v); and 642(e)(3) of the Head Start Act in the provision of full working day, full calendar year comprehensive services. To implement such collaborative programs, which share, for example, space, equipment, or materials, grantees may layer several funding streams so that seamless services are provided (Policy and Program Guidance for the Early Head Start – Child Care Partnerships: https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf).

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

No.

Yes. If yes, describe at a minimum:

- a) How you define “combine” Blending multiple funding streams, and/or layering funds together from multiple funding streams in order to leverage capacity to expand and/or enhance comprehensive high quality early care and learning services for children and families that are developmentally beneficial for children and strengthen families
- b) Which funds you will combine CCDF, TANF, Medicaid, IV-E, IDEA, Part C, Head Start, Early Head Start, Early Head Start - Child Care Partnership (EHS CCP) Grants, Early Learning Challenge Grant (ELCG), Preschool Development and Expansion Grant (PDEG) and State: State General Funds, State Education Funds
- c) Your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations Goals of combining funds include: supporting high quality full-day, full year early learning and development services for working families; providing continuity of care for children; smoothing transitions for children; enhancing and aligning the quality of ELD services across settings and sectors; linking comprehensive services to children in early care and development (ELD) programs; supporting the success of children with high needs in integrated high quality ELD programs; and building the capacity for high quality ELD opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in.
- d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level? Vermont combines funding using different methods appropriate to the funds involved. At the state level, Medicaid funds under a state Managed Care Organization (MCO) waiver are combined with matching state funds and leveraged against IDEA Part C funds to provide supports for successful integration of children with high needs into high quality ELD programs. Often these are combined at the program level with federal CCDF and state General Funds in the Child Care Financial Assistance Program (CC FAP). (CIS, Specialized CC Services). For children eligible for IV-E, IV-E funds are used to leverage CCDF and state general funds in CC FAP and to provide additional support services for children in protective services in ELD programs. TANF transfer is combined with CCDF at the state level to increase access to early care and learning programs for low income families.

At the local level, Vermont Education Fund dollars for publicly funded preschool are layered with Head Start funds, CC FAP funds and parent tuition to support full day, full year programs that wrap around prekindergarten hours. In the case of Head Start

partnerships these programs are comprehensive in nature of the most vulnerable children. For children eligible for IDEA Part B Section 619, IDEA dollars are combined with state Education Funds to support least restrictive integrated ELD settings. (Act 166 PreK and Essential Early Education Services) PDEG funds are also combined with state and local Education Funds and with Head Start and CCDF funds at the local level.

MCO Medicaid funds and MCO Investment funds and state matching funds are combined with CCDF funds and state General Funds in the CC FAP at the **program level** to support comprehensive services in high quality ELD programs serving vulnerable populations. Some of the participating programs are Head Start grantees who leverage these funds to expand Head Start programming and partnerships. Early Learning Challenge Grant (ELCG) funds were added to this combination to expand services offered in Center-Based programs to Family Child Care Homes and to evaluate outcomes. (Strengthening Families Program Grants). EHS-CCP combine federal grant funds with CCDF and state general Funds to support full day-full year services for infants and toddlers.

- e) How are the funds tracked and method of oversight Each funding stream is accounted for by the agency with oversight responsibility for those funds. The responsible state agency enters into agreements with programs to report data on participants and outcomes and tracks those investments in accord with state rules for procurement and monitoring. Sometimes this is invisible to state and local partners but more often they comply with multiple reporting requirements to assure responsible oversight of blended or layered funds.

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

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

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

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

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

- Public funds are used to meet the CCDF matching fund requirement. Public funds may include any general revenue funds, county or other local public funds, state/territory-specific funds (tobacco tax, lottery), or any other public funds.
 - If checked, identify the source of funds:
 - If known, identify the estimated amount of public funds that the Lead Agency will receive: \$
- Private donated funds are used to meet the CCDF matching funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes (98.53(f)).

If checked, are those funds:

- donated directly to the State?
- donated to a separate entity(ies) designated to receive private donated funds?

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

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

- State expenditures for preK programs are used to meet the CCDF matching funds requirement. If checked, provide the estimated percentage of the matching fund requirement that will be met with preK expenditures (not to exceed 30 percent):
 - If the percentage is more than 10 percent of the matching fund requirement, describe how the State will coordinate its preK and child care services:
 - If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: \$

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

- State expenditures for preK programs are used to meet the CCDF maintenance-of-effort requirements. If checked,
The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.55(h)(1) and 98.15(6).

- No
- Yes

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

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

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

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

1.6 Public-Private Partnerships

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

Identify and describe the entities with which and the levels at which the state/territory is partnering (level—state/territory, county/local, and/or programs), the goals of the partnerships, the ways that partnerships are expected to leverage existing service-delivery systems, the method of partnering, and examples of activities that have resulted from these partnerships (98.16(d)(2)). The public-private partnerships highlighted below are important in leveraging and advancing an integrated early care and learning and afterschool system in Vermont in order to achieve Vermont’s early childhood vision: To realize the promise of every Vermont child.

- 7.1.1 Building Bright Futures (BBF) Statewide Advisory Council (SAC) is the entity responsible for coordination of early childhood in Vermont and we partner with the BBF SAC and its committees on the state level and with the BBF Regional Councils on a regional level. The main goal in this public-private partnership is on advancing the goals and corresponding results of Vermont’s Early Childhood Action Plan. This work is accomplished primarily through the BBF Committee structure where local, regional and state level stakeholders come together through monthly meetings to develop and implement work plans.

Early Childhood Wellness Committee- The Vision of the Early Childhood Wellness Committee is to ensure a comprehensive, coordinated system of quality improvement opportunities focused on Health, Nutrition and Physical Activity are developed, promoted and made available to all childcare programs. These opportunities are driven by current research informed best practice approaches and seek to meet the needs of our locally diverse populations in order to provide the best care and education to children and families in Vermont. Result #1-All children have a healthy start. Partners- FaMLI Coalition, Help Me Grow, Home Visiting Alliance.

Families and Communities Committee- The committee will develop a statewide approach that enriches and expands family leadership at the provider, agency, and community level by convening a statewide Family Leadership Team to provide thought leadership for family leadership best practices. Result #2: Families and communities play a leading role in children’s well-being. Partners-Permanent Fund

Professional Preparation and Development Committee- The Professional Preparation and Development Committee formed after the first Early Childhood Workgroup meeting in 1992. This inclusive statewide workgroup has addressed issues, created resources and highlighted the need for a well-trained early childhood and after-school professional workforce. Its goal is to develop, coordinate and promote a comprehensive system of quality learning opportunities for current and prospective early childhood and after-school professionals. **Result #3- All children and families have access to high-quality opportunities that meet their needs. Partners- VAEYC, VACCRRRA, Child Care Providers Association, Let's Grow Kids, PreK Capacity Group, ELD Committee.**

Early Learning and Development Committee- The Early Learning and Development Committee informs and advises the Building Bright Futures State Council on problems and solutions in Early Care and Education settings; focusing on concerns that are specific to the Early Care and Education industry so that they can be appropriately addressed by and reflected in the work of the Building Bright Futures State Council. **Result #3- All children and families have access to high-quality opportunities that meet their needs. Partners- VAEYC, VACCRRRA, Child Care Providers Association, Let's Grow Kids, PreK Capacity Group, PPD; Result #4- Vermont invests in prevention and plans for the future success of children Partner- Building Vermont's Future from The Child Up Summit.**

Data and Evaluation Committee- The role of Building Bright Futures Data and Evaluation Committee is to ensure, on behalf of the Building Bright Futures State Advisory Council, Vermont's Early Childhood System is aligned around a clear set of policy questions and has data available (at the child, family and community as well as program, workforce, and systems levels) that can stimulate informed dialogue, learning and action around these policy questions. The policy questions address the well-being of children as young children (short-term) through their years entering adulthood (long-term.) **Result #5- Data and accountability drive progress in early childhood outcomes. Partners-VB5, BBF ECAP Director**

Early Childhood Interagency Coordination Committee act as an interagency coordinating body to support the implementation and application of the Vermont Early Childhood Framework and the corresponding Early Childhood Action Plan, particularly those activities of the plan that fall within the purview of state government. This team is

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

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

- If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency, provide parents in the State with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by

provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.

- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).
- Collect data and provide information on the coordination of services and supports, including services under Section 619 and Part C of the Individuals with Disabilities Education Act;
- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State;
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

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

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

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

- No. The state/territory does not fund a CCR&R system and has no plans to establish one.
- Yes. The state/territory funds a CCR&R system. If yes, describe the following:
 - a) What services are provided through the CCR&R system? [REDACTED]
 - b) How the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated. [REDACTED]

1.8 Disaster Preparedness and Response Plan

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

1.8.1 Describe how the Statewide Child Care Disaster Plan was developed in collaboration with the State human services agency, the State emergency management agency, the State licensing

agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care or similar coordinating body: The Vermont Agency of Human Services-Emergency Management in collaboration with the Department for Children and Families, Department of Public Safety, and Division of Fire Safety

- 1.8.2 Describe how the Statewide Disaster Plan includes the Lead Agency's guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster and temporary operating standards for child care after a disaster: The State of Vermont Continuity of Operations Plan provides information on Tier 1, Tier 2, and Tier 3 functions for the Child Development Division. Tier 1 functions are to be performed, given a one-day disruption. Tier 1 functions include staffing the CDD main phone line, processing of Child Care Financial Assistance invoices, processing of CCFAP applications for subsidy, and maintaining provider's access to the Bright Futures Information System. Additional Tier 1 functions include staffing the Licensor on Duty Line to provide immediate support to child care providers, processing child care licensing variances for temporary child care services or increasing child ratios and coordinating child care licensing visits to affected providers. Tier 2 functions to be performed, given a one day-one-week disruption includes processing licensing background clearances, processing and monitoring Specialized Child Care programs, validating Approved Relative Child Care applications and processing grant and contract invoices. Tier 3 functions to be performed, given one week-one-month disruption includes processing child care licensing applications and determining CCFAP and Licensing appeals.
- 1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services: The licensee reports the incident to CDD either by calling the LOD line, electronically filing an incident report through the program's BFIS account or emailing or calling their Licensing Field Specialist directly. A CDD staff person also monitors media reports and notifies the Licensing Field Specialist, Licensing Field Supervisor, and the Director of Child Care Licensing of an emergency that affects a specific program. The Licensing Field Specialist will contact the program if the licensee has not already reached out to CDD. If the program doesn't respond to a phone call, the Licensing Field Specialist will conduct a licensing visit. Once contact occurs, the Licensing Field Specialist will determine whether the program needs emergency assistance and/or assistance with maintaining continuity of care. Whether by phone or during a licensing visit, the Licensing Field Specialist reviews who the program is serving. Depending on the situation, this may include gathering the age ranges and number of children receiving care and/or collecting the names of parents and children and their contact information.
- When the emergency is complex, the Licensing Field Specialist will support the licensee with obtaining emergency assistance, strategizing and identifying resources, and/or developing an action plan to support continuity of care. The Licensing Field Specialist may contact and/or direct the licensee to contact an expert such as Vermont Department of Health, Division of Fire Safety, etc. The experts will assist with assessing potential health and/or safety risks for staff

and children and provide options for continuity of care. The Licensing Field Specialist may support the licensee with filing a child care licensing variance to support a temporary relocation. Necessary community partners will be consulted (Division of Fire Safety, Agency of Natural Resources, local Zoning Administrators) to secure the needed approvals for authorizing a relocation. Licensing Supervisors will prioritize and expedite processing these variances. While the Licensing Field Specialist is providing direct supports to the licensee, the Licensing Supervisor will manage the coordination and information sharing with other CDD services.

If a program is being relocated:

The Child Care Benefits Administrator is notified. The Child Care Benefits Administrator will ensure CCFAP regulations are followed and continuity of payments occurs

The Specialized Child Care Administrator is notified. The Specialized Child Care Administrator will ensure CIS Child Care Coordinators are notified and provide appropriate supports to program providing child care to protective services children and children with special health needs.

If families need assistance with finding alternative care for children:

The Child Care Benefits Administrator will ensure Referral Specialists are notified and assist families with finding alternative child care and/or preschool services; and/or

The Specialized Child Care Administrator is notified. The Specialized Child Care Administrator will ensure CIS Child Care Coordinators are notified and assist families with finding alternative care in collaboration with Referral Specialists.

- 1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place—evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions: Child Care Regulations stipulate that the licensee shall develop and maintain a written Emergency Response Plan to respond to a full range of emergencies both natural and man-made. A complete plan shall include how the licensee will address and manage the following situations and responsibilities: evacuations/lockdowns, notification to local authorities of the emergency, notification to parents, identification of children and parents at time of emergency, a system for handling children with special needs, a process for relocation, a system for shelter in place, family reunification, and guidelines for continuation of care.
- 1.8.5 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place for child care staff and volunteers—emergency preparedness training and practice drills as required in 98.41(a)(1)(vii): The licensee shall ensure that all staff are trained on the Emergency Response Plan and are aware of where to find the written plan. Center regulation-3.7.1.2) (Family CC Home regulation-3.6.1.2). The licensee will attend emergency preparedness training which shall include content specifically related to sheltering in

place (Center regulation 3.7.3) (FCCH regulation 3.6.3). The licensee shall ensure that evacuation drills are conducted at least once a month (Center regulation 3.7.2.2) (FCCH regulation 3.6.2.2)

- 1.8.6 Provide the link to the website where the statewide child care disaster plan is available: <http://dcf.vermont.gov/childcare/providers/health-safety>, <http://vem.vermont.gov/plans/state>, COOP plan available upon request.

2 Promote Family Engagement Through Outreach and Consumer Education

Lead Agencies are required to support the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A key purpose of the CCDBG Act is to “promote involvement by parents and family members in the development of their children in child care settings” (658A(b)). Lead Agencies have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care consumer education websites.

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

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

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

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

- 2.1.1 Describe how the Lead Agency or partners provide outreach and services to eligible families for whom English is not their first language: Community Child Care Support Agencies that provide eligibility determination services, also are charged with community outreach of the Child Care Financial Assistance Program and Child Care Referral. They are required to ensure support and translation services are available to families and child care providers with limited English

proficiency. Our application includes language about how to get translation services, also the child care regulations and guidance manuals are translated to Nepali, Spanish and Somali.

- 2.1.2 Describe how the Lead Agency or partners provide outreach and services to eligible families with a person(s) with a disability: The outreach materials on the website are Section 508 compliant and are accessible through screen readers and other devices. Outreach materials are written in plain language and at an 8th grade reading level or lower whenever possible. All electronic materials are in file formats that are accessible. The state also utilizes the Vermont Telecommunications Relay Service when needed to communication with a person who is deaf, hard of hearing, deaf-blind, or speech disabled.

2.2 Parental Complaint Process

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

- 2.2.1 Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process: Parents and any other individual can make a complaint about a child care provider in several ways. They can call our child care consumer line at 1-800-649-2642 option 3, or file a complaint online using our data system, Bright Futures Information System (BFIS). When they call the consumer line they will talk to a Licensing Field Specialist who will take the complaint and ask any necessary questions, interpretation or other accessibility services are available during this call. Submission through Bright Futures Information System can be anonymous and walks the person through the information needed in the complaint. That complaint can be made here: http://www.brightfutures.dcf.state.vt.us/vtcc/reset.do?5Mmr3gjmkz13-SgYEjWekr3%3dxguw3YEa.aU7zaju.xnn.xGOOF-Oq-G6%2bS6%256Uh6%256U6F.FOhgwEkeUs3peYY.wjRszYgwUVm3wjR_YEawsUzWe_WmK_SgsUWVjUVm3mWgwkwmpwUVm3wjR_YEWeyegkz13SG0D6qSdGhSS0_d
- 2.2.2 Describe the Lead Agency's process for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring: A Licensing Supervisor reviews each reported complaint. If the complaint doesn't allege regulatory non-compliance, then the complainant is contacted (when the complainant is known) to discuss concerns and options. After which the complaint is not accepted for investigation. If the complaint alleges regulatory non-compliance, the complaint is assigned to a Licensing Field Specialist for investigation. The Licensing Field Specialist begins the investigation by connecting with the complainant (when the complainant is known) to discuss the concerns and complaint investigation process. Then the Licensing Field Specialist conducts a complaint visit at the program. The investigation includes observations, review of paperwork, interviews of staff, and

etcetera as relevant to the nature of the complaint. If evidence demonstrates regulatory non-compliance, violations are cited, and corrective action is identified. The final step is for the Licensing Field Specialist to call the complainant (when the complainant is known) and share the outcome of the investigation. A Licensing Supervisor reviews the complaint for quality assurance and closes it. Some complaints involve co-investigation with DCF's Family Services Division due to allegations of child abuse and/or neglect or other community partners (e.g. Division of Fire Safety, Vermont Department of Health, etcetera).

- 2.2.3 Describe the Lead Agency's process for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring: A Licensing Supervisor reviews each reported complaint. If the complaint doesn't allege regulatory non-compliance, then the complainant is contacted (when the complainant is known) to discuss concerns and options. After which the complaint is not accepted for investigation. If the complaint alleges regulatory non-compliance, the complaint is assigned to a Licensing Field Specialist for investigation. The Licensing Field Specialist begins the investigation by connecting with the complainant (when the complainant is known) to discuss the concerns and complaint investigation process. Then the Licensing Field Specialist conducts a complaint visit at the program. The investigation includes observations, review of paperwork, interviews of staff, and etcetera as relevant to the nature of the complaint. If evidence demonstrates regulatory non-compliance, violations are cited, and corrective action is identified. The final step is for the Licensing Field Specialist to call the complainant (when the complainant is known) and share the outcome of the investigation. A Licensing Supervisor reviews the complaint for quality assurance and closes it. Some complaints involve co-investigation with DCF's Family Services Division due to allegations of child abuse and/or neglect or other community partners (e.g. Division of Fire Safety, Vermont Department of Health, etcetera).
- 2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints: All complaints are entered into our BFIS data system under the licensed program in which the complaint is about and remains a permanent part of the licensed program's history/file. The complaint documents complainant name and contact information (when provided), original complaint narrative, an allegation section which identifies each licensing rule identified for investigation, and an investigation log that documents all investigation activity. A site visit report is written and attached to the complaint investigation log. In the allegation section, each licensing rule identified for investigation has the investigation determination (substantiated, unsubstantiated, or unable to determine) entered upon conclusion of the investigation. Access to the section of the data system that maintains the complaints is restricted to approved users.
- 2.2.5 Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3: Site visit reports from complaints in which violations are cited (along with required corrective action) are posted to the BFIS public portal for consumers to review. (<http://www.brightfutures.dcf.state.vt.us/vtcc/process.do?2Mmr3gjumkz13->

[SgYEjWekr3%3dxguw3YEa.aU7zaju.xnn.xGOSD-O6-Gh%2bSq%256Uh6%256USD.6qFgwEkeUs3peYY.wjRszYgwUVm3kmLmkkUs umUkYAgSUVVjUVm3mWgwkmPwUVm3kmLmkkUs zWLEgkz13ShGGOSdFdD6O6 d\)](#) If a consumer calls the Consumer Concern Line at (800) 649-2642 option 3, they may ask about a provider's regulatory history. Information about substantiated complaints will be provided.

2.3 Consumer Education Website

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

To certify, respond to questions 2.3.1 through 2.3.10 by describing how the Lead Agency meets these requirements and provide the link in 2.3.11. Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved are considered substantial changes and CCDF Plan Amendments will be required.

- 2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible: [The consumer education website is designed specifically based on the parent user, the navigation is built on the language used by consumers. The website is Section 508 compliant and is mobile friendly. Information is written in plain language and at an 6th grade reading level or lower whenever possible. All electronic materials are in file formats that are accessible.](#)
- 2.3.2 Describe how the website ensures the widest possible access to services for families that speak languages other than English (98.33(a)): [The websites are Section 508 compliant and are accessible through screen readers and other devices. Outreach materials are written in plain language and at an 6th grade reading level or lower whenever possible. All electronic materials are in file formats that are accessible.](#)
- 2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities: [The websites are Section 508 compliant and are accessible through screen readers and other devices. Outreach materials are written in plain language and at an 8th grade reading level or lower whenever possible. All electronic materials are in file formats that are accessible.](#)
- 2.3.4 Lead Agency processes related to child care.

A required component of the consumer education website is a description of Lead Agency policies and procedures relating to child care (98.33(a) (1)). This information includes a description of how the state/territory licenses child care, a rationale for exempting providers

from licensing requirements, the procedure for conducting monitoring and inspections of providers, and the policies and procedures related to criminal background checks.

- a) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6: Vermont statute requires child care providers to be licensed by DCF's Child Development Division unless identified exemption criteria apply. See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>). Licensing rule 2.1.2 in Center Based Child Care and Preschool Programs Regulations allow for exemptions in addition to Vermont statute (http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/Licensing/CBCCPP_Regulations_FINAL.pdf). Any program that wants to participate in CCDF is required to become licensed and follow all licensing regulations and processes. In the situations in which exemption from being licensed exists, programs have either another oversight entity or the time that children are present is limited minimizing level of risk.
- b) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2: Center Based Child Care and Preschool Programs licensing rules in section 2.3.1 and 2.3.6 and licensing rules 2.3.8.13 and 2.3.9.4. Family Child Care Home licensing rules in section 2.3.1 and 2.3.5 and licensing rules 2.3.7.16 and 2.3.9.4. Afterschool Child Care Programs licensing rules 18.2 – 18.5, 18.15 – 18.17, 18.30, and 18.47. All 3 sets of licensing regulations may be found on the Vermont Child Development Division website (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).
- c) Provide the link to the policies and procedures related to criminal background checks for staff members of child care providers and the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in sections 5.4.1 and 5.4.6: Center Based Child Care and Preschool Programs licensing rules in section 2.3.8.2 and 7.2 and licensing rules 2.3.9.3, 2.3.10.4.1, 3.2.6, 6.2.6.6, 7.6.4, 7.7.5, and 7.7.5.1. Family Child Care Home licensing rules in section 2.3.7.3 and 7.2, and licensing rules 2.3.8.3, 2.3.9.5.1, 3.1.6, 6.2.4.7, 7.6.1, 7.7.5, and 7.7.5.1. Afterschool Child Care Programs licensing rules in section 18.26, and licensing rules 5.11 – 5.18, and 18.43.a. All 3 sets of licensing regulations may be found on the Vermont Child Development Division website (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

2.3.5 List of providers

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

- a) Provide the website link to the searchable list of child care providers: <http://brightfutures.vermont.gov>
- b) Which providers are included in the searchable list of child care providers:
 - Licensed CCDF providers
 - Licensed non-CCDF providers
 - License-exempt center-based CCDF providers
 - License-exempt family child care (FCC) CCDF providers

- License-exempt non-CCDF providers
- Relative CCDF child care providers
- Other. Describe:

c) Describe what information is available in the search results. Specify if the information is different for different types of providers: physical location; contact information including email and phone number; website; start date of current license; owner name (for center based and afterschool programs); type of license, director (for center based and afterschool programs); number of children program is licensed to care for at one time; STARS participation; national accreditation; state prequalified prekindergarten status; licensing site visit date, violations cited at licensing site visits and observations; terms and conditions on the license.

Additional information is available at the discretion of the provider including number of children desired to enroll; vacancies; guidance practices; age categories willing to serve; if they provide specialized child care services; discounts; description of the program; pets; if program participates in the food program or head start; religious activity; subsidy provider; building type; schedule; languages supported; hours of operation; transportation; and meal information.

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

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

- Quality rating and improvement system
- National accreditation
- Enhanced licensing system
- Meeting Head Start/Early Head Start requirements
- Meeting prekindergarten quality requirements
- Other. Describe:

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

- Licensed CCDF providers. Describe the quality information: The current STARS rating, national accreditations, and prequalified prekindergarten status
- Licensed non-CCDF providers. Describe the quality information: The current STARS rating, national accreditations, and prequalified prekindergarten status
- License-exempt center-based CCDF providers. Describe the quality information:
- License-exempt FCC CCDF providers. Describe the quality information:
- License-exempt non-CCDF providers. Describe the quality information:
- Relative child care providers. Describe the quality information:

Other. Describe: [REDACTED]

2.3.7 Lead Agencies are required to post monitoring and inspection reports on the consumer education website for each licensed provider and for each non-relative provider eligible to provide CCDF services on the consumer education website. These reports must include results of required annual monitoring visits and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. The reports must be in plain language and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of reports when available.

Certify by describing:

- a) How monitoring and inspection reports are in plain language. Include a website link to a sample monitoring report, or if reports are not in plain language, describe how plain-language summaries are used to meet the regulatory requirements. Include a link to a sample report and summary. Licensing Field Specialists receive training and supervision to support them in writing monitoring and inspection reports in plain language. Here's a link to a licensing report in which rules were observed to be in compliance with licensing regulations and rules were observed to be in non-compliance (http://www.brightfutures.dcf.state.vt.us/vtcc/process.do?3Mmr3x2nb_52x2n.x2nb_52x2n_29%256UDqd0h%25GLPyxb.Pyxb_29%256UGhdDgjumkz13-SgYEjWekr3%3dxguw3YEa.aU7zaju.xnn.xGOSD-O6-Gh%2bSq%256Uh6%256USD.6qFgwEkeUs3peYY.wjRszYgwUVm3wjRszY_uzem_pzuze_1me_UzsugsUWVjUVm3mWgwkmpwUVm3kmLmkkUs_wkEpz1mk_ujaaUkrkz13ShGGOGDSSd0g0_F).
- b) How monitoring and inspection reports and/or their plain-language summaries prominently display any health and safety violations, including any fatalities or serious injuries. Monitoring and inspection reports list violations first. When serious violations have been cited, the factual basis will state "this is a serious violation." The reports include the regulation cited and the "factual basis." The factual basis is a written description of the actual event(s), including if there was an injury or fatality.
- c) The process for correcting inaccuracies in reports. A report may be deleted, and a new report may be entered if there is an inaccuracy in the report.
- d) The process for providers to appeal the findings in the reports, including the time requirements. A provider may file an appeal within 30 days of the date the report was issued. An initial appeal is filed with DCF's Child Development Division and is called a Commissioner's Review. A person, not involved with citing the violations, within DCF's Child Development Division is assigned to process the appeal. The appeal process includes reviewing information and testimony from the Licensing Field Specialist, from the provider, and any other pertinent witnesses. A written copy of the appeal decision is provided to the provider, Licensing Field Specialist, and the Licensing Supervisor. If the Commissioner Review decision is to uphold the violation(s) in full or part, the appeal decision letter will include the provider's right to appeal to the Human Services Board. This appeal is required to be filed within 30 days of the date the Commissioner Review decision letter was issued. The Human Services Board is an objective 3rd party who is separate from the Department for Children and Families. A hearing officer holds a hearing in which all witnesses provide

testimony and evidence. The hearing officer's decision is provided in writing to the provider and to DCF's Child Development Division.

- e) How reports are posted in a timely manner. Specifically, provide the Lead Agency's definition of "timely" and describe how it ensures that reports are posted within its timeframe. Licensing visit reports are required to be posted within 5 days of the licensing visit. Our BFIS data system, in which the licensing reports are entered, generates a notice to the Licensing Supervisors when a report with violations is submitted. This allows the Licensing Supervisors to do a quality assurance review of the report for timely submittance and other quality assurance review.
- f) How many years of reports that the state/territory posts on its website, if any, beyond the required minimum of 3 years, where available (98.33(a)(4)(iv)). Once a licensing report is posted to our BFIS public portal, it remains posted until such time as the program is no longer licensed. DCF's Child Development Division is able to remove a report if necessary.
- g) The policy for removing reports after a certain amount of time has passed (e.g., after 7 years). When violations have been cited, the program/provider may request violations (older than 5 years) be removed from the BFIS public portal when the violation hasn't been repeated. DCF's Child Development Division is able to repost violations if necessary.
- h) Any additional providers on which the Lead Agency chooses to include reports. Note - Licensed providers and CCDF providers must have monitoring and inspection reports posted on their consumer education website.
 - License-exempt non-CCDF providers
 - Relative child care providers
 - Other. Describe:

2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted on the consumer education website. The information on serious injuries and deaths should be organized by category of care and licensing status, however, Lead Agencies are not required to breakdown the instances of substantiated child abuse by category of care and licensing status.

Certify by providing:

- a) The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care (98.16 (ff)) and describe how the Lead Agency obtains the aggregate data from the entity. Child care programs are required to report serious injuries or deaths to the Child Development Division through an online incident report in the division's Bright Futures Information System. This is required by Afterschool Program rule 4.9.a, Center Based rule 3.2.1 and Family Child Care Home rule 3.1.1
- b) The definition of "substantiated child abuse" used by the Lead Agency for this requirement. The state definition of Abused or Neglected Child: A child whose physical health, psychological growth and development or welfare is harmed or is at substantial risk of harm by the acts or omissions of his or her parent or other person responsible for the child's welfare. Also, a child who is sexually abused or at substantial risk of sexual abuse by any person and a child who has died as a result of abuse or neglect (33 VSA § 4912(1))

The state than uses this as the definition of Substantiated Report: The Commissioner or the Commissioner’s designee has determined after investigation that a report is based on accurate and reliable information that would lead a reasonable person to believe that the child has been abused or neglected (33 VSA § 4912(16)).

- c) The definition of “serious injury” used by the Lead Agency for this requirement. A serious impairment of physical condition, including, but not limited to, the following: loss of consciousness; concussion; bone fracture; protracted loss or impairment of function of any bodily member or organ; a wound requiring extensive suturing; and serious disfigurement.
- d) The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted.
<https://embed.resultsscorecard.com/Scorecard/Embed/23301>

2.3.9 The consumer education website should include contact information on referrals to local child care resource and referral organizations. How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information: The general website <http://dcf.vermont.gov/childcare/parents> has information about the community agency and contact information on for each agency. In addition, on Bright Futures Information System, when a parent searches for child care and clicks on the details of a child care program a link to the list of referral agencies is available on that page (<http://brightfutures.vermont.gov/>)

2.3.10 The consumer education website should include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website. Describe and include a website link to this information: Bright Futures Information System has a statement at the top of each page of a child that encourages parents to contact the child care referral specialist for additional information.

2.3.11 Provide the website link to the Lead Agency’s consumer education website. Consumer information: <http://dcf.vermont.gov/childcare/parents> and child care search: <http://brightfutures.vermont.gov>

2.4 National Website and Hotline

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

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

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

2.5 Additional Consumer and Provider Education

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

In questions 2.5.1 through 2.5.4, certify by describing:

- 2.5.1 How the Lead Agency shares information with eligible parents, the general public, and where applicable, child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible, such as state preK, as well as the availability of financial assistance to obtain child care services. At a minimum, describe what is provided (e.g., such methods as written materials, the website, and direct communications) and how information is tailored for these audiences. <http://brightfutures.vermont.gov> allows families to search for and view program information on all regulated child care programs in Vermont, including those that provide afterschool care, public school preschool, and other services. Eligibility determination is completed in community agencies that also do the child care referral services. Families that are applying for child care financial assistance are asked if they would like to receive information about child care providers and a referral specialist is available to support that search. The Child Care Financial Assistance Program booklet for families has some information about looking for child care and to talk to the local referral specialist. This booklet is provided to families who apply for financial assistance. We also have two booklets for parents on how to find child care and what to expect from regulated care – Child Care and You and Using Regulated Child Care in Vermont. Both are available through the eligibility/referral agency and on our website at: <http://dcf.vermont.gov/cdd/publications>
- 2.5.2 The partnerships formed to make information about the availability of child care services available to families. In addition to the grants to local community agencies to provide child care referral services, those agencies have a Memorandum of Understanding with the statewide 2-1-1 system to do a warm handoff call to the local child care referral specialist to support families having access to child care. Child care referral agencies through their grant from the division are required to do community outreach on the availability of child care information, and that outreach includes information to other local human service agencies.
- 2.5.3 How the Lead Agency provides the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers. In the description, include at a minimum what information is provided, how the information is

provided, and how the information is tailored to a variety of audiences and include any partners who assist in providing this information.

- Temporary Assistance for Needy Families program: The Department for Children and Families is the lead agency for TANF and as such has information about the program and how to apply on our website: dcf.vermont.gov. In addition, eligibility specialists and referral specialists provide information to families that are seeking services and support. The Agency of Human Services has a contract with the state 2-1-1 system to also provide information and referrals for TANF.
- Head Start and Early Head Start programs: Head Start and Early Head Start programs are required to be regulated and as such are listed as child care programs on the brightfutures.vermont.gov website. Our website also has information about Head Start services with contact information for the local Head Start agency. In addition, eligibility specialists, referral specialists, local Children's Integrated Services staff, and Parent Child Centers provide information to families that are seeking services and support.
- Low Income Home Energy Assistance Program (LIHEAP): The Department for Children and Families is the lead agency for LIHEAP through Economic Services Division and as such has information about the program and how to apply on our website: dcf.vermont.gov. In addition, eligibility specialists and referral specialists provide information to families that are seeking services and support. The Agency of Human Services has a contract with the state 2-1-1 system to also provide information and referrals for LIHEAP and other home heating and energy programs.
- Supplemental Nutrition Assistance Programs (SNAP)Program: The Department for Children and Families is the lead agency for SNAP through Economic Services Division and as such has information about the program and how to apply on our website: dcf.vermont.gov. In addition, eligibility specialists and referral specialists provide information to families that are seeking services and support. The Agency of Human Services has a contract with the state 2-1-1 system to also provide information and referrals for SNAP.
- Women, Infants, and Children Program (WIC)program: Vermont's WIC program is identified as a resource for parents under the economic help section on the DCF/CDD website with a direct link to the WIC section of the Department of Health's website. In addition, CCCSA staff, Children Integrated Services (CIS) staff, including home visitors and staff in Parent Child Centers provide information about the benefits of WIC and how to access WIC in their area.
- Child and Adult Care Food Program(CACFP): Staff in the CCCSAs provider information to child care providers and families about the CACFP. Outreach staff from Hunger Free Vermont encourage providers to participate in the program as a strategy for increasing food security and good nutrition for children. Regional BBF Councils also encourage participation in eh CACFP in their regions.
- Medicaid and Children's Health Insurance Program (CHIP): CCCSA staff, Children Integrated Services (CIS) staff, including home visitors and staff in Parent Child Centers provide information about Medicaid and CHIP. The Department's website also has a link to Vermont

Health Connect with is the state's health care resource under Health/Mental Health Resources.

- Programs carried out under Section 619 and Part C of the Individuals with Disabilities Education Act (IDEA): The Division administers IDEA Part C services through the Children's Integrated Services program, and as such all information about Part C is available on the website and division print materials. This also connects families to IDEA Part B services through the Vermont Agency of Education. Information is also given to families with questions through the state's parent hotline - "Help Me Grow", and through local grantees - child care referral, parent child centers, Children's Integrated Services local providers, and home visiting programs. In addition, the Division conducts outreach activities specific to Part C including visiting medical offices to give information to the staff and leave materials for families and distributing information at local community events.

2.5.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children's development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners in providing this information. The Division links to research and best practice information for parents through the website: dcf.vermont.gov and requires through a grant for child care referral specialists to provide information to families and the community. The division also oversees the Children's Integrated Services Program that provides resources to families, and medical professionals about concerns they have about their child's development. The services offered through CIS include IDEA Part C, home visiting, parent education, and child care consulting. In addition, a partner of the division is the Department of Health which provides a grant for a statewide Help Me Grow hotline, which is housed at the 2-1-1 center. Information available at these resources includes general ages and stages information and resources to call if a parent has concerns.

2.5.5 Describe how information on the Lead Agency's policies regarding the social-emotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include what information is provided, how the information is provided, and how information is tailored to a variety of audiences and include any partners in providing this information. The division oversees the Children's Integrated Services (CIS) Program which provides mental health consultation and information about social-emotional/behavior to families directly. Information is on the division's website: <http://dcf.vermont.gov/child-development/cis> and the local agencies receiving grants to provide direct services provide local outreach with materials to medical offices, community fairs and other local places parents may access. In addition, Parent Child Centers and trained referral staff are referring families to Vermont's Help Me Grow hotline for information about parenting and child development. CIS home visitors and Parent Child Center staff provide information and resources in person to families based on the needs and questions of the family.

- 2.5.6 Describe the Lead Agency's policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds (98.16(ee)), including how those policies are shared with families, providers, and the general public. Center Based Child Care and Preschool Programs licensing rules in section 6.2.8.4. Family Child Care Home licensing rules in section 6.2.6.1. These 2 sets of regulations may be accessed on DCF's Child Development Division's website (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

2.6 Procedures for Providing Information on Developmental Screenings

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

2.6.1 Certify by describing:

- a) How the Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF parents, the general public, and where applicable, child care providers (98.15(b)(3)). Vermont Help Me Grow has established a centralized phone resource, to provide families and caregivers with tools to track children's developmental milestones and get a referral and on-going support to connect with resources and services in their community, including Children's Integrated Services, which includes IDEA Part C (CIS Early Intervention), and IDEA Part B Section 619 administered by Local Education Agencies. The Vermont Department of Health has also developed and implemented an on-line Developmental Screening Registry as part of the Health Department's Child Health profile which will be used to track and communicate developmental screening results. Child care providers can obtain access to the statewide person-centered database which now includes Vermont's Developmental Screening Registry. Developmental screening tool results can be entered and shared across sectors using this registry to support improved screening rates, collaboration, and communication. The registry supports the Ages & Stages Questionnaire®, Third Edition and the Ages & Stages Questionnaire: Social Emotional, Second Edition®, and the Modified Checklist for Autism in Toddlers™ and the Modified Checklist for Autism in Toddlers, Revised with Follow-up.
- b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program—carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.)—and developmental screening services available under Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.). A family resource sheet is given to families at intake and mailed with Child Care Financial Assistance certificates. The resource sheet provides information about services available to families including the

EPSDT, IDEA Part B and C, developmental screening services, and how to find out about child care options and specific information about a regulated child care program.

- c) How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work. A family resource sheet is given to families at intake and mailed with Child Care Financial Assistance certificates. The resource sheet provides information about services available to families including the EPSDT, IDEA Part B and C, developmental screening services, and how to find out about child care options and specific information about a regulated child care program. In addition to intake and mailings about Child Care Financial Assistance eligibility, these are provided by child care referral specialists and Children's Integrated Services coordinators when appropriate.
- d) How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays. Vermont's parents and caregivers can call Vermont Help Me Grow, 2-1-1, operated by United Ways of Vermont, and be connected with trained Help Me Grow child development specialists who can answer questions about children's behavior and development and connect families to resources and services in their community. Child development specialists are available from 9 a.m. to 6 p.m., Monday - Friday. Callers can leave messages after hours, as Vermont 2-1-1 is available 24 hours a day, 7 days a week, 365 days a year.
- Children at risk for cognitive or other developmental delays are connected with Children's Integrated Services (CIS) administered by the Child Development Division and provided by community partners in a local integration model using a federally approved One Plan that includes the elements of EI IFSP. CIS includes IDEA Part C (Early Intervention), Nursing and Family Support Services and Home Visits, Evidence Based Home Visiting Programs, Specialized Child Care Services and Early Childhood and Family Mental Health Services.
- e) How child care providers receive this information through training and professional development. As part of the Provider Outreach component of VT HMG, the Vermont Child Health Improvement Program (VCHIP) trains child health and early care and education practitioners on developmental monitoring, screening and how to link families to local resources and services. The Vermont Child Health Improvement Program through the Vermont Department of Health has coordinated professional development trainings to promote comprehensive developmental surveillance and screening training to early care and education providers in center and home-based child care settings. Many trainings have been offered to child care providers through Vermont's early childhood professional development system on the Ages & Stages Questionnaire, Third Edition and the Ages & Stages Questionnaire: Social Emotional, Second Edition. These will continue to be offered through our early childhood professional development system.
- f) Provide the citation for this policy and procedure related to providing information on developmental screenings.

2.7 Consumer Statement for Parents Receiving CCDF Funds

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

2.7.1 Certify by describing:

- a) How the Lead Agency provides parents receiving CCDF funds with a consumer statement. A family resource sheet is given to families at intake and mailed with Child Care Financial Assistance certificates. This is a written fact sheet.
- b) What is included in the statement, including when the consumer statement is provided to families. The resource sheet provides information about services available to families including the EPSDT, IDEA Part B and C, developmental screening services, and how to find out about child care options and specific information about a regulated child care program. In addition to intake and mailings about Child Care Financial Assistance eligibility, these are provided by child care referral specialists and Children’s Integrated Services coordinators. When appropriate eligibility specialists, referral specialists and CIS coordinators also provide families with the booklets, Child Care and You and Using Regulated Care which provide detailed consumer information about requirements providers must meet. Those booklets are available to all on the division’s website: <http://dcf.vermont.gov/cdd/publications>
- c) Provide a link to a sample consumer statement or a description if a link is not available.

3 Provide Stable Child Care Financial Assistance to Families

In providing child care assistance to families, Lead Agencies are required to implement these policies and procedures: a minimum 12-month eligibility and redetermination periods, a process to account for irregular fluctuations in earnings, a policy ensuring that families’ work schedules are not disrupted by program requirements, policies to provide for a job search of not fewer than 3 months if the Lead Agency exercises the option to discontinue assistance, and policies for the graduated phase-out of assistance. Also, procedures for the enrollment of homeless children and children in foster care, if served, pending the completion of documentation, are required.

Note: Lead Agencies are not prohibited from establishing policies that extend eligibility beyond 12 months to align program requirements. For example, Lead Agencies can allow children enrolled in Head Start, Early Head Start, state or local prekindergarten, and other collaborative

programs to finish the program year. This type of policy promotes continuity for families receiving services through multiple benefit programs.

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

3.1 Eligible Children and Families

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

3.1.1 Eligibility criteria based on a child's age

a) The CCDF program serves children from 6 (weeks/months/years) to 12 years (through age 12). *Note:* Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).

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

No

X Yes, and the upper age is 18 (may not equal or exceed age 19). If yes, provide the Lead Agency definition of physical or mental incapacity: Established when the primary caretaker(s) can demonstrate that his/her child has a significant health or specialized developmental need as documented by a licensed physician and/or licensed psychologist or by the assessment determining eligibility for Special Education or Early Intervention Services that includes child care as part of the child's development plan.

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

No

X Yes, and the upper age is 18 (may not equal or exceed age 19).

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

“residing with”: Living in the same household

“in loco parentis”: an individual other than a parent, age 18 or older, fulfilling a parental role in caring for a dependent child by providing physical care, guidance and decision-making related to the child's health, school, medical care and discipline.

3.1.2 Eligibility criteria based on reason for care

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

“Working”: **Employment:** involvement in an activity, either in or out of the home, through which hourly compensation of at least minimum wage is received. (no minimum hours required) This includes activity related to employment, including hours of rest or sleep, as needed for 2nd or 3rd shift employment.

Start-Up Self Employment: a new business activity determined as likely to lead to self-employment within one year. Earning minimum wage is not required during this period. a Business Plan is required.

Seeking Employment: involvement in activities generally recognized as necessary to obtain employment or training which leads to employment. *No minimum hours required

“Job training”: Demonstrated participation in a program which is likely to lead to employment within one year after completion of the program. This need can also be established if the training is required to maintain employment.

Allowable activities include the following:

- Work programs, training programs, and other activities approved by Economic Services Division as part of the family development plan
- Work or training programs approved by the Department of Labor
- Work study programs or training programs related to employment

*No minimum hours required

“Education”: Demonstrated participation in an educational program which is likely to lead to employment within one year after completion of the program. This need can also be established if the education program is required to maintain employment Allowable activities include the following:

- High school, public or private, and high school equivalency programs such as Adult Basic Education (ABE) or General Equivalency Diploma (GED)
- Post-secondary courses at an accredited or institution of higher education offering certification or associate and bachelor’s degree course work

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

- One hour of child care per class credit. If credits are not assigned, a letter from the school/training program, clearly designating the hours of class time, is acceptable.
- One hour of child care per school credit for study time. If credits are not assigned, a letter from the school/training program designating the study hours required, per class, is acceptable.
- Up to 2 hours of travel time may be authorized per day.

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

No. If no, describe the additional work requirements: _____

- Yes. If yes, define the job-search time limit, keeping in mind a minimum of 3 months is required to be provided when a parent experiences a non-temporary loss or cessation of eligible activity: 3 Months
- c) Does the Lead Agency consider engaging in a job search or seeking employment an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination (must provide a minimum of 3 months)?
- No.
- Yes. If yes, describe the policy or procedure. The Commissioner has determined that Seeking Employment may be authorized for up to 12 weeks (3 Months) for an income eligible parent/caretaker. In addition, if a client requests to use the service need of Seeking Employment more than once during their 12-month eligibility period or at re-determination the request will be granted.
- d) Does the Lead Agency provide child care to children in protective services?
- No.
- Yes. If yes:
- i. Please provide the Lead Agency's definition of "protective services": A set of personalized and planned child development services designed to intervene positively in a child's life. Subsidized early care and education may be used as an intervention and safety strategy that promotes child development in the implementation of the Department for Children and Families, Family Services Division (DCF FSD) case plan for children in state custody in foster care or in the custody of biological parents or kin caregivers. Early care and education may also be authorized as a prevention and early intervention service designed to reduce stress for families and their children and promote positive child development while avoiding the intervention of the DCF FSD. This may be authorized after a confidential application and risk assessment has been completed by the local Children's Integrated Services Team.
*Note: Federal requirements allow other vulnerable children identified by the Lead Agency not formally in child protection to be included in the Lead Agency's definition of protective services for CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are *not* working or are *not* in education/training activities, but this provision should be included in the protective services definition above.*
 - ii. Are children in foster care considered to be in protective services for the purposes of eligibility at determination?
 No
 Yes
 - iii. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis (658E(c)(5))?
 No
 Yes

- iv. Does the Lead Agency provide respite care to custodial parents of children in protective services?
- No
- Yes

3.1.3 Eligibility criteria based on family income

- a) How does the Lead Agency define “income” for the purposes of eligibility at the point of determination? The total (gross) monthly income received by a child and her/his primary caregivers which is derived from any source except for the following noted below:
- o Income received from the sale of real or personal property (house, car, boat, stocks, bonds) unless the primary caretaker(s) was engaged in the business of selling such property, in which case the net proceeds will be counted as income from self-employment;
 - o Withdrawal from bank deposits;
 - o Money borrowed;
 - o Tax refunds including Renters Rebate and Earned Income Credit;
 - o Public assistance income (such as income received in DCF Economic Services Division's financial assistance programs, including but not limited to Food Stamps, Medicaid, Fuel Assistance, Reach Up, Reach First, and Postsecondary education program payments, General Assistance and Emergency Assistance);
 - o Value of USDA donated foods and home produce consumed by the family;
 - o Wage, salary or other earned income of a person under age 18 living in the household who is not the primary caretaker;
 - o Loans, grants, scholarships or work-study income received for training or education;
 - o Incentive payment for training or education or other programs or activities authorized in a Reach Up plan or other case plan;
 - o Supplemental Security Income (SSI);
 - o Child Support paid out on a regular basis to another household;
 - o Adoption assistance payments under Title IV-E of the Adoption Assistance and Child Welfare Act of 1980 or under the State's Adoptions Assistance Program;
 - o Payments to foster parent(s) from DCF's Family Services Division to subsidize the care and maintenance of a foster child;
 - o Self-employment business expenses other than depreciation charges, Section 179, per current IRS procedures;
 - o Money received from federal and or sponsored programs as stipends; and 1
 - o Military pay for household members deployed on active duty
- b) Provide the CCDF income eligibility limits in the table below. Complete columns (a) and (b) based on maximum eligibility at initial entry into CCDF. Complete columns (c) and (d) *only if*

the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. Fill in the chart based on the most populous area of the state (the area serving the highest number of CCDF children).

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

	(a)	(b)	(c)	(d)
Family Size	100% of SMI (\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum "Entry" Income Level if Lower Than 85% of Current SMI	(IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	3734	3174		
2	4883	4150		
3	6032	5127	5105	84.6
4	7181	6103		
5	8329	7080		

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

- d) SMI source and year LIHEAP Estimates 2018
- e) What was the date that these eligibility limits in column (c) became effective? 9/3/2017
- f) Provide the citation or link, if available, for the income eligibility limits. http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/Sliding_Fee_Scales.pdf

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

- a) Describe how the family member certifies that family assets do not exceed \$1,000,000 (e.g., a checkoff on the CCDF application). Applicant must certify by checking yes or no on Childcare Financial Assistance application.
- b) Does the Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?
 - No.
 - Yes. If yes, please identify the policy or procedure: When Family Services opens a case for a child and is authorizing child care, a Protective Services Authorization (PSA) is

submitted by FSD. Income eligibility is waived, and assistance is provided at 100% of the State established subsidy rates regardless of income for families whose service need is protective services child care.

- 3.1.5 Describe any additional eligibility conditions or priority rules applied by the Lead Agency during eligibility determination or redetermination (98.20(b)). When a child resides with both primary caretakers in the same household, income eligibility is based on the gross income of the primary caretakers whether the individuals are married or parties to a civil union.

When a child in the household is the legal responsibility of one primary caretaker and other children are considered the legal responsibility of both primary caretakers, separate eligibility may be determined based on the income of each primary caretaker individually if the primary caretakers are not married.

In determining eligibility of a family in which a child is residing with only one of his/her primary caretakers and an “unrelated adult”, income eligibility is based on the gross income of the primary caretaker only and the unrelated adult is not considered to be a member of the household.

- 3.1.6 Lead Agencies are required to take into consideration children’s development and promote continuity of care when authorizing child care services (98.21(f); 98.16(h)(6)). Examples include partnering with Head Start, prekindergarten, or other high-quality programs to create a package of arrangements that accommodates parent’s work schedules; providing more intensive case management for families with children with multiple risk factors; and including in the eligibility determination process a question about whether a child has an Individualized Education Program or Individual Family Service Plan. Describe the Lead Agency’s policies and procedures that take into consideration children’s development and learning and that promote continuity of care when authorizing child care services. The Child Development Division may offer financial assistance to families with children who are determined to have a special health need. This is established when the primary caretaker demonstrates that his/her child has a significant health or specialized developmental need as documented by a licensed physician, licensed psychologist, or by the assessment determining eligibility for special education or early intervention services that includes child care as part of the child’s developmental plan (Individual Education Plan, Coordinated Services Plan, Integrated Family Services Plan). Child Care is authorized for a period of 12 months and may be extended, with appropriate documentation, at time of re-determination.

Family Support Child Care may be authorized for primary caretakers and their children. The service need of Family Support is a prevention and early intervention service designed to reduce stress for families and promote positive child development. Child Care Financial Assistance may be authorized after an application and risk assessment is completed by the family and the Children’s Integrated Services Child Care Eligibility Coordinator. Child Care is authorized for 12 months.

3.1.7 Graduated phase-out of assistance.

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

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

- i. 85 percent of SMI for a family of the same size
- ii. An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency’s initial eligibility threshold that:

(A) Takes into account the typical household budget of a low-income family

(B) Provides justification that the second eligibility threshold is:

- (1) Sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability
- (2) Reasonably allows a family to continue accessing child care services without unnecessary disruption.

At redetermination, a child shall be considered eligible if his or her parents are working or attending a job training or educational program even if their income exceeds the Lead Agency’s income limit to initially qualify for assistance as long as their income does not exceed the second tier of eligibility (98.21(a); 98.21(b)(1)).

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

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

- N/A—The Lead Agency sets its initial eligibility level at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- The Lead Agency sets the second eligibility threshold at 85 percent of SMI.
 - Describe the policies and procedures.
 - Provide the citation for this policy or procedure.

- The Lead Agency sets the second eligibility threshold at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold.
 - Provide the second eligibility level for a family of three. [REDACTED]
 - Describe how the second eligibility threshold:
 - i. Takes into account the typical household budget of a low-income family: [REDACTED]
 - ii. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability: [REDACTED]
 - iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption: [REDACTED]
 - iv. Provide the citation for this policy or procedure: [REDACTED]
- b) Does the Lead Agency gradually adjust copays for families eligible under the graduated phase-out period?
 - No
 - Yes
 - i. If yes, describe how the Lead Agency gradually adjusts copays for families under a graduated phase-out. [REDACTED]
 - ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? (Note: Additional reporting requirements are also discussed in section 3.3.3 of the plan.)
 - No.
 - Yes. Describe: [REDACTED]

3.1.8 Fluctuation in earnings.

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

Describe the Lead Agency's policy related to the fluctuation in earnings requirement, including how temporary increases that result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) do not affect eligibility or family copayments. It is the family's responsibility to report any changes that may affect their file (e.g., change in family composition, address change, job loss, termination of educational studies, etc.) during their 12-month eligibility period. If the reported change decreases the financial assistance for the family, no eligibility change is necessary. The child care financial assistance amount remains the same during the 12-month eligibility period. If the change increases the financial assistance for the family, the application must be re-determined immediately to reflect the increase in the eligibility percentage. A family's income must fall on our fee scale to be eligible for Child Care Financial Assistance. If client reports a permanent change in income exceed 85 % of SMI, their

certificate will be terminated. However, if the change is temporary due to seasonal employment or temporary increase in hours no change in eligibility percentage will occur.

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

- X Applicant identity. Describe: Application self-declaration to include name, SSN (optional), address, birthdate. Verify information through direct interface with ESD benefit programs as needed. Required annually.
- X Applicant's relationship to the child. Describe: Application self-declaration - Cross reference with Economic Services Division (ESD) data as needed. Required annually.
- X Child's information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe: Application self-declaration to include name, SSN (optional), address, birthdate. Verify information through direct interface with ESD benefit programs as needed. Required annually.
- X Work. Describe: Request, from applicant, employment verification form, pay stubs, or tax return information. Required at annually.
- X Job training or educational program. Describe: Request, from applicant, school registration and training plan. Letter from training coordinator is also acceptable. Required annually.
- X Family income. Describe: Based upon an individual's service need we request employment verification, pay stubs, contracts, tax returns, and letters from SSA. If needed, child support disbursement statements, or court orders for support are requested. Information may be verified against other benefit programs in ESD. Required annually.
- X Household composition. Describe: Application self-declaration - Cross reference with Economic Services Division (ESD) data for other benefit programs as needed. Required annually.
- X Applicant residence. Describe: Application self-declaration - Cross reference with Economic Services Division (ESD) data for other benefit programs as needed. Required annually.
- X Other. Describe: Communication with other Departments, Division and Programs staff regarding adoption agreements, Reach Up participation, foster care, etc.

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

- X Time limit for making eligibility determinations. Describe length of time Contractual performance measure requirement for Community Child Care Support Agencies (CCCSAs) - 7 business days to initiate determination process and final eligibility determination must be completed within 30 days. Able to track compliance through Bright Futures Information System (BFIS)

- X Track and monitor the eligibility determination process Two State of Vermont Grant Monitors audit the community agency eligibility determinations to ensure that contract performance measures are met.
- Other. Describe
- None

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

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

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

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

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

- a) Identify the TANF agency that established these criteria or definitions: Department for Children and Families, Economic Services Division
- b) Provide the following definitions established by the TANF agency:
 - “Appropriate child care”: An available child care slot with a licensed or registered provider within 5 miles of the parent or caretaker's residence or normal route to a program activity or employment that corresponds to the days and hours care is needed and the age of the child needing care; or the participant or caretaker chooses an Approved Relative Child Care (ARCC) provider who is in compliance with the law over a regulated child care provider.
 - “Reasonable distance”: Located within five miles of the parent or caretaker's residence or on a normal route to a program activity or employment that corresponds to the days and hours care is needed.
 - “Unsuitability of informal child care”: Child care that the Child Development Division (CDD) classifies as Approved Relative Child Care (ARCC), and that a participant or caretaker determines to be unacceptable; and child care that CDD classifies as either a registered family child care home or a licensed child care center, and that a participant or caretaker determines to be unacceptable, when such determination is confirmed by the CDD.
 - “Affordable child care arrangements”: Child care services by a provider that accepts the state subsidy as full payment for services or charges a co-pay above the subsidized rate that the family can pay without hardship.

- c) How are parents who receive TANF benefits informed about the exception to the individual penalties associated with the TANF work requirements?
- In writing
 - Verbally
 - Other. Describe:
- d) Provide the citation for the TANF policy or procedure: 2302.2 Notification - At the time of application for financial assistance and at the time of any redetermination of eligibility, the commissioner will provide each Reach Up participating family with information about the requirement that adults participate in the services component of Reach Up. During the time a family is participating in the financial assistance component, the department shall keep adults informed of factors that affect their required participation in the services component. The department shall notify all applicants and participants, in writing, of the following:
- the individual's participation status
 - a change in participation status
 - the rights and responsibilities associated with the participations status
 - the availability of deferments and modifications to the work requirement
 - the potential sanctions for noncooperation
 - the right to request conciliation
 - the right to a fair hearing for participants who do not agree with the status determination

3.2 Increasing Access for Vulnerable Children and Families

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

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

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

- a) How does the Lead Agency define “children with special needs” and include a description of how services are prioritized: A child significant health or specialized developmental need as documented by a licensed physician or psychologist or by the assessment determining eligibility for special education or early intervention that includes child care as part of the child's plan. CDD reimburses at higher rates for providers receiving specialized training to care for these children. In addition, quality funds are allocated for providers serving these children.

- b) How does the Lead Agency define of “families with very low incomes” and include a description of how services are prioritized: Children eligible for 100% benefit on the CCFAP Sliding Fee Scale. Priority rules in this category also apply to eligible children in families receiving Reach UP (TANF) benefits. Reimburse at higher rates for providers receiving specialized training to care for these children. Provide quality funds for providers serving these children. The State does not impose a co-payment however, if a provider charges more than the subsidy rate, the parent is responsible for the co-payment to the provider. At several Center based and FCC programs across the state, designated as Strengthening Families (SF) Programs, and supported with grant funding to provide comprehensive services, families with 100% benefit are not charged any additional co-payment as a requirement of the SF Grants
- c) Describe how services are prioritized for children experiencing homelessness, as defined by the CCDF: The Child Care Financial Assistance Program (CC FAP) application requests information regarding homelessness status. If client identifies as homeless, the application is forwarded to the Specialized Child Care Coordinator in Children's Integrated Services (CIS) for processing as a Family Support application. Family Support guidelines state that homeless families are automatically approved for child care at 100% of the state's subsidized rate.
- d) Describe how services are prioritized, if applicable, for families receiving TANF program funds, those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF (98.16(i)(4)): TANF families are considered "families with very low income" and are prioritized as described in b above.

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

- a) Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained. The Licensing Unit has established the practice of allowing childcare providers 30 days to obtain the necessary immunizations for children that are homeless or in Foster Care. New rules will also require children's physical exams to be included in the child's file upon entry into a child care program (as of Sept. 2016) but any information required in a child's medical file is subject to the same grace period for homeless and foster children. Licensing Field Specialists have been trained on this grace period for compliance; Resource Development Specialists in CCCSAs are trained on this information and communicate it to child care providers.
- b) Describe the procedures to conduct outreach for children experiencing homelessness (as defined by the CCDF) and their families. Specialized Child Care Coordinators in Children's Integrated Services (CIS) and childcare eligibility specialists in Community Child Care Support Agencies (CCCSAs) work closely with community homeless shelters, faith-based entities, parent-child centers, and child care providers to provide information regarding child care services to homeless families. CCFAP applications and consumer information materials are made available to these organizations so homeless families can quickly apply for services. State district offices in communities also have CCFAP applications and consumer education materials available to provide child care information to homeless families applying for other

benefits and supports. Child care providers are trained on child care financial assistance eligibility guidelines with special emphasis placed on the service need of Family Support for homeless families

Note: The Lead Agency shall pay any amount owed to a child care provider for services provided as a result of the initial eligibility determination, and any CCDF payment made prior to the final eligibility determination shall not be considered an error or improper payment (98.51(a)(1)(ii)).

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

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

- a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:
- Children experiencing homelessness (as defined by CCDF). If a parent discloses that they are homeless, or the provider has information that indicates a family might be homeless, documentation is placed in the child's enrollment file. Licensing staff will use this documentation to the child care program additional time to complete enrollment requirements. If a family is experiencing homelessness does not have immunization records in the registry, the provider will work with the family to obtain the records. If the child is not up-to-date with immunizations, the family will be referred to Help Me Grow for assistance. Documentation of the steps to obtain this information is sufficient until required immunizations have been obtained. Provide the citation for this policy and procedure. Center Based Child Care and Preschool Programs licensing rules in section 5. Family Child Care Home licensing rules in section 5. Vermont Center Based & Preschool Programs Guidance Manual, pages 37-38 and Vermont Family child Care Homes Guidance Manual, pages 46-47, These regulations/guidance manuals may be accessed on DCF's Child Development Division's website (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).
 - Children who are in foster care. The Licensing Unit has established the practice of allowing childcare providers 30 days to obtain the necessary immunizations for children that are in Foster Care. Rule 5.1.2 provides 45 days for the parent to provide documentation from the child's most recent well-care exam.
 - Provide the citation for this policy and procedure. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- b) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements (98.41(a)(1)(i)(C)(4)). Child Care Licensing is part of the Child

Development Division. Child Care Licensing and the Community Child Care Support agencies will refer families to Help Me Grow for assistance with immunizations and other health and safety requirements. Help Me Grow has four primary functions: Family and Community Outreach, Child Health Provider Outreach, Centralized Phone Access Point and Data Collection & Analysis. Help Me Grow Vermont is a statewide system for improving access to existing resources and services for expectant parents and families with young children through age 8

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

No.

Yes. Describe:

3.3 Protection for Working Families

3.3.1 12-Month eligibility.

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

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

- a) Describe the Lead Agency's policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements, including when a family experiences a temporary change in activity. CDD Child Care Financial Assistance Regulation III B Duration of Eligibility states that "Eligibility for child care services based on a Service Need of employment, self-employment, training, special health needs, protective services, or family support will be re-determined annually."

It is the family's responsibility to report any changes that may affect their file (e.g., change in family composition, address change, job loss, termination of educational studies, etc.) during their 12-month eligibility period. If the reported change decreases the financial assistance for the family, no eligibility changes necessary. The child care financial assistance amount remains the same during the 12-month eligibility period. If the change increases the

financial assistance for the family, the application must be re-determined immediately to reflect the increase in the eligibility percentage."

- b) How does the Lead Agency define "temporary change?" No interruption of services will occur based upon a temporary (up to 3 months) change in employment or education participation.
- c) Provide the citation for this policy and/or procedure. Child Care Financial Assistance Program Policies for Service Needs, <http://dcf.vermont.gov/cdd/ccfap-policies>

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

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

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

- a) Does the Lead Agency choose to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss or cessation of eligible activity and offer a minimum 3-month period to allow parents to engage in a job search and to resume participation in an eligible activity?
 - No, the state/territory does not allow this option to discontinue assistance during the 12-month eligibility period due to a parent's *non-temporary* loss of work or cessation of attendance at a job training or educational program.
 - Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:
 - iii. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change: If a client reports that they are no longer employed or in school, they may utilize the service need of Seeking Employment for a period of 3 months. If after 3 months, the client does not have a service need the file may be closed. If during an eligibility period a client reports a permanent change in income and they now exceed 85% SMI, the certificate is terminated one service period from date of notice. An end enrollment notice is sent to both the family and child care provider.

- iv. Describe what specific actions/changes trigger the job-search period. The client reports a change in job status
- v. How long is the job-search period (must be at least 3 months)? 3 months
- vi. Provide the citation for this policy or procedure.
http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/III.ELIGIBILITY_CRITERIA_SEEKING_EMPLOYMENT.pdf

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

- Not applicable.
- Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.
 - i. Define the number of unexplained absences identified as excessive:
 - ii. Provide the citation for this policy or procedure:
- X A change in residency outside of the state, territory, or tribal service area. Provide the citation for this policy or procedure: Child Care Financial Assistance Regulation IIA- Eligibility Criteria
http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/2008_DCF_CDD_Child_Care_Subsidy_Regulations.pdf
- X Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility. Describe the violations that lead to discontinued assistance and provide the citation for this policy or procedure. Child Care Financial Assistance Regulations V-Payment, Adjustments and Recoupment
http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/2008_DCF_CDD_Child_Care_Subsidy_Regulations.pdf

3.3.3 Change reporting during the 12-month eligibility period.

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

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

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

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

- No
- Yes

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

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

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

Describe: Changes in income or family compensation. If the reported change decreases the financial assistance for the family, no eligibility change is necessary unless the change in income is permanent and the family now exceeds 85% SMI. If the change increases the financial assistance for the family, the application must be re-determined immediately to reflect the increase in the eligibility percentage.

Changes that impact the Lead Agency's ability to contact the family. Describe: The family must report, within 10 business days any change in address or phone number.

Changes that impact the Lead Agency's ability to pay child care providers. Describe: The family must contact their Eligibility Specialist to report a change in child care provider. At time of contact, the payment certificate to the old provider is terminated and a payment certificate is created for the new provider.

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

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

- Phone
- Email
- Online forms
- Extended submission hours
- Other. Describe:

d) Families must have the option to voluntarily report changes on an ongoing basis during the 12-month eligibility period.

Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from

acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

- i. Describe any other changes that the Lead Agency allows families to report. A family may report any change in their household circumstance that they feel could result in an increase in their subsidy percentage
- ii. Provide the citation for this policy or procedure. Child Care Financial Assistance Program Policies for Service Needs, <http://dcf.vermont.gov/cdd/ccfap-policies>

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

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

Examples include developing strategies to inform families and their providers of an upcoming redetermination and that information required of the family, pre-populating subsidy renewal forms, having parents confirm that the information is accurate, and/or asking only for the information necessary to make an eligibility redetermination. In addition, states and territories can offer a variety of family-friendly methods for submitting documentation for eligibility redetermination.

- a) Describe the Lead Agency's procedures and policies to ensure that parents (especially parents receiving TANF program funds) do not have their employment, education, or job training unduly disrupted to comply with the state/territory's or designated local entity's requirements for the redetermination of eligibility. List relevant policy citations. http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/2008_DCF_CDD_Child_Care_Subsidy_Regulations.pdf
- b) How are families allowed to submit documentation for redetermination? Check all that apply.
 - Mail
 - Email
 - Online forms
 - Fax
 - In-person
 - Extended submission hours
 - Other. Describe:

3.4 Family Contribution to Payments

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

Note: To help families transition off of child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. However, section 3.4 applies *only* to families in their initial/entry eligibility period. See section 3.1.4 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

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

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

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Lowest “Entry” Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?	The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?	Highest “Entry” Income Level Before a Family Is No Longer Eligible	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?	The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?
1	1770	1.33	0.1%	5105	120.14	2.4%
2	1770	1.33	0.1%	5105	120.14	2.4%
3	1770	1.33	0.1%	5105	120.14	2.4%
4	2130	1.33	0.1%	6150	120.14	2.0%
5	2492	1.33	0.1%	7195	120.14	1.7%

b) What is the effective date of the sliding-fee scale(s)? September 3, 2017

c) Provide the link to the sliding-fee scale:
http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/Sliding_Fee_Scales.pdf

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

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

- The fee is a dollar amount and:
 - The fee is per child, with the same fee for each child.
 - The fee is per child and is discounted for two or more children.
 - The fee is per child up to a maximum per family.

- No additional fee is charged after certain number of children.
 - The fee is per family.
 - The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe:
 - Other. Describe: The families benefit level is assigned in accord with Vermont's sliding fee scale. Benefit level ranges from 100% at 100% FPL to 10% at 200% FPL. Family contribution is calculated for each eligible child as that percent of the state rate that the Child Care Financial Assistance Program (CC FAP) benefit does not cover. For example, a family at 100% FPL with 100% benefit is not assigned a contribution - CCFAP pays the full state rate including the quality differential determined by the provider's level in the QRIS (Vermont STARS). A family with a 25% benefit is assigned 25% of the state rate for that child - CC FAP pays 75% of the rate which includes the quality differential determined by the provider's level in the QRIS
- The fee is a percent of income and:
- The fee is per child, with the same percentage applied for each child.
 - The fee is per child, and a discounted percentage is applied for two or more children.
 - The fee is per child up to a maximum per family.
 - No additional percentage is charged after certain number of children.
 - The fee is per family.
 - The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe:
 - Other. Describe:
- 3.4.3 Does the Lead Agency use other factors in addition to income and family size to determine each family's co-payment (658E(c)(3)(B))? Reminder – Lead Agencies may NOT use cost of care or amount of subsidy payment in determining copayments (98.45(k)(2)).
- No.
- Yes, check and describe those additional factors below.
- Number of hours the child is in care. Describe:
- a) Lower co-payments for a higher quality of care, as defined by the state/territory. Describe: Vermont's sliding fee scale payment rate is set with a base rate and pays a higher rate on behalf of families based on the number of stars (QRIS) the program has. 1 Star programs receive 5% above the base rate; 2 Star programs receive 10% above the base rate; 3 Star programs receive 20% above the base rate; 4 Star programs receive 30% above the base rate; 5 Star programs receive 40% above the base rate.
- Other. Describe:
- 3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.45(k)) or for families who are receiving or needing to receive protective services, as determined for purposes of CCDF eligibility, or who meet other criteria established by the Lead Agency (98.45(k)(4)). Does the Lead Agency waive family contributions/co-payments for any of the following? Check all that apply.

- No, the Lead Agency does not waive family contributions/co-payments.
- Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the poverty level for families of the same size. The poverty level used by the Lead Agency for a family size of 3 is \$ [REDACTED].
- Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility. Describe the policy and provide the policy citation.
The Child Care Financial Assistance (CCFAP) program will make full payment for child care services delivered to foster children where the FS social worker has determined the need for services. Licensed providers caring for these children may be reimbursed at the provider rate recorded in the Bright Futures Information System (BFIS).
http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/V.CIS_PROTECTIVE_SERVICES.pdf
- Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency. Describe the policy and provide the policy citation. [REDACTED].

3.4.5 Does the Lead Agency allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

- No.
- Yes. If yes:
 - a) Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families? [REDACTED]
 - b) Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families. [REDACTED]
 - c) Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees. [REDACTED]

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

- Limit the maximum co-payment per family. Describe: [REDACTED]
- Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and describe. [REDACTED]
- Minimize the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5. Describe: Vermont has established a sliding fee scale based on family size and income that expresses a child's subsidy benefit as a percent of the state rate. Such a sliding fee scale creates a gradual reduction in dependence on subsidy that supports parents trying to achieve independence from public assistance (an identified purpose in the Act). Vermont's sliding fee scale is intended to identify and mitigate the benefit cliff low income families face as their incomes rise.
- Other. Describe: [REDACTED]

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

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care or care provided in the child's own home. In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care.

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

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

- 4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)).
The child care certificate is issued after the parent has selected a provider. It contains information on the provider rate, CDD base rate, STARS Quality Factor, and total CDD rate paid to provider. In addition, it contains hours authorized (part time, full time, or extended care), the subsidy percentage, name and address of provider, name and phone number of eligibility specialists and how to appeal the decision if they are not satisfied.
- 4.1.2 Describe how the parent is informed that the child certificate allows the option to choose from a variety of child care categories, such as private, not-for-profit, faith-based providers; centers; FCC homes; or in-home providers (658E(c)(2)(A)(i); 658P(2); 658Q). Check all that apply.
- Certificate that provides information about the choice of providers
 - Certificate that provides information about the quality of providers
 - Certificate not linked to a specific provider, so parents can choose any provider
 - Consumer education materials on choosing child care
 - Referral to child care resource and referral agencies
 - Co-located resource and referral in eligibility offices
 - Verbal communication at the time of the application

- Community outreach, workshops, or other in-person activities
- Other. Describe: The Child Development Division enters into and monitors performance-based agreements with Community Child Care Support Agencies to provide personalized consumer education and referral services to all families with particular focus on families applying for CCDF assistance. Referral specialists in these agencies can advise subsidized families of Strengthening Families Center programs in their area where grants are in place to minimize co-payments for subsidized families.

4.1.3 Child care services available through grants or contracts.

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

No. If no, skip to 4.1.4.

Yes. If yes, describe:

- i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider: Parents can choose any type of provider when selecting care. The contracts we provide are for the providers that serve high risk populations of children and pay the provider when a child has inconsistent attendance due to homelessness or other issues. The provider receives and participates in the Child Care Financial Assistance program in the same way as all other providers when the child attends the program.
- ii. The type(s) of child care services available through grants or contracts: The contracts are with Parent Child Centers that offer center-based child care and also home visiting and other family support services.
- iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers): Parent Child Centers
- iv. The process for accessing grants or contracts: The parent child center must request the contract at the beginning of the state fiscal year.
- v. How rates for contracted slots are set through grants and contracts: The rates are the same rate as the Child Care Financial Assistance Rate for all center-based child care programs with the STARS quality factor.
- vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality: These contracts are specifically to provide stable child care options for families at high risk and who require multiple family supports. These contracts are not targeted to increasing supply.
- vii. If contracts are offered statewide and/or locally: There are 15 parent child centers across the state that could participate in the program. Currently 7 parent child centers participate.

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

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

4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds (658E(c)(2)(B); 98.16(t)). Center Based Child Care and Preschool Programs licensing rule 4.2. Family Child Care Home licensing rule 4.2. Afterschool Child Care Programs licensing rule 3.9.

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

- No.
- Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.
 - Restricted based on minimum the number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements. Describe:

Restricted based on the provider meeting a minimum age requirement. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2). Describe: A relative of the child must be at least 18 years of age per the Child Care Financial Assistance Approved Relative Child Care Provider Requirements

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

Restricted to care by relatives. Describe: A relative of children receiving Child Care Financial Assistance per the Child Care Financial Assistance Approved Relative Child Care Provider Requirements.

- Restricted to care for children with special needs or a medical condition. Describe:
- Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF. Describe:
- Other. Describe:

4.2 Assessing Market Rates and Child Care Costs

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

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

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

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

XX MRS

Alternative methodology. Describe:

Both. Describe:

- 4.2.2 Prior to developing and conducting the MRS or alternative methodology, the Lead Agency is required to consult with the (1) State Advisory Council or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities and (2) organizations representing caregivers, teachers, and directors prior to developing and conducting the MRS or alternative methodology.

Describe how the Lead Agency consulted with the:

- a) State Advisory Council or other state-designated cross-agency body: The Department for Children and Families, Child Development Division (CDD) has collected feedback on the survey through participation on statewide community committees focused on early childhood and family support systems in Vermont. Members of the Vermont Building Bright Futures (BBF) Data and Evaluation Committee provided feedback that the methodology of the survey was appropriate, however they requested the report include data on the market rates by areas of state, including by county. This report summarizes the child care market rate data for the entire state of Vermont, the twelve Vermont Agency of Human Services districts, and the fourteen counties in Vermont to be responsive to this request.
- b) Local child care program administrators: The State's Advisory Council, Building Bright Futures (BBF) represents many aspects of the child care and early care field in Vermont including resource and referral agencies, parents, teachers and program administrators, and consultation was through BBF.
- c) Local child care resource and referral agencies: The State's Advisory Council, Building Bright Futures (BBF) represents many aspects of the child care and early care field in Vermont including resource and referral agencies, parents, teachers and program administrators, and consultation was through BBF.
- d) Organizations representing caregivers, teachers, and directors: The State's Advisory Council, Building Bright Futures (BBF) represents many aspects of the child care and early care field in Vermont including resource and referral agencies, parents, teachers and program administrators, and consultation was through BBF.
- e) Other. Describe:

- 4.2.3 Describe how the market rate survey is statistically valid and reliable. To be considered valid and reliable, the MRS must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variations, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data, such as child care resource and referral data, if they are representative of the market. If an alternative methodology, such as cost modeling, is used, demonstrate that the methodology used reliable methods. The data for this market rate survey was collected from the state's Bright Futures Information System (BFIS). The Department for Children and Families (DCF) recognizes that child care programs charge in a variety of different ways, and rates also differ based on available discounts from the program. To gather valid data that is statically comparable, child care programs are asked to report their rates to DCF in several price modes (please see definitions for details on the price modes): part time weekly, full time weekly and extended care weekly. These modes are broken down into four age groups – infant, toddler,

preschool and school age, and by provider type: licensed and registered. These price modes match the CCFAP system of eligibility and payment for child care programs. Child care programs are asked to convert their own rates to the price modes paid through the CCFAP system. They are given the guidance to record the rate to accurately represent what a parent who is not eligible for CCFAP would pay for the price mode based on the age category and number of hours the child attends the program. Programs that do not charge for their services are encouraged to submit their rates as zero, so their information can appropriately be excluded from the Market Rate Survey.

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

- a) Geographic area (e.g., statewide or local markets). Describe: Average, 50th percentile and 75th percentile is available statewide, by Agency of Human Services service area, and county.
- b) Type of provider. Describe: Available by licensed child care which includes center-based child care and preschool programs, licensed family child care home and afterschool programs, and by registered home.
- c) Age of child. Describe: Available by infants which is children 6 weeks to their 2nd birthday, toddlers which is children who are 2 years old but have not reached their third birthday; preschool age which are children who are 3 to 5 years old up to their sixth birthday; and school age which is 6 years to 13 years, and up to 19 years for children who have special needs.
- d) Describe any other key variations examined by the market rate survey or alternative methodology, such as quality level. The data was also examined by STARS level, summary data is available in the report.

4.2.5 After conducting the market rate survey or alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or alternative methodology. The detailed report must also include the estimated cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. The Lead Agency must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Lead Agency website. The Lead Agency must describe in the detailed report how the Lead Agency took into consideration the views and comments of the public.

Describe how the Lead Agency made the results of the market rate survey or alternative methodology report widely available to the public (98.45(f)(1)). The report is available to the public here: <http://dcf.vermont.gov/cdd/reports> also an email went out to the division's email list of individuals and organizations interested in division news.

- a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). April 1, 2018
- b) Date the report containing results was made widely available—no later than 30 days after the completion of the report. May 1, 2018
- c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted. The report is available to the public here: <http://dcf.vermont.gov/cdd/reports> also an email went out to the division's email list of individuals and organizations interested in division news.
- d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report. The Department for Children and Families, Child Development Division (CDD) has collected feedback on the survey through participation on statewide community committees focused on early childhood and family support systems in Vermont. Members of the Vermont Building Bright Futures (BBF) Data and Evaluation Committee provided feedback that the methodology of the survey was appropriate, however they requested the report include data on the market rates by areas of state, including by county. This report summarizes the child care market rate data for the entire state of Vermont, the twelve Vermont Agency of Human Services districts, and the fourteen counties in Vermont to be responsive to this request.

4.3 Setting Payment Rates

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

- 4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS) for the following categories below. If the Lead Agency conducted an MRS (only or in combination with an alternative methodology), also report the percentiles based on the most recent MRS. The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. Please use the most populous geographic region (area serving highest number of CCDF children).

- a) Infant (6 months), full-time licensed center care in the most populous geographic region
Rate \$ 150.36 per week unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 0.93
- b) Infant (6 months), full-time licensed FCC home in the most populous geographic region
Rate \$ 121.25 per week unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 1.21
- c) Toddler (18 months), full-time licensed center care in the most populous geographic region
Rate \$ 150.36 per week unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 0.93

- d) Toddler (18 months), full-time licensed FCC care in the most populous geographic region
Rate \$121.25 per week unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 1.21
- e) Preschooler (4 years), full-time licensed center care in the most populous geographic region
Rate \$133.49 per week unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 3.30
- f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region
Rate \$101.83 per week unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 1.56
- g) School-age child (6 years), full-time licensed center care in most populous geographic region
Rate \$129.48 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile of most recent MRS: 17.53
- h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region
Rate \$97.99 per week unit of time (e.g., hourly, daily, weekly, monthly)
Percentile of most recent MRS: 7.38
- i) Describe how part-time and full-time care were defined and calculated. Part time is 25 hours per week or less, full time is between 26 and 50 per week.
- j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). 8/21/2016
- k) Provide the citation or link, if available, to the payment rates.
http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/CCFAP_Rate_Schedule_Effective_August_2016.pdf
- l) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).

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

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

- Differential rate for *non-traditional hours*. Describe: Extended care which is defined as 51 hours or more is paid a differential rate that is 36% higher than the full-time rate for that age child and type of program

- Differential rate for *children with special needs*, as defined by the state/territory. Describe: Providers who care for children with special needs and have been approved as a specialized child care provider receive a 7% differential that is calculated on the rate the child receives.
- Differential rate for *infants and toddlers*. Describe:
- Differential rate for *school-age programs*. Describe:
- Differential rate for *higher quality*, as defined by the state/territory. Describe: Providers participating in STARS receive a differential rate determined by the number of STARS the program has achieved. 5% differential for one star, 10% differential for two stars, 20% differential for three stars; 30% differential for four stars and 40% differential for 5 stars.
- Other differential rates or tiered rates. Describe:
- Tiered or differential rates are not implemented.

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

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

- b) Describe how a choice of the full range of providers pursuant to 98.30(e)(1) is made available; the extent to which child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices Child care financial assistance payments are available to all regulated child care programs that charge for their services. Rates are set based on the 75th percentile of the Market Rate Survey, which breaks down the difference in rates between licensed programs and registered family child care homes. This allows families to have access to all types of regulated programs equally.
- c) Describe how payment rates are adequate and have been established based on the most recent MRS or alternative methodology
- d) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF
- e) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. The payment rate is set with a base rate and pays a higher rate on behalf of families based on the number of stars (QRIS) the program has. 1 Star programs receive 5% above the base rate; 2 Star programs receive 10% above the base rate; 3 Star programs receive 20% above the base rate; 4 Star programs receive 30% above the base rate; 5 Star programs receive 40% above the base rate.
- f) How co-payments based on a sliding fee scale reported in 3.4.1 are affordable (response provided in 3.4.6)
- g) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers
- h) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.
 - Geographic area. Describe:

- X Type of provider. Describe: Rates are set by licensed type, registered type, and a separate rate for Approved Relative Child Care
 - X Age of child. Describe: Rates are paid based on the age of the child. Infants are children birth to the 2nd birthday, toddlers are 2-year-old to their third birthday; preschool is age 3 years old to the 6th birthday; and school age is 6 years and to the 14th birthday; and special needs children up to age 19.
 - X Quality level. Describe: 1 Star programs receive 5% above the base rate; 2 Star programs receive 10% above the base rate; 3 Star programs receive 20% above the base rate; 4 Star programs receive 30% above the base rate; 5 Star programs receive 40% above the base rate.
 - X Other. Schedule
- i) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access:
- Payment rates are set at the 75th percentile or higher of the most recent survey. Describe:
 - Feedback from parents, including parent surveys or parental complaints. Describe:
 - Other. Describe:

4.5 Payment Practices and the Timeliness of Payments

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

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

In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family’s eligibility status that could impact

payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(l)(4) through (6); 658E(c)(2)(S)(ii); 98.45(l)(4); 98.45(l)(5); 98.45(l)(6)).

4.5.1 Certify by describing the payment practices that the Lead Agency has implemented for all CCDF child care providers,

- a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):
- Paying prospectively prior to the delivery of services. If implemented describe the policy or procedure. [REDACTED]
 - Paying within no more than 21 calendar days of the receipt of a complete invoice for services. If implemented describe the policy or procedure. Child care providers can bill for the services provided every two weeks, with the payment happening within one week of billing.
- b) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by:
- Paying based on a child's enrollment rather than attendance. If implemented describe the policy or procedure. Providers are paid on the weekly amount approved by either attendance of the child or a code to represent the reason for the absence
 - Providing full payment if a child attends at least 85 percent of the authorized time. If implemented describe the policy or procedure. [REDACTED]
 - Providing full payment if a child is absent for 5 or fewer days in a month. If implemented describe the policy or procedure. [REDACTED]
 - Use an alternative approach for which the Lead Agency provides a justification in its Plan. If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach. [REDACTED]
- c) Reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies, which must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)). [REDACTED]
- Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time). Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time). Payment is made on a part time, full time or extended care schedule, and payment is made if the child attends at least one hour or code is used for an absence.
 - Paying for reasonable mandatory registration fees that the provider charges to private-paying parents. Describe the policy or procedure. [REDACTED]
- d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe: Providers must complete a payment agreement at minimum once every two years to receive Child Care Financial

Assistance. The agreement is available here:

[http://dcf.vermont.gov/sites/dcf/files/CDD/Forms/Financial Agreement Part 1.pdf](http://dcf.vermont.gov/sites/dcf/files/CDD/Forms/Financial%20Agreement%20Part%201.pdf)

- e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur. Describe:
- f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

4.5.2 Do payment practices vary across regions, counties, and/or geographic areas?

- No, the practices do not vary across areas.
- Yes, the practices vary across areas. Describe:

4.6 Supply-Building Strategies To Meet the Needs of Certain Populations

Lead Agencies are required to develop and implement strategies to increase the supply of and to improve the quality of child care services for children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours (658 E(c)(2)(M); 98.16 (x)).

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

- a) Children in underserved areas: In Vermont there is an overall shortage of child care options for all types. The data used is from the Bright Futures Information System (BFIS) child care licensing information and child care referral information, in addition to the U.S. Census data.
- b) Infants and toddlers: In Vermont there is an overall shortage of child care options for all types. The data used is from the Bright Futures Information System (BFIS) child care licensing information and child care referral information, in addition to the U.S. Census data.
- c) Children with disabilities (include the Lead Agency definition in the description): In Vermont there is an overall shortage of child care options for all types. The data used is from the Bright Futures Information System (BFIS) child care licensing information and child care referral information, in addition to the U.S. Census data.
- d) Children who received care during non-traditional hours: In Vermont there is an overall shortage of child care options for all types. The data used is from the Bright Futures Information System (BFIS) child care licensing information and child care referral information, in addition to the U.S. Census data.
- e) Other. Please describe any other shortages in the supply of high-quality providers. In Vermont there is an overall shortage of child care options for all types. The data used is from the Bright Futures Information System (BFIS) child care licensing information and child care referral information, in addition to the U.S. Census data.

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

- a) Infants and toddlers. Check all that apply.

- Grants and contracts (as discussed in 4.1.3)
- Family child care networks
- Start-up funding
- Technical assistance support
- Recruitment of providers
- Tiered payment rates (as discussed in 4.3.2)
- Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
- Other. Describe: The division created a coalition of stakeholders to look at this issue, and the coalition's determined strategies and resources available to increase the supply of child care. The work of that coalition is now being executed by the Early Learning and Development Subcommittee of the statewide public private organization, Building Bright Futures. Strategies include a recruitment campaign, grants from a private partner to expand options, and business supports from other private and public partners.

b) Children with disabilities. Check all that apply.

- Grants and contracts (as discussed in 4.1.3)
- Family child care networks
- Start-up funding
- Technical assistance support
- Recruitment of providers
- Tiered payment rates (as discussed in 4.3.2)
- Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
- Other. Describe: The division created a coalition of stakeholders to look at this issue, and the coalition's determined strategies and resources available to increase the supply of child care. The work of that coalition is now being executed by the Early Learning and Development Subcommittee of the statewide public private organization, Building Bright Futures. Strategies include a recruitment campaign, grants from a private partner to expand options, and business supports from other private and public partners.

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

- Grants and contracts (as discussed in 4.1.3)
- Family child care networks
- Start-up funding
- Technical assistance support
- Recruitment of providers
- Tiered payment rates (as discussed in 4.3.2)
- Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
- Other. Describe: The division created a coalition of stakeholders to look at this issue, and the coalition's determined strategies and resources available to increase the supply

of child care. The work of that coalition is now being executed by the Early Learning and Development Subcommittee of the statewide public private organization, Building Bright Futures. Strategies include a recruitment campaign, grants from a private partner to expand options, and business supports from other private and public partners.

d) Other. Check and describe:

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

4.6.3 Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs.

- a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment? After an assessment of the needs across the state there is a significant need for increasing access to high-quality care in all areas of the state, and at this point no area has been excluded from investments due to the need.
- b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs. After an assessment of the needs across the state there is a significant need for increasing access to high-quality care in all areas of the state, and at this point no area has been excluded from investments due to the need.

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

Lead Agencies are required to certify that there are in effect licensing requirements applicable to child care services in the state/territory. States and territories may allow licensing exemptions, but they must describe how such exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care. Lead Agencies also must certify that there are in effect health and safety requirements applicable to providers serving CCDF children. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures to ensure that providers are complying with the health and safety requirements.

This section covers licensing requirements, health and safety requirements and training, and monitoring and enforcement procedures to ensure that child care providers comply with licensing and health and safety requirements (98.16(n)) as well as exemptions (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)). Criminal background check requirements are included in this section (98.16(o)).

5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of CCDF providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.409(a)(2)(iv)).

5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory and note if providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E(c)(2)(F); 98.40(a)(2)). DCF's Child Development Division has 3 sets of regulations (Center Based Child Care and Preschool Programs, Family Child Care Home, and Afterschool Child Care Programs). The 3 sets of regulations may be accessed on DCF's Child Development Division's website (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). Vermont statute requires child care providers to be licensed by DCF's Child Development Division unless identified exemption criteria apply. See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>). Licensing rule 2.1.2 in Center Based Child Care and Preschool Programs Regulations allow for exemptions in addition to Vermont statute (http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/Licensing/CBCCPP_Regulations_FINAL.pdf). Any program that wants to participate in CCDF is required to become licensed and follow all licensing regulations and processes. In the situations in which exemption from being licensed exists, programs have either another oversight entity or the time that children are present is limited minimizing level of risk.

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

- X Center-based child care. Provide a citation: <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- X Family child care. Provide a citation: <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- In-home care. Provide a citation:

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

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

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

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

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.1 Standards on ratios, group sizes, and qualifications for CCDF providers.

Lead Agencies are required to establish child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories.

a) Licensed CCDF center-based care

1. Infant

- How does the State/territory define infant (age range): a child who is at least six (6) weeks and under thirteen (13) months of age
- Ratio: 1:4
- Group size: 8
- Teacher/caregiver qualifications: See Center Based Child Care and Preschool Programs licensing rules 7.3.2.1 - 7.3.2.4 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). To determine when various qualifications apply, see licensing rule 6.2.1.4 and the licensing rules in section 6.2.4.

2. Toddler

- How does the State/territory define toddler (age range): a child between thirteen (13) through thirty-five (35) months of age
- Ratio: For 13mos to 30mos, 1:4. For 30mos to 35mos, 1:5.
- Group size: For 13mos to 18mos, 8. For 18mos to 35mos, 10.
- Teacher/caregiver qualifications: See Center Based Child Care and Preschool Programs licensing rules 7.3.2.1 - 7.3.2.4 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). To determine when various qualifications apply, see licensing rule 6.2.1.4 and the licensing rules in section 6.2.4.

3. Preschool

- How does the State/territory define preschool (age range): a child who is thirty-six (36) months of age up until school age
 - Ratio: 1:10
 - Group size: 20
 - Teacher/caregiver qualifications: See Center Based Child Care and Preschool Programs licensing rules 7.3.2.1 - 7.3.2.4 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). To determine when various qualifications apply, see licensing rule 6.2.1.4 and the licensing rules in section 6.2.4.
4. School-age
- How does the State/territory define school-age (age range): a child who is five (5) years of age or older and currently attending kindergarten or has completed kindergarten or a higher grade
 - Ratio: 1:13
 - Group size: 26
 - Teacher/caregiver qualifications: See Center Based Child Care and Preschool Programs licensing rules 7.3.2.1 - 7.3.2.4 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). To determine when various qualifications apply, see licensing rule 6.2.1.4 and the licensing rules in section 6.2.4.
5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers. Not applicable
6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups. See Center Based Child Care and Preschool Programs licensing rule 6.2.2 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
7. Describe the director qualifications for licensed CCDF center-based care. See Center Based Child Care and Preschool Programs licensing rules in section 7.3.1 and in section 7.3.2 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
- b) Licensed CCDF family child care provider (FCCP)
1. Infant
- How does the State/territory define infant (age range): a child who is at least six (6) weeks and under thirteen (13) months of age
 - Ratio: See the charts in Family Child Care Home licensing rules 6.2.1.5 – 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Group size: See the charts in Family Child Care Home licensing rules 6.2.1.5 – 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Teacher/caregiver qualifications: See Family Child Care Home licensing rules 7.3.1 and 7.3.3 apply to registered FCCPs and Family Child Care Home licensing rules 7.3.2 and 7.3.3 apply to licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).
2. Toddler

- How does the State/territory define toddler (age range): a child between thirteen (13) through thirty-five (35) months of age
 - Ratio: See the charts in Family Child Care Home licensing rules 6.2.1.5 – 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Group size: See the charts in Family Child Care Home licensing rules 6.2.1.5 – 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Teacher/caregiver qualifications: See Family Child Care Home licensing rules 7.3.1 and 7.3.3 apply to registered FCCPs and Family Child Care Home licensing rules 7.3.2 and 7.3.3 apply to licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).
3. Preschool
- How does the State/territory define preschool (age range): a child who is thirty-six (36) months of age up until school age
 - Ratio: See the charts in Family Child Care Home licensing rules 6.2.1.5 – 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Group size: See the charts in Family Child Care Home licensing rules 6.2.1.5 – 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Teacher/caregiver qualifications: See Family Child Care Home licensing rules 7.3.1 and 7.3.3 apply to registered FCCPs and Family Child Care Home licensing rules 7.3.2 and 7.3.3 apply to licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).
4. School-age
- How does the State/territory define school-age (age range): a child who is five (5) years of age or older and currently attending kindergarten or has completed kindergarten or a higher grade
 - Ratio: See the charts in Family Child Care Home licensing rules 6.2.1.5 – 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Group size: See the charts in Family Child Care Home licensing rules 6.2.1.5 – 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Teacher/caregiver qualifications: See Family Child Care Home licensing rules 7.3.1 and 7.3.3 apply to registered FCCPs and Family Child Care Home licensing rules 7.3.2 and 7.3.3 apply to licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes. Not applicable

c) In-home CCDF providers:

1. Describe the ratios. Vermont statute allows unregulated child care. The limit is on the number of families versus the number of children and states unregulated child care may be provided for 1 or 2 families. Unregulated child care is only approved for children in the care of a relative (aunt, uncle, grandparent, great grandparent or sibling living outside of the child's home) See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>).
2. Describe the group size. Vermont statute allows unregulated child care. The limit is on the number of families versus the number of children and states unregulated child care may be provided for 1 or 2 families. Unregulated child care is only approved for children in the care of a relative (aunt, uncle, grandparent, great grandparent or sibling living outside of the child's home). See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>).
3. Describe the threshold for when licensing is required. Vermont statute allows unregulated child care. The limit is on the number of families versus the number of children and states unregulated child care may be provided for 1 or 2 families. Unregulated child care is only approved for children in the care of a relative (aunt, uncle, grandparent, great grandparent or sibling living outside of the child's home). See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>).
4. Describe the maximum number of children that are allowed in the home at any one time. Vermont statute allows unregulated child care. The limit is on the number of families versus the number of children and states unregulated child care may be provided for 1 or 2 families. Unregulated child care is only approved for children in the care of a relative (aunt, uncle, grandparent, great grandparent or sibling living outside of the child's home). See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>).
5. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size. Vermont statute allows unregulated child care. The limit is on the number of families versus the number of children and states unregulated child care may be provided for 1 or 2 families. Unregulated child care is only approved for children in the care of a relative (aunt, uncle, grandparent, great grandparent or sibling living outside of the child's home). See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>).
6. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day. Vermont statute allows unregulated child care. The limit is on the number of families versus the number of children and states unregulated child care may be provided for 1 or 2 families. Unregulated child care is only approved for children in the care of a relative (aunt, uncle, grandparent, great grandparent or sibling living outside of the child's home). See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>).

5.2.2 Health and safety standards for CCDF providers.

States and territories must establish health and safety standards for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the

topics listed below, as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care providers receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives because Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)).

To certify, describe how the following health and safety standards for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(l)). Note – This question is different from the health and safety training requirements, which are addressed in question 5.2.3.

1. Prevention and control of infectious diseases (including immunization)

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) For prevention, the standard is those practices that promote children's health which includes cleaning practices, immunizations, diapering protocols, and handwashing. The licensing rules take into account children's ages and accommodations needed for children with special needs. For managing infectious diseases, the standard is to engage in practices that minimize the spreading of contagious illnesses which includes program policies for managing infectious illnesses, daily health checks, exclusion criteria for sick children, practices for responding to sick children, and standard precautions for handling bodily fluids.
- List the citation for these requirements. Center Based Child Care and Preschool Program and Family Child Care Home rules in section 5.1, 5.2.1, 5.2.3, 5.2.6, 5.3, and rules 5.2.2.3 – 5.2.2.4, 5.2.4.4, and 5.2.5. Afterschool Child Care Program rules 10.6, 13.1, and 13.5 – 13.16. (citation for accessing these regulations: <http://dcf.vermont.gov/cdd/laws-regs/childcare>)
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). Daily health checks are not required in Afterschool Child Care Program regulations. Diapering regulations are also not included in Afterschool Child Care Program regulations. Otherwise, the regulations have similar, if not the same, rules pertaining to prevention and control of infectious diseases.
- Describe any variations based on the age of the children in care. All three regulations have licensing rules requiring staff assist children with hand washing as needed and make accommodations based on children's special needs.
- Describe if relatives are exempt from this requirement. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement.

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

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) Safe-sleep practices are those actions that increase infants (under 12 months of age) safety while they sleep which

reduces the risk of sudden infant deaths. These actions/practices include placing infants on their back to sleep; not placing blankets, pillows, soft objects, and etcetera with an infant; transferring an infant who has fallen asleep in a swing or car seat into a crib to sleep on his/her back; no objects around the infant's neck while sleeping (e.g. bib); no cords on objects with a sleeping infant (e.g. no cord on a pacifier); and no positional devices. Center Based Child Care and Preschool Program and Family Child Care Home rules in section 5.4.2.

- List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **No variations**
- Describe any variations based on the age of the children in care. **Same rules for all infants under 12 months of age.**
- Describe if relatives are exempt from this requirement. **Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement**

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

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **There are protective regulations such as proper labeling with a child's name, discarding of expired medications, and etcetera. There are also safety regulations such as training for staff administering medications, where medications are stored, and etcetera. Then there are regulations that require parental permission. Center Based Child Care and Preschool Program rules in section 5.6 and rules 3.4.6.3 and 5.7.3. Family Child Care Home rules in section 5.6 and rules in 3.3.6.3 and 5.7.3. Afterschool Child Care Program rules 10.3 – 10.4 and 10.7.**
- List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **In Afterschool Child Care Program regulations, the licensing rule requires being trained to provide medication versus the other 2 sets of regulations in which staff who administer medication are required to complete a specific training for medication administration.**
- Describe any variations based on the age of the children in care. **No significant variations.**
- Describe if relatives are exempt from this requirement. **Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. The requirements state that the provider shall obtain written permission from the parent authorizing (1) emergency medical care for child(ren) and (2) prior to giving medication to child(ren)**

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

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **This is defined as regulations that protect**

children with food allergies and food related injuries as well as regulations that identify how the program and staff are prepared to handle unexpected situations related to food allergies and food related injuries. These regulations include written program procedures, information sharing, providing alternative foods, knowing how to respond in an emergency, supervision during meal and snack times, and etcetera. Center Based Child Care and Preschool Program rules 5.11.6.10, 6.2.6.3 and 6.3.4 and the rules in section 5.11.8. Family Child Care Home rules 5.11.6.10, 6.2.4.5, and 6.3.4 and the rules in section 5.11.8. Afterschool Child Care Program rule 8.8, 14.7, and 15.6 – 15.7.

- List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
 - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). Afterschool Child Care Programs do not have a licensing rule that says "Foods for infants shall be of a texture and consistency that promotes safe consumption and reduces the risk of choking" like Center Based Child Care and Preschool Program and Family Child Care Home regulations. Nor does this set of regulations have a specific rule about maintaining supervision of children when they are eating.
 - Describe any variations based on the age of the children in care. Center Based Child Care and Preschool Program and Family Child Care Home regulations have rule 5.11.6.10 related specifically to infants and not for older age groups of children.
 - Describe if relatives are exempt from this requirement. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement
5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic
- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) There are a variety of licensing rules across the regulations that address indoor and outdoor safety and maintenance of the child care building/home, premises, and toys/materials. Also, there are licensing rules for safe transportation, swimming, food preparation and storage, management of pest control, fire safety, drinking water safety, lead and asbestos safety and etcetera. DCF's Child Development Division worked with Division of Fire Safety, Agency of Natural Resources, and Vermont Department of Health to identify child care licensing regulations that ensured child safety across environments and for children of all ages. See rules within the health and safety and application sections within all 3 sets of regulations.
 - List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
 - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). Licensed programs including licensed Family Child Care Homes must adhere to Division of Fire Safety regulations. Division of Fire Safety does not have jurisdiction over Registered Family Child Care Homes. There are regulations for Registered Family Child Care

Homes that address safety elements as identified by Division of Fire Safety to ensure the same level of safety across environments. Agency of Natural Resources does not have jurisdiction over Registered Family Child Care Homes and water testing requirements do not exist for those water systems that aren't required to have Agency of Natural Resource water permits. As such, Agency of Natural Resources assisted the Child Development Division with writing and implementing child care licensing regulations that required water testing standards for Center Based Child Care and Preschool Programs and for Family Child Care Homes. These same water testing standards only apply to Afterschool Child Care Programs required to obtain water permits from the Agency of Natural Resources. Because of the size of Registered Family Child Care Home programs (small family child care homes), there isn't the same licensing rule that requires a specific amount of indoor and outdoor square footage per child.

- Describe any variations based on the age of the children in care. Not applicable.
- Describe if relatives are exempt from this requirement. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. The requirements state that the provider shall protect the children from any and all conditions which threaten the children's health, safety and well-being. This includes but is not limited to access to stoves, pools, poisons, well, known vicious animals, weapons, medications, toxic chemicals, bodies of water and heating devices.

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

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) Child care programs are required by regulations to ensure that staff use supervision and guidance practices that handle children gently and safely. There are also child care licensing regulations that require staff receiving training on how to notice signs of abuse or neglect and respond when these signs have been observed. Center Based Child Care and Preschool Program rules in section 3.3 and rules 2.1.5, 5.10.1.13.2, 7.1.3, 7.6.5, and 7.7.5.2. Family Child Care Home rules in section 3.2 and rules 2.1.5, 5.10.1.13.2, 7.1.3, 7.6.2, and 7.7.5.2. Afterschool Child Care Program rules 3.7, 4.10 – 4.16, and 5.31.
- List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). There are not rules in Afterschool Child Care Program regulations that speak to shaken baby syndrome considering children are required to be 5 years of age and older to receive services.
- Describe any variations based on the age of the children in care. Not applicable.
- Describe if relatives are exempt from this requirement. The Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. The requirements state that guidance/discipline shall not include any form of cruel and unusual punishment, even with parental permission, including corporal punishments such as but not

limited to shaking, hitting, spanking, pinching, or confinement in a small enclosed or darkened area.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.
 - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) There are child care licensing regulations that require programs attend and write emergency response plans, educate staff on how to respond in various emergencies, and practice emergency evacuation drills. Center Based Child Care and Preschool Program rules in section 3.7 and 5.8 and rules 5.10.1.13.2, 5.10.5.4.7, 6.2.3.2, 6.2.4.5, 6.3.4, and 8.1.18. Family Child Care Home rules in section 3.6 and 5.8 and rules 5.10.1.13.2, and 6.3.4. Afterschool Child Care Program rules 3.7 – 3.8, 5.26, 6.3, 8.8, 10.8 – 10.11, and 16.8 – 16.9.
 - List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
 - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). Family Child Care Homes most often have a single person providing child care services, so they do not have the same rule related to having a second person present to assist in an emergency as centers. Some Center Based Child Care and Preschool Programs provide non-recurring care services who have an additional rule on this topic.
 - Describe any variations based on the age of the children in care. Not applicable.
 - Describe if relatives are exempt from this requirement. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement
8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants
 - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) There are regulations that address how to handle, storage, and disposal. Center Based Child Care and Preschool Program rules in section 5.10.1.10 and rules 5.2.5, 5.10.1.7, and 7.1.3. Family Child Care Home rules in section 5.10.1.10 and rules 5.2.5, 5.10.1.7, and 7.1.3. Afterschool Child Care Program rules 5.31 and 12.5.
 - List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). Center Based Child Care and Preschool Program and Family Child Care Home regulations have more specificity than Afterschool Child Care Program regulations.
 - Describe any variations based on the age of the children in care. Not applicable.
 - Describe if relatives are exempt from this requirement. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. The requirements state that the provider shall protect the children from any and all conditions which threaten the children’s health, safety and well-being. This includes but is not limited to access to stoves, pools, poisons, well, known vicious animals, weapons, medications, toxic chemicals, bodies of water and heating devices. In addition, the provider shall clean up blood and other bodily fluids with appropriate caution, protection and thoroughness.
9. Precautions in transporting children (if applicable)
- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) All three sets of child care licensing regulations have a section related to transporting children in a safe manner, with permission, and related to emergency precautions.
 - List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
 - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). Center Based Child Care and Preschool Program and Family Child Care Home regulations have more specificity than Afterschool Child Care Program regulations.
 - Describe any variations based on the age of the children in care. Staffing requirements are increased when non-ambulatory children are in the vehicle.
 - Describe if relatives are exempt from this requirement. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. The requirements state that children under 8 years of age shall be properly secured in a federally approved child restraint system appropriate to their weight and size, when being transported.
10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification
- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) All three sets of regulations have training and retraining requirements related to first aid and CPR. Center Based Child Care and Preschool Program rules 5.10.5.4.1 – 5.10.5.4.2, 5.10.5.4.5, 7.1.2, 7.4.7, and 8.1.19. Family Child Care Home rules in section 7.1.2 and rules 5.10.5.4.1 – 5.10.5.4.2, 5.10.5.4.4, 7.4.7, and 7.6.7. Afterschool Child Care Program rules 5.27, 5.34 – 5.36, 5.39 – 5.41.
 - List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
 - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). No substantive differences.

- Describe any variations based on the age of the children in care. Not applicable.
- Describe if relatives are exempt from this requirement. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement

11. Recognition and reporting of child abuse and neglect

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) Rules in section 3.3 of Center Based Child Care and Preschool Programs and in section 3.2 of Family Child Care Homes and rules 4.10 – 4.16 in Afterschool Child Care Programs address this topic as titled. These child care licensing regulations require training for staff to be able to prevent child sexual abuse through recognition of signs of grooming and other predatory behaviors, to be able to recognize the signs of child abuse and/or neglect, and to know how to report suspicion or knowledge of child abuse and/or neglect.
- List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). No substantive differences.
- Describe any variations based on the age of the children in care. Not applicable.
- Describe if relatives are exempt from this requirement. Pursuant to 33 V.S.A. 4913, Approved Relative Child Care Providers are mandated reporters of child abuse and neglect and are required to report to the Child Protection Line when they reasonably suspect abuse or neglect of a child.

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

1. Nutrition

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) All 3 sets of child care licensing regulations address nutrition with child care licensing rules on types of foods and drinks to be served or not served, how often meals and/or snacks are required to be offered, and information sharing with families about meals and/or snacks being served when the food is provided by the program versus the family. See Center Based Child Care and Preschool Program and Family Child Care Home rules in section 5.11. Also see Afterschool Child Care Program rules in section 14.
- List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). No substantive differences.
- Describe if relatives are exempt from this requirement. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement

2. Access to physical activity

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) All 3 sets of child care licensing regulations address requirements for children to have outside time. See Center Based Child Care and Preschool Program and Family Child Care Home rules in section 6.1.2 and rule 6.1.3.1. See Afterschool Child Care Program rules 8.2, 12.8 – 12.9.
- List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). No substantive differences.
- Describe if relatives are exempt from this requirement. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement

3. Caring for children with special needs

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) All 3 set of child care licensing regulations address requirements related to services for children with special needs. In addition, related rules have also been identified and addressed in other sections of this plan above. See Center Based Child care and Preschool Program rules in section 6.3 and rules 6.1.4.4.6, 8.1.9, and 8.1.18. Family Child Care Home rules in section 6.3 and rule 6.1.4.4.6. See Afterschool Child Care Program rules 5.38 and 8.8.
- List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). Center Based Child Care and Preschool Program and Family Child Care Home regulations have more specificity than Afterschool Child Care Program regulations.
- Describe if relatives are exempt from this requirement. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement

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

- Provide a brief summary of how the standard(s) is defined (i.e., what is the standard, content covered, practices required, etc.) Curriculum regulations are designed to support children's child development. See Center Based Child Care and Preschool Program and Family Child Care Home rules in sections 6.1 – 6.2. See Afterschool Child Care Program rules sections 6 – 9.
- List the citation for these requirements. <http://dcf.vermont.gov/cdd/laws-regs/childcare>

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). No substantive differences.
- Describe if relatives are exempt from this requirement. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement

5.2.3 Health and safety training for CCDF providers on required topics.

Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served, that address the health and safety topics described in 5.2.2, and child development. Lead Agencies must also have ongoing training requirements on the health and safety topics for caregivers, teachers, and directors of children receiving CCDF funds (658E(c)(2)(l)(i); 98.44(b)(1)(iii)). The state/territory must describe its requirements for pre-service or orientation training and ongoing training. These trainings should be part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory. Lead Agencies have flexibility in determining the number of training hours to require, but they may consult with *Caring for our Children Basics* for best practices and the recommended time needed to address these training requirements.

Pre-Service or Orientation Training Requirements

- Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:
 - Licensed child care centers: The focus of the child care licensing regulations is on the content and not on establishing a minimum number of pre-service or orientation hours. Relevant number of hours varies significantly based on the individual staff person's years of experience and educational background when beginning employment. For example, an individual with no prior experience and education will need significantly more orientation hours than someone with a Bachelor or master's degree in early education. The same expectations exist within all 3 sets of child care licensing regulations.
 - Licensed FCC homes: The focus of the child care licensing regulations is on the content and not on establishing a minimum number of pre-service or orientation hours. Relevant number of hours varies significantly based on the individual staff person's years of experience and educational background when beginning employment. For example, an individual with no prior experience and education will need significantly more orientation hours than someone with a Bachelor or master's degree in early education. The same expectations exist within all 3 sets of child care licensing regulations.
 - In-home care: Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training.
 - Variations for exempt provider settings: The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain

in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

- b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer) Orientation is required to be completed prior to staff being left alone with children. For Trainees who are not allowed to be left alone with children, the orientation is required to be completed within one month of starting employment.
- c) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).
1. Prevention and control of infectious diseases (including immunizations)
 - Provide the citation for this training requirement. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Child Care Program rule 5.31. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
XX Yes
 No
 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices
 - Provide the citation for this training requirement. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Child Care Program rule 5.31. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
XX Yes
 No
 3. Administration of medication, consistent with standards for parental consent
 - Provide the citation for this training requirement. Programs are not required to administer medication to children. When medication is being administered to children, all 3 sets of child care licensing regulations require that the staff person and/or family child care provider who is administering the medication is required to be trained. See Center Based Child Care and Preschool Program and Family Child Care Home rules 5.6.2 and 7.1.3. Also see Afterschool Child Care Program rules 5.31 and 10.3. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
XX Yes
 No
 4. Prevention and response to emergencies due to food and allergic reactions
 - Provide the citation for this training requirement. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Child Care Program rule 5.31. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
XX Yes
 No
5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic
- Provide the citation for this training requirement. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Child Care Program rule 5.31. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
XX Yes
 No
6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
- Provide the citation for this training requirement. This is covered within DCF's online Mandated Reporter Training and is generally referred to as child abuse and/or neglect. This is required in Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Child Care Program rule 5.31. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
XX Yes
 No
7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event
- Provide the citation for this training requirement. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Child Care Program rule 5.31. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
XX Yes
 No
8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Provide the citation for this training requirement. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Child Care Program rule 5.31. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
XX Yes
 No

9. Appropriate precautions in transporting children (if applicable)

- Provide the citation for this training requirement. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Child Care Program rule 5.31. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
XX Yes
 No

10. Pediatric first aid and CPR certification

- Provide the citation for this training requirement. Each staff person is required to obtain training and at least one person is required to be present who has already completed the training. See Center Based Child Care and Preschool Program rule 7.1.2, Family Child Care Home rules in section 7.1.2, and Afterschool Child Care Program rules 5.27 and 5.39. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
X Yes
 No

11. Recognition and reporting of child abuse and neglect

- Provide the citation for this training requirement. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Child Care Program rule 5.31. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
XX Yes
 No

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

- Provide the citation for this training requirement. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Child Care Program rule 5.31. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
XX Yes
 No

13. Describe other requirements

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

Ongoing Training Requirements

5.2.4 Provide the minimum number of annual training hours on health and safety topics for caregivers, teachers, and directors required for the following.

- a) Licensed child care centers: 4 – 15 hours depending on type of license and type of services being provided.
- b) Licensed FCC homes: 15 hours
- c) In-home care: No minimum training hours are required for Approved Relative Child Care Providers.
- d) Variations for exempt provider settings: See above

5.2.5 Describe the ongoing health and safety training for CCDF providers by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

1. Prevention and control of infectious diseases (including immunizations)

- Provide the citation for this training requirement. There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rule 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 – 5.36.
<http://dcf.vermont.gov/cdd/laws-regs/childcare>
- How often does the state/territory require that this training topic be completed?

Annually.

XX Other. Describe Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33.
(<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

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

- Provide the citation for this training requirement. There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rule 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 – 5.36.
<http://dcf.vermont.gov/cdd/laws-regs/childcare>
- How often does the state/territory require that this training topic be completed?

Annually.

XX Other. Describe Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home

[rule 7.4.1 and Afterschool Child Care Program rule 5.33.](#)
<http://dcf.vermont.gov/cdd/laws-regs/childcare>

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

- Provide the citation for this training requirement. [There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rule 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 – 5.36.](#)
<http://dcf.vermont.gov/cdd/laws-regs/childcare>
- How often does the state/territory require that this training topic be completed?

Annually.

XX Other. Describe [Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33.](#)
<http://dcf.vermont.gov/cdd/laws-regs/childcare>

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

- Provide the citation for this training requirement. [There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rule 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 – 5.36.](#)
<http://dcf.vermont.gov/cdd/laws-regs/childcare>
- How often does the state/territory require that this training topic be completed?

Annually.

XX Other. Describe [Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33.](#)
<http://dcf.vermont.gov/cdd/laws-regs/childcare>

5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

- Provide the citation for this training requirement. [There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rule 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 – 5.36.](#)
<http://dcf.vermont.gov/cdd/laws-regs/childcare>
- How often does the state/territory require that this training topic be completed?

Annually.

XX Other. Describe Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

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

- Provide the citation for this training requirement. There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rule 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 – 5.36. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- How often does the state/territory require that this training topic be completed?

Annually.

XX Other. Describe Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

- Provide the citation for this training requirement. There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rule 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 – 5.36. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- How often does the state/territory require that this training topic be completed?

Annually.

XX Other. Describe Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

- Provide the citation for this training requirement. There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rule 7.4.4 and 8.1.21, Family Child Care Home rule

7.4.4 and Afterschool Child Care Program rules 5.34 – 5.36.

<http://dcf.vermont.gov/cdd/laws-regs/childcare>

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

Annually.

XX Other. Describe Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33.

(<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

9. Appropriate precautions in transporting children (if applicable)

- Provide the citation for this training requirement. There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rule 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 – 5.36.
- How often does the state/territory require that this training topic be completed?

Annually.

XX Other. Describe Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33.

(<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

10. Pediatric first aid and CPR certification

- Provide the citation for this training requirement. Staff and family child care providers are required to be certified and to renew certification based on the expiration date on their certification card. These trainings may not count toward annual professional development requirements (in essence, these trainings are in addition to annual requirements). Center Based Child Care and Preschool Program rules 7.1.2, 7.4.7, and 8.1.19; Family Child Care Home rules 7.1.2.1 – 7.1.2.3 and 7.4.7 and Afterschool Child Care Program rules 5.34 – 5.36 and 5.39.
- How often does the state/territory require that this training topic be completed?

Annually.

Xx Other. Describe Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. Center Based Child Care and Preschool Program rules 7.1.2, 7.4.7, and 8.1.19;

Family Child Care Home rules 7.1.2.1 – 7.1.2.3 and 7.4.7 and Afterschool Child Care Program rules 5.34 – 5.36 and 5.39. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

11. Recognition and reporting of child abuse and neglect

- Provide the citation for this training requirement. There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rule 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 – 5.36. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- How often does the state/territory require that this training topic be completed?

Annually.

XX Other. Describe Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

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

- Provide the citation for this training requirement. There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rule 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 – 5.36. <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- How often does the state/territory require that this training topic be completed?

Annually.

XX Other. Describe Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

13. Describe other requirements. Nothing additional to add at this time.

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

Annually.

Other. Describe

5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

5.3.1 Enforcement of licensing and health and safety requirements

Lead agencies must certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with all applicable State and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers or any other monitoring procedures to ensure compliance. Note – Inspection requirements are described starting in 5.3.2.

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements. During the application process, there is either a technical assistance licensing visit or a pre-registration licensing visit (depending on the type of applicant). These visits are conducted by a Licensing Field Specialist to assess whether the space, materials and planned services are in substantial compliance with licensing rules. Once licensed, Licensing Field Specialists conduct licensing compliance visits to assess compliance to licensing regulations. During the application process, the applicant is required to obtain those state permits that are required by the Division of Fire Safety and by the Agency of Natural Resources in addition to complying with Vermont Department of Health lead safety requirements. Division of Fire Safety and the Agency of Natural Resources have collaborated with DCF's Child Development Division to write child care licensing regulations that address health and safety requirements for programs not required to obtain state permits which ensures the same level of health and safety requirements for all licensed child care programs.

5.3.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections—with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards—of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards—health, safety, and fire—at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by responding to the questions below to describe your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

a) Licensed CCDF center-based child care

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed child care center providers for compliance with health, safety, and fire standards. A Licensing Field Specialist conducts a pre-licensure inspection (technical assistance visit) prior to a license being issued. Applicants are expected to demonstrate substantial compliance for a license to be issued. If substantial compliance has been achieved and concerns exist, a provisional license is issued for no more than a year with specific

required action outlined for the program to achieve. If required action is achieved within one year, a license renewal application is completed, and a full license is issued. If required action is not achieved within one year, the license expires as the license renewal application is considered incomplete. If substantial compliance is not demonstrated during the pre-licensure inspection, required action is identified and the applicant is provided more time to achieve compliance. If substantial compliance is not able to be demonstrated after further technical assistance and more time, the application is denied.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers. DCF's Child Development Division's BFIS data system, allows Licensing Field Specialists and their supervisors to identify which programs are due for an annual, unannounced inspection. Using this information and knowledge of programs' schedules and routines, Licensing Field Specialists schedule the programs they will visit each week.
3. Identify the frequency of unannounced inspections: We are working towards funding to employ additional licensing staff in order to meet the once a year requirement.
 - Once a year
 - More than once a year. Describe _____
4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards. Licensing Field Specialists complete compliance inspections using a differential monitoring process which assesses licensing rules as selected by Licensing Supervisors using a consensus model of licensing rules that directly or indirectly impact child health, development, and safety.
5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers Center Based Child Care and Preschool Program rule 2.3.9.4 and Afterschool Child Care Program rule 18.7. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

b) Licensed CCDF family child care home

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed family child care providers for compliance with health, safety, and fire standards. A Licensing Field Specialist conducts a pre-licensure inspection (technical assistance visits for licensed family child care homes and a pre-registration visit for registered family child care homes) prior to a license being issued. Applicants are expected to demonstrate substantial compliance for a license to be issued. If substantial compliance has been achieved and concerns exist, a provisional license is issued for no more than a year with specific required action outlined for the program to achieve. If required action is achieved within one year, a license renewal application is completed, and a full license is issued. If required action is not achieved within one year, the license expires as the license renewal application is considered incomplete. If substantial compliance is not demonstrated during the pre-licensure inspection, required action is identified and the applicant is provided more time to achieve compliance. If substantial compliance is not able to be demonstrated after further technical assistance and more time, the application is denied.

2. Describe your state/territory's requirements for at least annual, unannounced inspections of licensed CCDF family child care providers. DCF's Child Development Division's BFIS data system, allows Licensing Field Specialists and their supervisors to identify which programs are due for an annual, unannounced inspection. Using this information and knowledge of programs' schedules and routines, Licensing Field Specialists schedule the programs they will visit each week
3. Identify the frequency of unannounced inspections: We are working towards funding to employ additional licensing staff in order to meet the once a year requirement.
 - Once a year
 - More than once a year. Describe
4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards. Licensing Field Specialists complete compliance inspections using a differential monitoring process which assesses licensing rules as selected by Licensing Supervisors using a consensus model of licensing rules that directly or indirectly impact child health, development, and safety.
5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers Family Child Care Home rule 2.3.9.4. (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

c) Licensed in-home CCDF child care

XX N/A. In-home CCDF child care (care in the child's own home) is not licensed in the State/Territory. Skip to

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards.
2. Describe your state/territory's requirements for at least annual, unannounced inspections of licensed CCDF in-home child care providers.
3. Identify the frequency of unannounced inspections:
 - Once a year
 - More than once a year. Describe
4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards.
5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers

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

5.3.3 Lead Agencies must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety (including, but not limited to, those requirements described in 98.41), and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Lead Agencies have the option to exempt relative providers (as described in section (658P(6)(B)) from

this requirement. To certify, respond to the questions below to describe the policies and practices for the annual monitoring of:

- a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. A license-exempt center-based program is only exempt from licensure if they meet one of several exemption criteria. As such, they may not participate in CCDF. If a center-based program wants to participate in CCDF, they are required to obtain a license and follow all licensing regulations.

Provide the citation(s) for this policy or procedure: See Vermont Statute 33 V.S.A. § 3502 and Center Based Child Care and Preschool Program rule 2.1.2 and Afterschool Child Care Program rule 1.5.

- b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. A family home provider is only exempt from licensure if they are providing care to 1 or 2 families. As such, they may not participate in CCDF. If a family home provider wants to participate in CCDF, they are required to meet the definition of relative. As a license-exempt relative provider, licensing compliance visits are not conducted.

Provide the citation(s) for this policy or procedure. See Vermont Statute 33 V.S.A. § 3502 and Family Child Care Home rule 1.1 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>)

- c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used. DCF's Child Development Division only allows license-exempt in-home providers participate in CCDF if the provider meets the Federal definition of relative to the child receiving child care. As a license-exempt relative provider, licensing compliance visits are not conducted.

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

5.3.4 The Lead Agency must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety, and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). The state/territory may determine if exempt relative providers (as described in section (658P(6)(B)) do not need to meet this requirement. At a minimum, the health and safety requirements to be inspected must address the standards listed in 5.1.4 (98.41(a)). To certify, describe the policies and practices for the annual monitoring of:

- a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. See above responses

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

- b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. See above responses

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

- c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used. See above responses
- d) Provide the citation(s) for this policy or procedure. See above responses

5.3.5 Licensing inspectors.

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the State's licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1)).

- a) To certify, describe how the Lead Agency ensures that licensing inspectors are qualified to inspect child care facilities and providers and that those inspectors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1)). The qualifications for a Licensing Field Specialist are as follows: " Education: Bachelor's degree with successful completion of four college level courses in early childhood topics. Experience: Two years of successful experience as a head teacher or director of a licensed child care facility, operator of a registered family day care home, child care licensur, resource and referral counselor, child care trainer, or child care eligibility specialist." OR "Education: CDA or Associate Degree in child development. Experience: Four years of successful experience as a head teacher or director of a licensed child care facility, operator of a registered family day care home, child care licensur, resource and referral counselor, child care trainer, or child care eligibility specialist." Once an individual has been hired with the foundational education and experience, we provide training to the extent needed to ensure they are well educated and knowledge regarding child development, child care business practices, group care, and as a regulator.

- b) Provide the citation(s) for this policy or procedure. <http://humanresources.vermont.gov/staffing/classification/job-specifications?code=530801>

5.3.6 The States and Territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).

- a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e., number of providers per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis. Each Licensing Field Specialist has between 108 and 183 licensed child care programs to monitor which allows us to visit approximately 57% of the licensed child care programs annually for compliance visits. We have continued to include in our annual budget a request for funds to hire additional Licensing Field Specialists in order to reduce the caseloads.
- b) Provide the policy citation and state/territory ratio of licensing inspectors. There is no citation.

5.3.7 States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from inspection requirements. *Note:* This exception only applies if the individual cares *only* for relative children. Does the state/territory exempt relatives from the inspection requirements listed in 5.3.3?

XX Yes, relatives are exempt from all inspection requirements. If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care. Exemptions because of relative care have requirements that include health and safety requirements. If there is a concern about health and safety with an exempt relative, a complaint may be entered (following the same complaint process for licensed programs). The complaint will be assigned to the Licensing Field Specialist, for the area, who will investigate. If violations are cited, corrective action is also identified and required to be completed. If compliance is not achieved, the subsidy certificate may be expired.

- Yes, relatives are exempt from some inspection requirements. If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.
- No, relatives are not exempt from inspection requirements.

5.4 Criminal Background Checks

5.4.1 In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met. In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met and apply for the time-limited waiver by responding to questions 5.4.1a through 5.4.1h below.

As a reminder, the CCDBG Act requires States and territories to have in effect requirements, policies and procedures to conduct criminal background checks for all child care staff members (including prospective staff members) of all child care providers that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children. For FCC homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or

older. This requirement does not apply to individuals who are related to all children for whom child care services are provided.

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

1. Criminal registry or repository using fingerprints in the current state of residency (in-state);
2. Sex offender registry or repository check in the current state of residency (in-state);
3. Child abuse and neglect registry and database check in the current state of residency (in-state);
4. FBI fingerprint check (national);
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (national);
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional (inter-state);
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years (inter-state); and
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years (inter-state).

Milestone Prerequisites for Time-Limited Waivers

By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 45 CFR 98.43 and 98.16(o):

- The national FBI fingerprint check; and,
- The three in-state background check provisions for the current state of residency:
 - state criminal registry or repository using fingerprints;
 - state sex offender registry or repository check;
 - state-based child abuse and neglect registry and database .

All four components are required in order for the milestone to be considered met.

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

Background Check Components	If milestone is met, time-limited waiver allowed for:
1) In-state criminal w/fingerprints	Conducting background checks on backlog of current (existing) staff only
2) In-state sex offender registry	
3) In-state state-based child abuse and neglect registry	

4) FBI fingerprint check	
5) NCIC National Sex Offender Registry (NSOR)	Establishing requirements and procedures AND/OR
6) Inter-state state criminal registry	Conducting background checks on all new (prospective) child care staff
7) Inter-state state sex offender registry	AND/OR
8) Inter-state child abuse and neglect registry	Conducting background checks on backlog of current (existing) staff

States and Territories will apply for the initial waiver for a one-year period (starting October 1, 2018 and ending September 30, 2019) as part of the submission of this Plan. If approved, States and Territories will have the option to *renew* these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Additional guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

Overview of Background Check Implementation deadlines

- Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017
- Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018
- One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019
- Waiver renewal deadline (45 CFR 98.19(b)(1)(ii)): September 30, 2020

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

- a) Briefly summarize the requirements, policies and procedures for the search of the state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides. The Vermont Crime Information Center (VCIC) processes fingerprints by running a check of the Vermont state criminal registry.
- Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o). Vermont has 3 types of licensed, regulated programs: Afterschool Child Care Programs, Center Based Child Care and Preschool Programs, and Family Child Care Homes (registered and licensed). All 3 licensed types are required to comply with the above background clearance process by using fingerprints.
 - Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible

providers), in accordance with 98.43 and 98.16(o). The only license-exempt CCDF eligible providers are those that meet the Federal relative definition.

- iii. Has the search of the state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

Yes.

XX No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. 10/1/2018 Describe the status of conducting the search of the state criminal registry or repository, with the use of fingerprints for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: Vermont has divided up implementation of fingerprinting into 5 stages. As of the beginning of 4/2018, Vermont began the final stage which involves implementing fingerprinting for all registered and licensed Family Child Care Homes.

- iv. List the citation: Here's the link to the licensing child care regulations that require the fingerprinting component to the background clearance process: <http://dcf.vermont.gov/cdd/laws-regs/childcare>

- b) Briefly summarize the requirements, policies and procedures for the search of the state sex offender registry or repository in the state where the staff member resides. Licensing Technicians review Vermont's sex offender registry for all background clearances.

- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o). Vermont has 3 types of licensed, regulated programs: Afterschool Child Care Programs, Center Based Child Care and Preschool Programs, and Family Child Care Homes (registered and licensed). All 3 licensed types are required to comply with the background clearance process.
- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o). The only license-exempt CCDF eligible providers are those that meet the Federal relative definition. Licensing Technicians review Vermont's sex offender registry for this group of providers.
- iii. Has the search of the state sex offender registry or repository been conducted for all current (existing) child care staff?

XX Yes

No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. Describe the status of conducting the search of the

state sex offender registry or repository for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: [REDACTED]

- iv. List the citation: [Here's the link to the licensing child care regulations that require the background clearance process: http://dcf.vermont.gov/cdd/laws-regs/childcare](http://dcf.vermont.gov/cdd/laws-regs/childcare)
- c) Briefly summarize the requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in the state where the staff member resides. [Licensing Technicians review Vermont's child abuse/neglect registry for all background clearances.](#)
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o). [Vermont has 3 types of licensed, regulated programs: Afterschool Child Care Programs, Center Based Child Care and Preschool Programs, and Family Child Care Homes \(registered and licensed\). All 3 licensed types are required to comply with the background clearance process.](#)
 - ii. Describe how these requirements apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o). [The only license-exempt CCDF eligible providers are those that meet the Federal relative definition. Licensing Technicians review Vermont's child abuse/neglect registry for this group of providers.](#)
 - iii. Has the search of the state-based child abuse and neglect registry and database been conducted for all current (existing) child care staff?
 - XX Yes
 - No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. [REDACTED] Describe the status of conducting the search of the state-based child abuse and neglect registry and database for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: [REDACTED]
 - iv. List the citation: [Here's the link to the licensing child care regulations that require the background clearance process: http://dcf.vermont.gov/cdd/laws-regs/childcare](http://dcf.vermont.gov/cdd/laws-regs/childcare)

- d) Briefly summarize the requirements, policies and procedures for the FBI fingerprint check using Next Generation Identification. VCIC processes fingerprints by running a check of the FBI criminal registry (NCIC).
- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o). Vermont has 3 types of licensed, regulated programs: Afterschool Child Care Programs, Center Based Child Care and Preschool Programs, and Family Child Care Homes (registered and licensed). All 3 licensed types are required to comply with the background clearance process.
 - ii. Describe how these requirements apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o). The only license-exempt CCDF eligible providers are those that meet the Federal relative definition and by Federal regulations and rules are not required to complete the FBI fingerprint check.
 - iii. Has the search of the FBI fingerprint check using Next Generation Identification been conducted for all current (existing) child care staff?
 - Yes
 - No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. 10/1/2018 Describe the status of conducting the FBI fingerprint check using Next Generation Identification for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: Vermont has divided up implementation of fingerprinting into 5 stages. As of the beginning of 4/2018, Vermont began the final stage which involves implementing fingerprinting for all registered and licensed Family Child Care Homes.
 - iv. List the citation: Here's the link to the licensing child care regulations that require the background clearance process: <http://dcf.vermont.gov/cdd/laws-regs/childcare>
- e) Describe the status of the requirements, policies and procedures for the search of the NCIC's National Sex Offender Registry.
- Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the search of the NCIC's NSOR check on all new and existing child care staff.
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o). [REDACTED]
- iii. List the citation: [REDACTED]

XX In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. 10/1/2018 Describe the status of implementation of requirements, policies and procedures for the NCIC's National Sex Offender Registry. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all prospective and existing licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: Vermont has divided up the implementation of fingerprinting into 6 stages (phase 1 - new hires, phase 2 - public prequalified prekindergarten programs licensed as Center Based Child Care and Preschool Programs, phase 3 - private prequalified prekindergarten programs licensed as Center Based Child Care and Preschool Programs, phase 4 - all other Center Based Child Care and Preschool Programs, phase 5 - Afterschool Child Care Programs and Phase 6 - licensed and registered Family Child Care Homes. In 10/2017, Vermont included the NSOR check to our process for those individuals required to be fingerprinted. This means all staff (required to be fingerprinted) hired after 10/2017 (in all license types), and programs in phase 3 - 6 have had NSOR checks completed. Phase 6 began at the beginning of 4/2018. During our Federal Technical Assistance call on 8/28/2017, we were told that we would be considered in compliance with the NSOR check requirement if we added it to our process and moving forward included this check which we have done. We will complete implementation of fingerprinting by 10/1/2018 upon completion of phase 6.

- f) Describe the status of the requirements, policies and procedures for the search of the criminal registries or repositories in other states where the child care staff member resided during the preceding 5 years, with the use of fingerprints being optional in those other states.
 - Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect and has conducted the inter-state state criminal registry check on all new and existing child care staff.
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o). [REDACTED]
 - ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o). [REDACTED]

iii. List the citation: [redacted]

XX In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement.

10/1/2018 Describe the status of implementation of requirements, policies and procedures for the search of the criminal registries or repositories in other states where the child care staff member resided during the preceding 5 years, with the use of fingerprints being optional in those other states. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all providers eligible to provide care for children receiving CCDF; 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: Vermont has divided up the implementation of fingerprinting into 6 stages (phase 1 - new hires, phase 2 - public prequalified prekindergarten programs licensed as Center Based Child Care and Preschool Programs, phase 3 - private prequalified prekindergarten programs licensed as Center Based Child Care and Preschool Programs, phase 4 - all other Center Based Child Care and Preschool Programs, phase 5 – Afterschool Child Care Programs and Phase 6 - licensed and registered Family Child Care Homes. We will complete implementation of fingerprinting by 10/1/2018 upon completion of phase 6. When VCIC receives the fingerprints, they conduct the criminal registry check in all states the individual has resided within the past 5 years if the other state's statutes allow for this.

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

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

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

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

iii. List the citation: [redacted]

XX In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement.

10/1/2018 Describe the status of implementation of requirements, policies and procedures for the search of the state sex offender registry or repository in each state where the staff member resided during the previous 5 years. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement

for all (prospective and existing) licensed, regulated and registered providers; and all providers eligible to provide care for children receiving CCDF; 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: Vermont has divided up the implementation of fingerprinting into 6 stages (phase 1 - new hires, phase 2 - public prequalified prekindergarten programs licensed as Center Based Child Care and Preschool Programs, phase 3 - private prequalified prekindergarten programs licensed as Center Based Child Care and Preschool Programs, phase 4 - all other Center Based Child Care and Preschool Programs, phase 5 – Afterschool Child Care Programs and Phase 6 - licensed and registered Family Child Care Homes. We will complete implementation by 10/1/2018 upon completion of phase 6. Licensing Technicians review the national sex offender public website when they process a background clearance for an individual.

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

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

XX In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. 10/1/2018 Describe the status of implementation of requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in each State where the staff member resided during the previous 5 years. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: Vermont has divided up the implementation of fingerprinting into 6 stages (phase 1 - new hires, phase 2 - public prequalified prekindergarten programs licensed as Center Based Child Care and Preschool Programs, phase 3 - private prequalified prekindergarten programs licensed as Center Based Child

Care and Preschool Programs, phase 4 - all other Center Based Child Care and Preschool Programs, phase 5 – Afterschool Child Care Programs and Phase 6 - licensed and registered Family Child Care Homes. In addition, Vermont has received the spreadsheet for requesting a child abuse/neglect registry check from other states. This final component of the background clearance process has been implemented as of the beginning of 4/2018 when phase 6 of the implementation process was started. Moving forward, this will be conducted for each individual provided the other state provides the requested information.

- 5.4.2 A child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective child care staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter. A prospective child care staff member may begin to work on a provisional basis for a child care provider after completing either a Federal Bureau of Investigation (FBI) fingerprint check or a search of the state/territory criminal registry or repository using fingerprints (in the state/territory where the staff member resides. However, the child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).
- 5.4.3 Does the state/territory allow prospective staff members to begin work on a provisional basis (if supervised at all times) after completing the FBI fingerprint check or a fingerprint check of the state criminal registry or repository in the state where the child care staff member resides?
- No.
- Yes. Describe:
- 5.4.4 The state/territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The state/territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the state/territory will provide information about each disqualifying crime to the staff member.
- 5.4.5 Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)). Vermont's current process does allow for background clearances to be processed within 45 days provided the individual submits to fingerprinting within a couple days from receiving the Fingerprint Authorization Certificate. When there are delays beyond 45 days, these are due to the subject of the background clearance not submitting to fingerprinting within a timely fashion, not having paperwork completed correctly (e.g. signing required paperwork), or not having fingerprints that are legible which requires reprinting. By 10/1/2018, Vermont will be changing the order in which we process the background clearance for the purpose of reducing the timeframe for having the background clearance completed.

- 5.4.6 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry. Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or—subject to an individual review (at the state/territory’s option)—a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes—child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)).

Note: The Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable information (98.43(e)(2)(iii)).

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

No.

XX Yes. Describe: Vermont also disqualifies individuals who have a fraud conviction or have been found by a court to have abused, neglected or mistreated a child, elderly or disabled person, or animal.

- 5.4.8 The state/territory has a process for a child care staff member to appeal the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3). Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2–4)). In the denial letter to the subject of the background clearance, there is information about how to challenge the accuracy of the finding. If the reason for the denial is eligible for a variance, the denial letter to the child care program/provider includes information on how to file a record check variance request. If the child care program/provider wishes to file a record check variance request and the subject of the background clearance is willing to disclose information regarding the reason for the denial, the child care program/provider may submit a record check variance request through their program's BFIS account. (BFIS is our data system and serves as a communication vehicle between the child care program and DCF's Child Development Division. The record check variance is received by DCF's Child Development Division into a special queue in which only licensing staff trained and authorized to access background clearance information may access. Licensing staff review the reason for the denial, the variance request, and may consult with legal counsel and/or a child welfare specialist from Vermont's DCF Family Service Division. A decision is made regarding the record check variance request and a decision letter is generated to the child care program/provider which includes the

reason for the decision. If the record check variance request is denied, the decision letter also includes the child care program/provider's appeal rights.

5.4.9 The State/Territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)). Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. Lead Agencies can report that no fees are charged if applicable (98.43(f)). Vermont's DCF Child Development Division pays VCIC's processing fee for the fingerprint results. The subject of the background clearance (or their employer/potential employer) pays the fee for submitting to fingerprinting. No other fees are assessed.

5.4.10 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, States have the flexibility to decide which background check requirements relatives, as defined by CCDF, must meet. *Note:* This exception only applies if the individual cares *only* for relative children. Does the state/territory exempt relatives from background checks?

No, relatives are not exempt from background check requirements.

Yes, relatives are exempt from *all* background check requirements.

XX Yes, relatives are exempt from *some* background check requirements. If the state/territory exempts relatives from some background check requirements, describe which background check requirements do not apply to relative providers. Licensing Technicians review the child abuse/neglect registry for Vermont, the Vermont sex offender registry, the national sex offender public website, and the Vermont criminal registry. As of the beginning of 4/2018, Licensing Technicians began submitting requests for child abuse/neglect registries for the other states the individual reports having resided within the last 5 years. Relatives are exempt from the FBI fingerprinted supported portion of the background clearance.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)).

Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

6.1 Professional Development Framework

6.1.1 Describe how the state/territory developed its training and professional development Each State or Territory must describe their professional development framework for training, professional development, and post-secondary education, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework. Describe how the state/territory's framework for training and professional development addresses the following required elements:

State/territory professional standards and competencies. Describe: Vermont's professional development system is based on competencies and standards developed/revised under the State Advisory Council's Professional Preparation and Development Committee and supported and implemented by Northern Lights @ CCV. NL@CCV is funded by CDD with CCDF to support and coordinate the implementation of Vermont's Professional Development System. *Professional Standards and Competencies* are the foundation of the professional development system. They are used as self- assessment tools, and to guide the development and use of curricula, instruction and credentials. They are the basis of career pathways.

Career pathways. Describe:

Vermont's professional development system includes a 6 level *Early Childhood Career Ladder* , *Early Childhood Career Lattice* and *Afterschool Pathways* developed/revised under the State Advisory Council's Professional Preparation and Development Committee and supported and implemented by Northern Lights @ CCV. NL@CCV is funded by CDD with CCDF to support and coordinate the implementation of Vermont's Professional Development System. *The Career Advising Guide* shows how different jobs in various settings fit into the Early Childhood Career Ladder. The Child Development Division (CDD) *child care program regulations* (see section 7) align the roles in regulated child care programs (teacher assistant, teacher associate, teacher, etc.) with the Early Childhood Career Ladder. Program Directors also need to meet additional criteria.

- Advisory structure. Describe: Vermont's Building Bright Futures State Advisory Council, Inc.'s *Professional Preparation and Development (PPD) Committee* is a statewide committee charged with overseeing the early childhood and afterschool professional development system in Vermont and is comprised of representatives from roles across

the early childhood system. The goal of PPD is to develop, coordinate and promote a comprehensive system of quality learning opportunities for current and prospective early childhood and after school professionals. PPD's mission is to ensure comprehensive coordinated system of quality learning opportunities that give current and prospective professionals the knowledge, skills, dispositions, and experiences they need to provide the best care and education to children and families in Vermont. This group committee reviewing, advises and makes recommendations about new or existing professional development initiatives and activities as well as acts as an advisory body for NL@CCV

- Articulation. Describe: Vermont's Early Childhood Higher Education Consortium brings together deans, curriculum coordinators, faculty leads and department heads in early childhood, as well as state agency leaders and the Head Start Collaboration project, to collaboratively address the education needs of Vermont's early childhood workforce. Understanding the current status of articulation agreements between colleges was a primary focus for 2017. Six articulation agreements have been updated and a new articulation agreement is underway at the state's largest institution of higher education, the University of Vermont. The Vermont state college system has worked to streamline articulation among the state colleges and with many private colleges in Vermont. Professionals can use the [Colleges and Career Pathways](#) page at NL@CCV as well as support from a cadre of career advisors (housed at NL@CCV and funded by CCDF) in navigating articulation.

Workforce information. Describe: Utilizing ELCG/RTT funding, Vermont designed a Workforce Survey Project as a way to gather information regarding the demographics, education and credentials, wages, benefits, and aspirations of the early childhood and afterschool workforce. Working collaboratively with stakeholders across the field of early childhood and afterschool in Vermont, the Child Development Division (CDD)

Financing. Describe: Funding for the majority of the Vermont early childhood professional development system comes through the Child Care and Development Block Grant and private pay. Other funding sources are the Early Learning Challenge Grant (through December 2018), the Temporary Aid to Needy Families (TANF) grant to Vermont, state general fund dollars, Part B funds, State Department of Labor (Apprenticeship) and some foundation funding to targeted initiatives. The CDD is anticipating a small amount of funding through the Agency of Commerce to help support the T.E.A.C.H. program.

The following phrases are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

- Continuing education unit trainings and credit-bearing professional development to the extent practicable. Describe:
 - **T.E.A.C.H. EARLY CHILDHOOD® VERMONT SCHOLARSHIP PROJECT**

- (through the Vermont Association for the Education of Young Children) - Associate Degree at the Community College of Vermont (CCV) and coursework for those who have a bachelor's Degree but not a teaching license in obtaining a teacher license in either Early Childhood or Early Childhood Special Education
 - The Vermont Early Childhood and Afterschool Program Director Credential (offered through NL@CCV) - This is a credential for professionals working in center-based, afterschool, or family child care settings, who are directors or managers and for those who want to gain the program director competencies. Twenty-one college credits are required for achieving the credential.
 - The Vermont Child Care Apprenticeship Program. Along with funding from the CDD, the Vermont Child Care Industry and Careers Council and the VT Department of Labor collaborate to offer the Apprenticeship Program for child care workers seeking education and experience in the field. Apprentices complete 6 college courses; and participate in additional community-based trainings to gain the knowledge and skills needed to work more effectively in the field. This program is designed for apprentices who are working at least 30 hours per week and typically takes about 2 years to complete.
- Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework. Describe: In 2015, through Early Learning Challenge Grant funding, Vermont created the Vermont Early Childhood Higher Education Consortium which is comprised of representatives from all of the colleges and universities in Vermont that have early childhood programs. This group has been working with each other and other early childhood professional development system partners to identify areas of common interest, create articulation agreements, and enhance access to early childhood pathways in higher education. One of the exciting opportunities that has occurred as a result of ELCG funding is that a consultant has been hired to review the coursework for all of the colleges with a lens of the Vermont Early Learning Standards. This has helped align the curricula and ground each college program in a common framework It is the intention of this group to continue after ELCG funding has ended.

Other. Describe:

- 6.1.2 Describe how the state/territory developed its training and professional development requirements in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or with another state or state-designated cross-agency body if there is no SAC that addresses the professional development, training, and education of child care providers and staff. Vermont's Building Bright Futures State Advisory Council, Inc.'s Professional Preparation and Development (PPD) Committee is a statewide committee charged with overseeing the early childhood and afterschool professional development system in Vermont and is comprised of representatives from roles across the early childhood system. The goal of PPD is to develop, coordinate and promote a comprehensive system of quality learning opportunities for current and prospective early childhood and after school professionals. PPD's

mission is to ensure comprehensive coordinated system of quality learning opportunities that give current and prospective professionals the knowledge, skills, dispositions, and experiences they need to provide the best care and education to children and families in Vermont. This group committee reviews, advises and makes recommendations about new or existing professional development initiatives and activities as well as acts as an advisory body for NL@CCV.

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

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

The Vermont Student Assistance Corporation offers both degree and non-degree grants for low income Vermonters.

Through funding from the Child Development Division, Vermont Association for the Education of Young Children (Vtaeyc) issues tuition grants to eligible staff working in regulated child care programs, to pay for college coursework, fees and recognition bonuses. The priority for these grants is to help individuals obtain credentials and post-secondary degrees and to advance along the Vermont Early Childhood Career Ladder. (These grants were formerly issued by the Child Development Division (CDD))

Through funding from the Child Development Division, Vermont Afterschool, Inc. offers two tuition-free college courses for individuals who work in afterschool programs. The courses, which are offered through the Community College of Vermont, are Introduction to Afterschool Education and Care and Afterschool Education & Development of the School-Age Child. These courses can be applied to the Vermont Afterschool Professional Credential.

The Vermont T.E.A.C.H. Program and the Vermont Child Care Apprenticeship Program both offer subsidized coursework to support in-place professionals in achieving college coursework to meet both career goals and licensing requirements.

These programs contribute to the stability of the workforce and retention of those working in the field when individuals are helped to achieve degrees and credentials in the early childhood/afterschool field while reducing the financial burden for pursuing their goals.

Financial incentives linked to educational attainment and retention. Describe: Level Certificates are awarded at the completion of requirements for each level on the Career Ladder. Individual Professional Recognition Bonuses are awarded for Level Certificates if the required criteria are met. This contributes to the stability of the workforce and retention of those working in the field when individuals are recognized for achieving degrees and credentials in the early childhood/ afterschool field.

- Financial incentives and compensation improvements. Describe: Compensation improvements are included in the T.E.A.C.H. Early Childhood® Vermont Scholarship Project (Increase earnings through the provision of a bonus and/or a raise for recipients who complete their education in a prescribed period of time to support economic viability of staff) and the Vermont Child Care Apprenticeship Program (regular increases in wages for the apprentice during and upon completion of the 4000-hour training program). This contributes to the stability of the workforce and retention of those working in the field

when individuals are helped to achieve degrees and credentials in the early childhood/ afterschool field while reducing the financial burden for pursuing their goals.

- Registered apprenticeship programs. Describe: Vermont has a successful Child Care Apprenticeship Program which is implemented by the Vermont Child Care Industry and Careers Council and is partially funded by the CDD through CCDF funds. This program contributes to the stability of the workforce and retention of those working in the field when individuals are helped to complete the Apprenticeship Program while reducing the financial burden for pursuing this goal.
- Outreach to high school (including career and technical) students. Describe: NL@CCV conducts outreach Vermont Technical Centers on aligning their child care professional development with the Vermont Early Childhood Career Ladder as well as their coursework to meet the expectations of Vermont's Fundamentals curriculum. The purpose is to help students more easily gain the skills, experience and professional development needed to work in a regulated child care program.

Vermont Child Care Industry and Careers Council conducts outreach to Vermont Technical Centers to educate on the implementation of successful practices with young children including the use of Certificates of Proficiency. Credit for successful demonstration of knowledge and skills supports links to the work setting upon graduation and is recognized by Registered Apprenticeship program.

- Policies for paid sick leave. Describe:
- Policies for paid annual leave. Describe:
- Policies for health care benefits. Describe:
- Policies for retirement benefits. Describe:
- Support for providers' mental health, such as training in reflective practices and stress-reduction techniques and health and mental health consultation services. Describe: The Vermont Early Childhood Family Mental Health (ECFMH) Competencies accompany and broaden the early childhood and afterschool Core Competencies. An ECFMH credential based on the Intermediate level competencies is available in Vermont. Training curricula that contain the ECFMH Competencies, which are currently used in Vermont are: Second Step Violence Prevention Curriculum, Foster Care Training: Session I, II, III, IV, V, Touch Points, Zero to Three: Prevent Child Abuse and Neglect (PCAN), Southern New Hampshire University course: PCMH 689. UVM- Higher Education Collaborative BEST graduate concentration, Center for the Social Emotional Foundations of Early Learning: Modules 1,2,3a,3b
- Other. Describe:

6.2 Training and Professional Development Requirements

The state/territory must develop training and professional development requirements, including pre-service or orientation training (to be completed within 3 months) and ongoing requirements designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training

and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

- 6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development requirements (98.44(b)(2)(ii)). VT training and professional development requirements: Afterschool Child Care Programs Regulations – section 5 page 23-26
Child Care Licensing Regulations: Center Based Child Care and Preschool Programs – section 7 pages 85-86 and 92-93.
Child Care Licensing Regulations: Registered and Licensed Family Child Care Homes – section 7 pages 84-85 and 90
- 6.2.2 Describe how the state/territory’s training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)). N/A
- 6.2.3 Describe how the state/territory will recruit and facilitate the participation of providers with limited English proficiency and persons with disabilities (98.16(dd)). The State works through NL@CCV to provide interpretation services to providers needing to complete required professional development. Additional translations of any CDD documents or literature would be provided by request.
- 6.2.4 If the Lead Agency provides information or services to providers in other non-English languages, please identify the three primary languages offered or specify that the State has the ability to have translation/interpretation in primary and secondary languages. The child care licensing regulations have been translated into Spanish, Nepali and Somali. The State has the ability to have translation/interpretation in primary and secondary languages.
- 6.2.5 Describe how the state/territory’s training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii–iv)). The CDD works through NL @ CCV to provide annual trainings that meet the annual professional development requirements for child care licensing. Some also meet specific training requirements for child care licensing qualifications or for Specialized Child Care training requirements. The array of trainings includes offerings that meet the needs of providers who: work with children of different age groups; work with children with developmental delays and disabilities; etc. In addition, they are intended to provide options for professionals at different levels of experience and/or knowledge with particular topics.

- 6.2.6 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving homeless children and families (658E(c)(3)(B)(i)).
- a) Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2). The CDD has several initiatives to support training on and outreach to providers working with homeless families underway, including:
- Professional development related to homelessness has been identified as a required topic for Northern Lights @ CCV to include in their annual professional development offerings to regulated child care providers
 - Strengthening Families trainings that address family stress including homelessness continue to be offered through VtAEYC for 2018 and then has been identified as a required topic for Northern Lights @ CCV to include in their annual professional development offerings to regulated child care providers
 - Training on trauma-informed practice for homelessness has been identified as a required topic for Northern Lights @ CCV to include in their annual professional development trainings to regulated child care providers.
 - Basic Specialized Care training that is required for all child care providers wishing to care for a child in state protective custody or otherwise considered at risk
 - The CDD has been working with the Office of Economic Opportunity within DCF and has designed and offered shared training and TA around child trauma directly related to homelessness. The CDD continues to work with the Agency of Human Services on a plan to end homelessness by 2020 and CDD efforts is in partnership with this statewide plan.
- b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving homeless children and their families (connects to question 3.2.2). Training on working with children and families who are homeless is one of the training topics that has been identified as a required topic to offer through NL@CCV. This training will include information on identifying and serving children and families experiencing homelessness. In addition, one of the Child Care Financial Assistance Program enrollment categories is Family Support Child Care which means that the family is experiencing significant stress in areas such as shelter, safety, emotional stability, substance abuse, children's behaviors, and parenting issues. Homelessness is clearly in this category. When homelessness is identified as a service need, Specialized Child Care services through CDD Children's Integrated Services begins, which can provide additional supports including to the child care provider. For the child care program, this includes the connection with a regional Child Care Coordinator who is able to assist with technical assistance and connecting providers to additional training resources,
- 6.2.7 The states and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply.

- X Issue policy change notices
- X Issue new policy manual
- Staff training
- Orientations
- Onsite training
- X Online training
- X Regular check-ins to monitor the implementation of CCDF policies
- X The type of check-ins, including the frequency. Describe: Payroll invoices are monitored weekly to ensure billing integrity. Any issues found results in a phone call, email or visit by the Program Integrity Investigator. In addition, random unannounced visits to providers are conducted to check attendance sheets and provide additional billing training if necessary.
- Other. Describe:

6.2.8 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's business practices, which can include training and/or TA efforts.

- a) Identify the strategies that the state/territory is developing and implementing for training and TA. Vermont licensing regulations require center-based program directors to either hire a business manager or obtain coursework related to program management, business practices and legal and financial issues related to operating a sustainable child care program. Support is offered through the following:

Vermont Early Childhood and Afterschool Program Director Credential (offered through the Northern Lights @ CCV) Coursework related to business practices includes: Program Management, Leadership, Mentoring/Supervision, Human Resources Management, Legal and Financial Issues

SharedServicesVT.org –website includes business supports for child care providers including topics related to program administration and business operations, marketing, human resources.

Starting Points Networks - Made up of local groups of early childhood professionals across 12 regions in Vermont who take initiative through leadership, professional development and peer support to encourage, learn and grow together. Issues related to business development are often primary topics at Starting Points trainings and monthly network meetings.

The Vermont Small Business Development Center provides no-cost, confidential business advising and low-cost training services to all small businesses and new ventures in Vermont.

- b) Check the topics addressed in the state/territory's strategies. Check all that apply.
- X Fiscal management
 - X Budgeting
 - X Recordkeeping

- X Hiring, developing, and retaining qualified staff
- X Risk management
- X Community relationships
- X Marketing and public relations
- X Parent-provider communications, including who delivers the training, education, and/or technical assistance
- X Other. Describe: understanding legal issues related to operating a child care program

6.3 Early Learning and Developmental Guidelines

6.3.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. *Note:* States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.

a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry. The Vermont Early Learning guidelines for children birth through 8 (VELS) were approved August 2015. VELS is aligned with and supports the use of developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula and learning environments. The newly revised VELS are aligned with the following:

- Developmentally Appropriate Practices (NAEYC) and Division of Early Childhood (DEC) Recommended Practices;
- The 2015 Federal Office of Head Start's Head Start Early Learning Outcomes Framework, Ages Birth to Five;
- The Common Core State Standards for English Language Arts and Mathematics
- The Next Generation Science Standards,
- The Collaborative for Academic, Social, and Emotional Learning (CASEL)
- Vermont's Grade Level Expectations

b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry. VELS make explicit the goals for each and every child's learning and development from birth through grade 3. Regardless of

whether children are at home, preschool, elementary school, childcare, neighborhood playgroup/event; whether they are typically developing or have diverse abilities and needs; whether they are learning to speak one language or many, the VELs represent common goals for development and learning across the early childhood years. The VELs is a resource tool for adults who are responsible to understand these goals and provide the opportunities and experiences that allow all children to make progress toward or achieve them, including making adaptations and accommodations for children's unique circumstances.

- c) Check the domain areas included in the state/territory's early learning and developmental guidelines. Check all that apply.
- X Cognition, including language arts and mathematics
 - X Social development
 - X Emotional development
 - X Physical development
 - X Approaches toward learning
 - Other. Describe: _____
- d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or other state or state-designated cross-agency body if there is no SAC. The Vermont Agency of Education (AOE) is the lead agency responsible for developing and implementing the Vermont Early Learning Standards (VELS). AOE implements the VELs in consultation with an advisory body that includes representatives from CDD, the Vermont Head Start State Collaboration Office, the Vermont Department of Health, AOE, Head Start, child care, pre-k programs, and higher education institutions. In addition, the VELs is developed and implemented in consultation with several oversight bodies including the BBF State Advisory Council, the BBF Professional Preparation and Development Committee and the Vermont State Board of Education.
- e) Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates. Vermont's first Early Learning Standards were published in 2003. The first revision to the Vermont Early Learning Standards was completed and approved in 2015. Beginning in 2012, a cross-section of early childhood development and education stakeholders was convened to begin the task of revising the VELs. This groups work was reviewed and approved by the Building Bright Futures, Vermont's State Advisory Council and the Vermont State Board of Education. Using a similar process, in 2018 VELs will be revised to align with updated/current national standards in physical education, science and social studies.
- f) Provide the Web link to the state/territory's early learning and developmental guidelines. <http://vels.education.vermont.gov/standards>

6.3.2 CCDF funds cannot be used to develop or implement an assessment for children that:

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,

- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,
- Will be used as the primary or sole method for assessing program effectiveness,
- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used. The VELS is a resource tool for adults who are responsible to understand the common goals for development and learning across the early childhood years and provide the opportunities and experiences that allow all children to make progress toward or achieve them, including making adaptations and accommodations for children's unique circumstances.

- 6.3.3 If quality funds are used to develop, maintain, or implement early learning guidelines, describe the measureable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)). Currently, Vermont is not using quality funds to develop, maintain, or implement early learning guidelines. The Vermont Agency of Education is the lead responsible agency in this work and is the financial supporter of implementation. CCV @ Northern Lights (under the CDD contract) will ensure pedagogical training will be aligned with the Vermont Early Learning Standards.

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care.

States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a separate annual Quality Progress Report that will include a description of activities to be funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce
- Improving on the development or implementation of early learning and developmental guidelines
- Developing, implementing, or enhancing a tiered quality rating and improvement system for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)
- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)).

This section covers the quality activities needs assessment and quality improvement activities and indicators of progress for each of the activities undertaken in the state or territory.

7.1 Quality Activities Needs Assessment for Child Care Services

- 7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)). The Vermont Child Development Division invests in quality activities based on Vermont's Early Childhood Framework and its companion document, Vermont's Early Childhood Action Plan, which charts a course of action to help Vermont achieve the Framework's six goals. Building Bright Futures, the state's early childhood advisory council, is the steward of the framework and the plan which is intended to be a living document that is regularly updated through a process managed by Building Bright Futures and refined as new voices and partnerships inform how the work envisioned in this Plan is implemented.
- Vermont's Early Childhood Framework, which was finalized in October 2013, lays out six goals to unify Vermonters in our efforts to ensure the wellbeing of Vermont's young children and their families. Vermont's Early Childhood Action Plan provides specific strategies to ensure the six goals of the Framework are realized. Both documents reflect a shared responsibility to provide a

good start for all Vermont’s children and a belief that all Vermonters benefit when our youngest citizens and their families are thriving.

In 2013, a nine-month process involving the Governor’s office, the Vermont Agencies of Human Services and Education and a diverse early childhood community lead to the development of [Vermont’s Early Childhood Framework](#), which includes six goals and twelve guiding principles for individual and collective action aimed at realizing the promise of every child.

[Vermont’s Early Childhood Action Plan](#) was developed by a statewide committee that was jointly convened by the Governor’s Office and Doug Racine, Secretary of the Agency of Human Services. The committee was comprised of representatives from state government, the non-profit sector, Building Bright Futures, Head Start, advocacy organizations, K-3 education, private funders and the business community. The Action Plan reflects input gathered through ten focus sessions leading up to the Governor’s Early Childhood Summit (October 2013), eight action planning forums held during the winter of 2013- 2014, online surveys, and multiple conference calls.

To bring together public and private partners, families and communities the Early Childhood Action Plan has devised a [structure and implementation cycle](#) coordinated by the BBF Early Childhood Action Plan Director. CDD engages in BBF Committees responsible for action plan implementation and we align our quality spending with the implementation plans of these committees.

- 7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified. [The Vermont Early Childhood Action Plan](#)

**EARLY CHILDHOOD
FRAMEWORK GOALS**

EARLY CHILDHOOD ACTION PLAN RESULTS

Goal 1: A Healthy Start for All Children

All children have a healthy start.

Goal 2: Families and Communities Play a Leading Role

Families and communities play a leading role in children’s well-being.

Goal 3: High-Quality Opportunities for All Children

All children and families have access to high-quality opportunities that meet their needs.

Goal 4: Invest Now for Our Future

Vermont invests in prevention and plans for the future success of children.

Goal 5: Know We're Making a Difference

Data and accountability drive progress in early childhood outcomes.

Goal 6: An Innovative and Connected System

The early childhood system is innovative and integrated across sectors in order to better serve children and families.

7.2 Use of Quality Funds

7.2.2 Check the quality improvement activities in which the state/territory is investing.

- X Supporting the training and professional development of the child care workforce. If checked, respond to section 7.3 and indicate which funds will be used for this activity. Check all that apply.
 - X CCDF funds
 - X Other funds: State General Funds, TANF
 - X Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity. Check all that apply.
 - X CCDF funds
 - X Other funds
 - X Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.
 - X CCDF funds
 - Other funds
 - X Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply.
 - X CCDF funds
 - X Other funds: State General Funds, Global Commitment/Medicaid Investment, Federal Early Head Start Grants
- Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.
- CCDF funds
 - Other funds

- X Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.
 - X CCDF funds
 - X Other funds
- Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.
 - CCDF funds
 - Other funds
- X Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.
 - X CCDF funds
 - Other funds
- Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.
 - CCDF funds
 - Other funds
- Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply.
 - CCDF funds
 - Other funds

7.3 Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds

Lead Agencies can invest in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 in addition to the following (98.53(a)(1)).

7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce.

a) Check and describe which content is included in training and professional development activities and describe who or how an entity is funded to address this topic. Check all that apply.

X Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies. Describe: The state uses CCDF to fund Northern Lights at CCV (NL@CCV), the hub and connector of the professional development system in Vermont for early childhood and afterschool professionals. Working

with key partners, NL@CCV supports and enhances a unified system of professional development for early childhood and afterschool practitioners, including offering annual trainings that meet the annual professional development requirements for child care licensing. Some also meet specific training requirements for child care licensing qualifications or for Specialized Child Care training requirements. NL@CCV's [List of Annual Trainings](#) includes: [Trauma Informed Practice](#); [Social-Emotional Development of Infants and Toddlers](#); [Preschool STEAM](#); [Fundamentals for Early Childhood Professionals](#);

There are several state and local professional development providers who offer a variety of training on these topics that are scientifically-based, developmentally appropriate and age-appropriate. Some of the partners in this effort include the Vermont Association for the Education of Young Children, the Vermont Department of Health, the Vermont Agency of Education, Prevent Child Abuse Vermont, the Vermont Child Care Industry and Careers Council, Vermont Afterschool, and Vermont Birth to Five.

X Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age 5 for such behaviors. (See also section 2.5.) Describe: [The state uses CCDF to fund Northern Lights at CCV \(NL@CCV\), the hub and connector of the professional development system in Vermont for early childhood and afterschool professionals. Working with key partners, NL@CCV supports and enhances a unified system of professional development for early childhood and afterschool practitioners, including offering annual trainings that meet the annual professional development requirements for child care licensing. Some also meet specific training requirements for child care licensing qualifications or for Specialized Child Care training requirements. NL@CCV's List of Annual Trainings includes: Trauma Informed Practice; Social-Emotional Development of Infants and Toddlers; Fundamentals for Early Childhood Professionals; Basic Specialized Care.](#)

[Training on this topic has been offered across the state through the Center for the Study of Social Emotional Foundations of Early Learning \(CSEFEL\) curriculum and several individuals have been trained to offer this curriculum. The Vermont Agency of Education has received a federal State Professional Development Grant \(SPDG\) to offer Early Multi-Tiered Systems of Support which utilizes a multi-tiered framework of universal promotion, prevention and intervention in early literacy, numeracy and social emotional development. Early MTSS incorporates the Foundations of Early Learning pyramid model developed by the Center on the Social and Emotional Foundations for Early Learning \(CSEFEL\)](#)

X Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. Describe: [The state uses CCDF to fund Northern Lights at](#)

[CCV \(NL@CCV\)](#), the hub and connector of the professional development system in Vermont for early childhood and afterschool professionals. Working with key partners, [NL@CCV](#) supports and enhances a unified system of professional development for early childhood and afterschool practitioners, including offering annual trainings that meet the annual professional development requirements for child care licensing. Some also meet specific training requirements for child care licensing qualifications or for Specialized Child Care training requirements. [NL@CCV's List of Annual Trainings](#) includes: [Trauma Informed Practice](#); [Fundamentals for Early Childhood Professionals](#); [Basic Specialized Care and a Strengthening Families introduction](#).

Vermont has invested in promoting the Strengthening Families™ Framework to support positive parenting relationships and skills by offering trainings in this approach in all areas of the state for a wide range of professionals working with families in a variety of roles. VT uses our ELC-RTT grant to offer the Strengthening Families Toolbox (17hr) training and supports a Community of Practice for childcare programs receiving Strengthening Families Grants funded through Medicaid investment dollars under our global commitment waiver.

X Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards. Describe: [The state uses CCDF to fund Northern Lights at CCV \(NL@CCV\)](#), the hub and connector of the professional development system in Vermont for early childhood and afterschool professionals. Working with key partners, [NL@CCV](#) supports and enhances a unified system of professional development for early childhood and afterschool practitioners, including offering annual trainings that meet the annual professional development requirements for child care licensing. Some also meet specific training requirements for child care licensing qualifications or for Specialized Child Care training requirements. [CCV @ Northern Lights](#) (under the CDD contract) ensures pedagogical training is aligned with [The Vermont Early Learning guidelines for children birth through 8 \(VELS\)](#). VELS is aligned with and supports the use of developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula and learning environments. [NL@CCV's List of Annual Trainings](#) includes: [Preschool STEAM](#); [Fundamentals for Early Childhood Professionals](#). [The Vermont Agency of Education \(AOE\)](#) supports professional development opportunities

[The Vermont Early Childhood Educator Summer Institute at Castleton State College](#) is an annual event that was seeded with ELCG/RTT and has sustained. All courses are aligned with the Vermont Early Learning Standards (VELS) and the Vermont Guiding Principles for Full Participation of Each and Every Child.

The Vermont Agency of Education has received a federal State Professional Development Grant (SPDG) to offer Early Multi-Tiered Systems of Support which utilizes a multi-tiered

framework of universal promotion, prevention and intervention in early literacy, numeracy and social emotional development.

Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development. Describe: Vermont has invested in promoting the Strengthening Families™ Framework to support positive parenting relationships and skills by offering trainings in this approach in all areas of the state for a wide range of professionals working with families in a variety of roles. VT uses our ELC-RTT grant to offer the Strengthening Families Toolbox (17hr) training and supports a Community of Practice for childcare programs receiving Strengthening Families Grants funded through Medicaid investment dollars under our global commitment waiver. These practices support development of five protective factors in families including parental resilience, social connectedness and concrete support in times of need. Providers implementing these practices understand how to connect families with the community supports that promote stability and strength. These practices, which promote the well-being of the child in the context of the well-being of the family is a critical element of comprehensive services.

Using data to guide program evaluation to ensure continuous improvement. Describe: Vermont has formally adopted Teaching Strategies GOLD as the approved and required child observation and assessment tool to be used in STARS (Vermont's QRIS) and in publicly funded PreK programs. Training on the appropriate use of this tool and how data from its use can and should be used to continuously improve the program and individualize instruction for children is offered through AOE.

Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe: _____

Caring for and supporting the development of children with disabilities and developmental delays. Describe: Through Children's Integrated Services (CIS), Vermont provides services to children with developmental delays eligible for Part C services through the use of contracted providers within each community. These Early Intervention services include service coordination, developmental education, physical therapy, occupational therapy, speech therapy, nutrition or nursing supports, etc.... Services provided under Part C are delivered within the child's natural setting as identified with the family. This may be the child's home or even child care. Child care providers are included as members of the child's team whenever applicable and with the permission of the child's parent/guardian(s).

Additionally, CIS provides consultation to families and child care providers to support children's inclusion in early childhood development programs (such as child care programs). These consultation services may be from a person specializing in Early Intervention, Early Childhood and Family Mental Health, Nursing or Specialized Child Care

services. Early Childhood Education (child care) providers in Vermont may seek to receive specialized child care provider designation by taking additional advanced level trainings, provided by child care resource and referral agencies, and maintaining a high quality rating and clear regulatory history with the State of Vermont Child Development Division.

CIS also has a Professional Development Committee that actively meets to plan professional development for those working with children through CIS. Typically, there is a conference or institute every year and Community of Practice calls scheduled on a monthly basis. These are often available to child care providers in collaboration with their CIS Child Care Coordinator

- Supporting the positive development of school-age children. Describe: Vermont Afterschool, Inc. has been a key partner in supporting these activities and receives funding from the CDD as well as the Agency of Education and other entities to provide support to individuals and organizations in providing quality afterschool, summer, and expanded learning experiences so that Vermont's children and youth have the opportunities, skills, and resources they need to become healthy, productive members of society. VA staff work with afterschool programs, advocates, and partners throughout the state to strengthen out-of-school time programming for children and youth in Vermont, to expand the number and types of programs being offered, and to improve access for all children and youth in the state. Specific services provided include training and technical assistance to afterschool programs via the Individualized System of Support for Afterschool Programs (ISS-AP) model, access to college courses, Afterschool Essentials training (a 45-hour introductory-level training), implementation of the Vermont Afterschool Professional Credential, STEM and other content-specific training, an annual conference and more.

Other. Describe: _____

- b) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply.

Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling

Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities

Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education

Other. Describe: _____

- 7.3.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory

has met these measures. The state measures the number of individuals with Vermont level certificates or credentials and/or degrees and looks for an increase in this information.

7.4 Quality Rating and Improvement System

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS.

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

- Yes, the state/territory has a QRIS operating statewide or territory-wide. Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available. The Vermont Step Ahead Recognition System (STARS), a statewide QRIS system, is jointly overseen by the Child Development Division (CDD) and the Agency of Education (AOE) and funded primarily through CCDF quality funds. A contract is in place to the Mary Johnson Children’s Center, a non-profit organization, to provide staff to review and approve STARS applications; coordinate, and staff complete program assessments; train and provide technical assistance to child care programs; and, promote STARS.
- Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis. Provide a link, if available. _____
- If Yes, describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. The state measures the increase in percent of programs participating at 3, 4, or 5-star level of QRIS, and the capacity at the 3, 4, and 5-star level.
-
- No, but the state/territory is in the QRIS development phase.
- No, the state/territory has no plans for QRIS development.

7.4.2 QRIS participation.

- a) Are providers required to participate in the QRIS?
- Participation is voluntary.
- Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level). _____
- Participation is required for all providers.
- b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory’s QRIS? Check all that apply.

- Licensed child care centers
- Licensed family child care homes
- License-exempt providers
- Early Head Start programs
- Head Start programs
- State prekindergarten or preschool programs
- Local district-supported prekindergarten programs
- Programs serving infants and toddlers
- Programs serving school-age children
- Faith-based settings
- Tribally operated programs
- Other. Describe: _____

7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. *Note:* If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.7.

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

- No.
- Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
 - Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system).
 - Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
 - Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
 - Other. Describe: _____
 - None.

7.4.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?

- No.
- X Yes. If yes, check any links between the state/territory's quality standards and licensing requirements.
 - X Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
 - X Embeds licensing into the QRIS.
 - State/territory license is a "rated" license.
 - Other. Describe: _____
 - Not linked.

7.4.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS.

- No.
- X Yes. If yes, check all that apply.
 - X One time grants, awards, or bonuses
 - X Ongoing or periodic quality stipends
 - X Higher subsidy payments
 - Training or technical assistance related to QRIS
 - Coaching/mentoring
 - X Scholarships, bonuses, or increased compensation for degrees/certificates
 - Materials and supplies
 - X Priority access for other grants or programs
 - X Tax credits (providers or parents)
 - X Payment of fees (e.g., licensing, accreditation)
 - Other:
 - None

7.4.6 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. The state measures the increase in percent of programs participating at 3, 4, or 5-star level of QRIS, and the capacity at the 3, 4, and 5-star level

7.5 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care.

7.5.1 What activities are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe.

- X Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low-income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families. Describe:

Vermont Parent Child Centers - Parent Child Centers (PCC's) were established in statute in 1988 and funded initially with general funds. The 15 PCC's are community-based organizations located across Vermont. PCC's serve young children and their families in their designated geographic regions. PCC's implement practices aligned with the National Center for the Study of Social Policy (CSSP). These practices are designed to strengthen families and protect children from abuse or neglect. The Department for Children and Families also supports the CSSP framework for strengthening families.

Early Head Start - The Early Head Start Program provides early, continuous, intensive, and comprehensive child development and family support services to low-income infants and toddlers and their families, and pregnant women and their families. The Early Head Start Program goals are:

- Providing safe and developmentally enriching caregiving which promotes the physical, cognitive, social and emotional development of infants and toddlers, and prepares them for future growth and development;
- Supporting parents, both mothers and fathers, in their role as primary caregivers and teachers of their children, and families in meeting personal goals and achieving self-sufficiency across a wide variety of domains;
- Mobilizing communities to provide the resources and environment necessary to ensure a comprehensive, integrated array of services and support for families; Ensuring the provision of high quality responsive services to family through the development of trained and caring staff.

Seven Head Start program have centers and sites located throughout the State that offer services designed to meet family needs. (see 6.1.1 for more information) Vermont's four Early Head Start programs have centers and sites in every county with the exception of Bennington, Rutland, and Windsor Counties.

Early Head Start-Child Care Partnerships - The goals of the Early Head Start-Child Care Partnership grant are to increase the supply of high-quality Early Head Start services to infants, toddlers, and their low-income families, raise the quality of center-based child care and family child care to that of Early Head Start, and increase the compensation of child care and family child care staff to that of Early Head Start staff. Of the four community-based organizations running Early Head Start programs, two receive federal Early Head Start-Child

Care Partnership Grants from the Office of Head Start to run Early Head Start-Child Care Partnership programs. Capstone Community Action and Champlain Valley Office of Economic Opportunity each received a federal Early Head Start – Child Care Partnership grant in 2015 to partner with high quality child care centers and family child care providers serving infants and toddlers from low-income families to developing and implementing innovative and collaborative services. Capstone Community Action’s Early Head Start-Child Care Partnership program serves infant and toddlers and their low-income families in Lamoille, Orange, Washington counties, and Champlain Valley Office of Economic Opportunity’s Early Head Start-Child Care Partnership program serve infants, toddlers and their low-income families throughout Franklin, Grand Isle, Chittenden and Addison counties (see 6.1.1 for more information)

- X Establishing or expanding the operation of community- or neighborhood-based family child care networks. Describe: Starting Points Networks are made up of local groups of early childhood professionals across 12 regions in Vermont who take initiative through leadership, professional development and peer support to encourage, learn and grow together.
- X Providing training and professional development to enhance child care providers’ ability to provide developmentally appropriate services for infants and toddlers. Describe: See section 7.3.1
- Providing coaching, mentoring, and/or technical assistance on this age group’s unique needs from statewide or territory-wide networks of qualified infant-toddler specialists. Describe:
- X Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.). Describe: The Child Development Division hosts the Part C Administrator in the Children’s Integrated Services unit. Part C support services are connected with Specialized Child Care Coordinators housed at community agencies across the state to provide supports and services to meet each child's unique needs and the needs of their family in their home and community. Payment for services comes from a variety of sources, including insurance, Medicaid, participating agencies, local schools, family cost share, etc. By assisting in the coordination of locally available services, Children’s Integrated Services is working to ensure that Vermont's young children and their families have access to the widest possible array of early intervention services.
- Developing infant and toddler components within the state/territory’s QRIS, including classroom inventories and assessments. Describe: _____
- X Developing infant and toddler components within the state/territory’s child care licensing regulations. Describe: Regulations specific to infants and toddlers include:
 - General ratio requirements,
 - Increased supervision requirements include naptime,

- [safe sleep practices,](#)
 - [food, nutrition and feeding requirements,](#)
 - [diapering, toilet learning/training,](#)
 - [rules around gates and stairways,](#)
 - [swimming ratios,](#)
 - [car seat safety,](#)
 - [ratio changes for non-ambulatory children transported in vehicles,](#)
 - [appropriate curriculum requirements specifically for infants and toddlers](#)
- X Developing infant and toddler components within the early learning and developmental guidelines. Describe: [Vermont Early Learning Standards](#). The domains and Standards are presented in nine age categories; some of which overlap intentionally in an effort to demonstrate the variation that is typical of early childhood development. The age breakdowns include chronological age as well as conventional terminology. There are three sections for infants and toddlers as follows:
- [Infants: Birth to 12 months](#)
 - [Younger Toddlers: 9-18 months](#)
 - [Older Toddlers: 18-36 months](#)
- X Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development. Describe:
- [The CDD has a webpage on child care for parents that includes information about finding and paying for childcare. Each resource has information specific to Infants and Toddlers. A toll-free number is provided for supporting parents in recognizing and finding high-quality infant and toddler care.](#)
 - [This information is available through the 12 local Community Child Care Support Agencies when accessing referral services for child care.](#)
 - [Help Me Grow Vermont provides a variety of human services supports to Vermonters including child development information. Families can access information by speaking with an HMG Vermont Child development specialist \(calling 211\) or through the Help Me Grow website.](#)
 - [The Vermont Early Learning Standards website includes a Family resources section that supports families in understanding and supporting their child's development.](#)
- Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being. Describe: _____
- Other. Describe: _____

- 7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures. The state measures the total desired capacity for infants and toddlers in 3, 4 and 5-star programs in the state. The desired capacity has increased from 3,683 slots in 2015 to 4,321 in 2017. This data is tracked by state, county, and Agency of Human Services districts. Need to add link to community profiles when available.

7.6 Child Care Resource and Referral

A Lead Agency may expend funds to establish or expand a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

- 7.6.1 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. N/A do not spend funds on a statewide system of child care resource and referral.

7.7 Facilitating Compliance With State Standards

- 7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards? Describe: CDD Licensers provide technical assistance to providers on the regulations through a variety of means including but not limited to webinars and individual support.

The State provides professional development services to meet the regulatory requirements through our grant agreement with Northern Lights @ Community College of Vermont. This includes the core basic Fundamentals Course for newly hired staff and others.

The State contracted with Better Kid Care to design an online Orientation that meets the requirements of our Regulations. The VT Orientation will be offered at no cost through 2018 and will remain available at low cost thereafter.

The State will be helping individuals and programs with the cost of fingerprinting as the new regulations become effective. As the new licensing regulations become effective, more resources are likely needed to help with costs related to water testing, carbon monoxide and smoke alarms, etc.

7.7.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?

X No.

Yes. If yes, which types of providers can access this financial assistance?

Licensed CCDF providers

Licensed non-CCDF providers

License-exempt CCDF providers

Other. Describe: _____

7.7.3 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. The state measures the increase in percent of programs participating at 3, 4, or 5-star level of QRIS, and the capacity at the 3, 4, and 5-star level.

7.8 valuating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children. _____

7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. _____

7.9 Accreditation Support

7.9.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

X Yes, the state/territory has supports operating statewide or territory-wide. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation. The State funds accreditation and report fees for the National Association for the Education of Young Children, the National Association of Family Child Care, Council on Accreditation, and National Early Childhood Program Accreditation. In addition, programs receive bonuses for achieving these accreditations.

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

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

No, the state/territory has no plans for accreditation development.

- 7.9.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. The state has maintained information on national accreditation, however it has not been a measurement in the past. The state will start measuring the increase in nationally accredited programs, by homes and centers starting in Federal Fiscal Year 2019.

7.10 Program Standards

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

- Health. Describe the supports: _____
- Mental health. Describe the supports: _____
- Nutrition. Describe the supports: _____
- Physical activity. Describe the supports: _____
- Physical development. Describe the supports: _____

- 7.10.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

7.11 Other Quality Improvement Activities

- 7.11.1 List and describe any other activities that the state/territory provides to improve the quality of child care services, which may include consumer and provider education activities, and describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. _____

8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud.

8.3 Internal Controls and Accountability Measures To Help Ensure Program Integrity

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

- X Issue policy manual
- X Issue policy change notices
- X Staff training. Describe: Eligibility for Child Care Financial Assistance occurs at 12 regional community child care support agencies. Eligibility Specialists hired by these agencies are trained by the State of Vermont Grant Monitors on subsidy policy and procedures. To ensure program integrity all new staff eligibility determinations are monitored for a period of 3-6 months.
- X Ongoing monitoring and assessment of policy implementation. Describe: The Child Care Financial Assistance Grant Monitors visit each community-based resource and referral agency twice monthly. They monitor the processing of case files to ensure new requirements are being met. Case file audits are conducted on 10-15 files per agency per month to ensure eligibility policies and procedures are implemented correctly.
- Other. Describe:

8.3.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices follow generally accepted accounting principles (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds, including the following:

- X Verifying and processing billing records to ensure timely payments to providers. Describe: Providers submit attendance in two-week intervals call service periods. The invoice may be submitted immediately after the end of the service period. Payments are processed every week to pick up any late payments submitted by providers. Invoices submitted each week by Wednesday at noon are processed on Thursday with checks issued on Friday. Each provider payment goes through a two-step approval process. During this process 10-15% of the total number of invoices submitted receive a secondary screening of authorized child care hours versus attendance hours submitted. Providers are contacted if the hours, coded days or payment amount does not look accurate or if the provider submitted for the incorrect service period.
- X Fiscal oversight of grants and contracts. Describe: Performance based agreements with CCCSAs specify the quality and accuracy of eligibility determination activities that is required by the CDD;
- X Tracking systems to ensure reasonable and allowable costs. Describe: CDD uses a web-based, centralized integrated data system that includes a rules engine for the determination of eligibility for CCFAP. This use of an automated attendance reporting and payment system (BFIS) simplifies attendance reporting and significantly reduces time between provider reporting and payment.

Other. Describe: _____

8.3.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Activities can include, but are not limited to, the following:

X Conduct a risk assessment of policies and procedures. Describe: Each year, all grantees undergo a risk assessment prior to authorization of a new grant. The assessment includes a review of performance measure compliance. These performance measures include improper payments percentages and eligibility determination requirements. Funds accountability, and agency audit practices are also assessed.

Establish checks and balances to ensure program integrity. Describe: _____

X Use supervisory reviews to ensure accuracy in eligibility determination. Describe: Monitoring Community Child Care Support Agencies (CCCSA) processes to determine eligibility for the Child Care Financial Assistance Program (CC FAP) including:

- Performance based agreements with CCCSAs specifying the quality and accuracy of eligibility determination activities that is required by the CDD;
- Regular on-site monitoring to ensure compliance with regulations and quality assurance including individual case reviews by CDD CC FAP Grant Monitors;
- Regular on-site technical assistance from CDD CC FAP Grant Monitors;

Other. Describe: _____

8.3.4 Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include intentional and unintentional client and/or provider violations, as defined by the Lead Agency. Administrative errors refer to areas identified through the error-rate review process. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

a) Check which activities that the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.

X Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

X Run system reports that flag errors (include types). Describe: BFIS generates regular reports related to enrollment of subsidized children at or above licensed capacity, children with multiple providers, and providers with consistently high subsidy payments.

X Review enrollment documents and attendance or billing records.

X Conduct supervisory staff reviews or quality assurance reviews.

X Audit provider records.

X Train staff on policy and/or audits.

Other. Describe: _____

b) Check which activities the Lead Agency has chosen to conduct to identify administrative errors.

- X Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).
- X Run system reports that flag errors (include types). Describe: Eligibility, enrollment, attendance and payment data is aggregated into program reports and regularly reviewed to detect any trends warranting further inquiry or investigation One FTE Program Integrity Investigator dedicated to the CCFAP runs audits on these reports to determine if administrative errors have occurred.
- X Review enrollment documents and attendance or billing records.
- X Conduct supervisory staff reviews or quality assurance reviews.
- X Audit provider records.
- X Train staff on policy and/or audits.
- Other. Describe:

8.3.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors. Check and describe any activities that the Lead Agency uses to investigate and recover improper payments due to program violations or administrative errors, as defined by your state/territory.

- a) Check activities that the Lead Agency uses to investigate and recover improper payments due to intentional program violations or fraud. Activities can include, but are not limited to, the following:
 - X Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: \$1.00
 - Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).
 - X Recover through repayment plans.
 - X Reduce payments in subsequent months.
 - X Recover through state/territory tax intercepts.
 - Recover through other means.
 - X Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

One program integrity investigator, assigned to the CCFAP Unit, is specifically educated to CCFAP improper payments. The CCFAP manager assigns cases, where UPV is suspected, to this individual and works closely with them on ensuing investigation and recovery.
 - Other. Describe:
- b) Describe the results of the Lead Agency activities regarding the investigation and recovery of fraud or intentional program violations. \$279,006.58 recovered since 2013
- c) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Activities can include, but are not limited to, the following:

- X Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: \$1.00
 - X Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).
 - X Recover through repayment plans.
 - X Reduce payments in subsequent months.
 - X Recover through state/territory tax intercepts.
 - Recover through other means.
 - X Establish a unit to investigate and collect improper payments. Describe: One program integrity investigator, assigned to the CCFAP Unit, is specifically educated to CCFAP improper payments. The CCFAP manager assigns cases, where IPV is suspected, to this individual and works closely with them on ensuing investigation and recovery and consequences to provider status.
 - Other. Describe:
- d) Check any activities that the Lead Agency will use to investigate and recover improper payments due to administrative errors.
- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe:
 - Coordinate with and refer to the other state/territory agency(ies) (e.g., state/territory collection agency, law enforcement agency).
 - Recover through repayment plans.
 - Reduce payments in subsequent months.
 - Recover through state/territory tax intercepts.
 - Recover through other means.
 - Establish a unit to investigate and collect improper payments and describe the composition of the unit below.
 - Other. Describe:
- 8.3.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?
- X Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified. In cases of suspected intentional program violation, the case is referred to the Program Integrity Investigator in the CCFAP Unit. If fraud is substantiated, the Child Care Financial Assistance client is excluded from further participation in the CCFAP and a payment plan is established to recover overpayments. This may include tax intercepts. The Attorney General's office makes decisions on whether to accept these cases for prosecution
Child Care Financial Assistance clients may appeal to the DCF Commissioner and the Vermont Human Services Board if they feel they have been unfairly excluded from participation in the CCFAP. This process includes a review and decision by a designee of the Commissioner in which the client has an opportunity to present their perspective on the

grounds for exclusion. If the provider is not satisfied with the Commissioner's Review decision they can continue their appeal to an impartial Human Services Board.

- X Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified. In cases of suspected intentional program violation, the case is referred to the Program Integrity Investigator in the CCFAP Unit. If fraud is substantiated, the child care provider is excluded from further participation in the CC FAP and a payment plan is established to recover overpayments. This may include tax or other income intercepts. The Attorney General's office makes decisions on whether or not to accept these cases for prosecution

Child Care providers may appeal to the DCF Commissioner and the Vermont Human Services Board if they feel they have been unfairly excluded from participation in the CCFAP. This process includes a review and decision by a designee of the Commissioner in which the provider has an opportunity to present their perspective on the grounds for exclusion. If the provider is not satisfied with the Commissioner's Review decision they can continue their appeal to an impartial Human Services Board.

- X Prosecute criminally.

- Other. Describe: