Florida Child Care Development Fund (CCDF) Plan with Conditional Approval Letter for FY 2016-2018
Date: Monday, June 27, 2016

The Office of Child Care (OCC) is pleased to release the PDF (Portable Document Format) copy of the approved FY 2016-2018 Florida CCDF Plan that became effective June 1, 2016 and the conditional approval letter. The Plan serves as the application for CCDF funds by providing a description of, and assurance about, the grantee’s child care program and all services available to eligible families. OCC asked States and Territories to write their Plans based on a reasonable interpretation of the Act, pending completion of a final regulation. States and Territories had the option to outline an implementation plan for one or all of the 26 new areas if the State/Territory was not yet able to certify compliance. Thus, these Plans are conditionally approved until each State/Territory fully implements all new requirements of the CCDBG Act of 2014. The OCC will partner with States and Territories to support and monitor the successful and timely implementation of all provisions of the Act. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to amend their program at any time. All amendments must be submitted to OCC for approval within 60 days of the effective of the change.

Please find the following two documents within this PDF:

2016-2018 Florida CCDF Plan Conditional Approval Letter – OCC issued a letter with the conditions of approval for each State and Territory. In reviewing plans and waiver/extension requests, OCC gave careful consideration to the statutory conditions outlined in the Act, as well as the length of time requested, with the goal of having all provisions related to the Act fully implemented by October 1, 2018 corresponding to the start of the FY2019-2021 CCDF Plan period. The approval letter covers the CCDF Plan for the period of June 1, 2016, through September 30, 2018. A “conditionally approved” plan is a fully approved plan with conditions to be met based on waiver requests, if applicable, and implementation and corrective action plans for unmet requirements. The conditions will be deemed fully met once all provisions in the Child Care and Development Block Grant (CCDBG) Act of 2014 are fully implemented.

2016-2018 Florida CCDF Plan - The Plan describes the CCDF program to be administered by Florida for the period 6/1/2016 – 9/30/2018 as conditionally approved by OCC. The Plan serves as the application for CCDF funds by providing a description of, and assurance about, the grantee’s child care program and all services available to eligible families. 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 therein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text.

NOTE: The CCDF Plan reflects the services and activities as reported by the Florida Lead Agency in their CCDF Plans for Fiscal Years 2016-2018. The CCDF Plans offer a snapshot into current and planned efforts, initiatives and implementation plans for each State/Territory through September 30, 2018. These Plans are not a catalog of all activities undertaken by the State/Territory. Administration for Children and Families (ACF) is not responsible for the contents of these CCDF plans.
June 14, 2016

Rodney J. MacKinnon, Executive Director
Department of Education/Office of Early Learning, OEL
250 Marriott Drive
Tallahassee, Florida 32399

Dear Executive Director MacKinnon:

The Office of Child Care (OCC) recognizes that there are many new requirements included in the Child Care and Development Block Grant (CCDBG) Act of 2014 that you are working to implement during this Plan period. We appreciate the time and energy that you put into developing your Child Care and Development Fund (CCDF) Plan to reform and effectively administer your program. I am pleased to inform you that the Florida CCDF Plan for the period of June 1, 2016, through September 30, 2018, has been conditionally approved. A "conditionally approved" plan is a fully approved plan with conditions to be met based on your waiver requests, if applicable, and implementation plans for unmet requirements. The conditions will be deemed fully met once all provisions in the CCDBG Act of 2014 are fully implemented and implementation plan action steps are completed. At that time the Florida CCDF Plan will be approved without conditions. OCC gave careful consideration to the statutory conditions outlined in the Act, as well as the length of time requested, with the goal of having all provisions related to the Act fully implemented by October 1, 2018 corresponding to the start of the FY2019-2021 CCDF Plan period.

The following conditions apply to your CCDF Plan:

- Waiver Requests – The CCDBG Act of 2014 gives the Secretary the option to waive statutory provisions or penalties for up to 3 years if certain statutory conditions are met. Background Check provisions were not considered under this waiver implementation process because the Act provided for a separate extension
process for States and Territories unable to comply by September 30, 2017. Decisions regarding your waiver requests are listed below.

- Your waiver request(s) for Graduated Phase-Out (3.1.5), 12-month eligibility (3.3.1), Child Care Standards that address ratios and group size (5.1.3), Policies to Enforce Licensing Requirements (5.2.1), Inspections for Exempt Providers (5.2.2c), Professional Development Requirements (6.1.1) have been approved through the date listed in your Implementation Plan, not to exceed one year.

- Health and Safety Training Corrective Action Plan – The Administration for Children and Families considers health and safety training critical to reducing risk of injury and death for children receiving assistance. According to the Program Instruction CCDF-ACF-PI-2015-09 issued December 2015, all new and existing caregivers and teachers serving children receiving CCDF assistance must have completed these training requirements by this date. Florida will not meet the health and safety training provision by the effective date of September 30, 2016; therefore you will be on a Corrective Action Plan starting October 1, 2016. You will now have an additional year to achieve this goal. You have 60 days following receipt of this letter to formally submit your extended timeline for implementing this requirement, not to exceed one year, by completing or revising the Implementation Plan at 5.1.6b in the ACF-118 system.

Key principles of the CCDF are to provide equal access to child care for children receiving child care assistance and to ensure parental choice. Provider payment rates set too low undermine these principles. As you are aware, the CCDBG Act of 2014 requires states and territories to take the cost of quality into account when setting rates, and to set rates based on the results of the most recent market rate survey or alternative methodology. We continue to be concerned that your rates may not allow for equal access. OCC plans to make review of payment rates a priority for our upcoming implementation monitoring visits. Thus, the conditional approval of your Plan does not constitute a final determination that your payment rates are sufficient to provide access to child care services for eligible families that are comparable to those provided to families that do not receive subsidies, as required by law.
You will receive a Notice of Grant Award in October 2016 from the Office of Administration in the Administration for Children and Families. The notice will include the amount of your award and any additional terms and conditions for the receipt of CCDF program funds. During the effective period of this plan, any substantial changes to the Florida program must be submitted as a plan amendment to your Regional Office for approval in accordance with 45 CFR 98.18(b).

We remind you that your CCDF-funded child care program for in-home providers must comply with all applicable Federal laws and regulations, including Federal wage and income tax laws governing domestic workers. Questions regarding Federal wage laws should be directed to your local or district office of the Wage and Hour Division within the U.S. Department of Labor. Likewise, questions regarding Federal income tax laws should be directed to your local or district office of the Internal Revenue Service.

We look forward to working together toward implementation of the CCDBG Act of 2014 and promoting the early learning and development of children along with family economic stability and success. If you have any questions, please contact Eric Blanchette, Child Care Program Manager, Office of Child Care at (404) 562-2782 or eric.blanchette@acf.hhs.gov. Thank you for all you do each day for children and families.

Sincerely,

Rachel Schumacher
Director
Office of Child Care

cc: Stephanie L. Gehres, Deputy Director
Eric Blanchette, Regional Program Manager, Office of Child Care Region IV
Child Care and Development Fund (CCDF) Plan
For
Florida
FFY 2016-2018

1 Define CCDF Leadership and Coordination with Relevant Systems

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

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

1.1 CCDF Leadership

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E(c)(1))
1.1.1 Which Lead Agency is designated to administer the CCDF program?

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

Name of Lead Agency:  Department of Education/Office of Early Learning, OEL
Address of Lead Agency:  250 Marriott Drive, Tallahassee, Florida 32399
Name and Title of the Lead Agency Official:  Rodney J. MacKinnon, Executive Director
Phone Number:  850-717-8554
E-Mail Address:  rodney.mackinnon2@oel.myflorida.com
Web Address for Lead Agency (if any):  www.floridaearlylearning.com

1.1.2 Who is the CCDF administrator?

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

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator:  Rodney J. MacKinnon
Title of CCDF Administrator:  Executive Director
Address of CCDF Administrator:  250 Marriott Drive, Tallahassee, Florida 32399
Phone Number:  850-717-8554
b) Contact Information for CCDF Co-Administrator (if applicable):

Name of CCDF Co-Administrator: Stephanie L. Gehres
Title of CCDF Co-Administrator: Deputy Director
Phone Number: 850-717-8598
E-Mail Address: stephanie.gehres@oel.myflorida.com

Description of the role of the Co-Administrator:
The Co-Administrator is responsible for ensuring timely communication with the Office of Child Care, responding to requests and ensuring all reporting requirements are met. The Co-Administrator ensures the CCDF Administrator is apprised of all communications, technical assistance and policy implications.

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any): 850-717-8550 or toll free 1-866-357-3239
Web Address for CCDF program (for the public) (if any): www.floridaearlylearning.com
Web Address for CCDF program policy manual (if any):
Web Address for CCDF program administrative rules (if any):
https://www.flrules.org/gateway/ChapterHome.asp?Chapter=6m-4

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

Outreach and Consumer Education (section 2)
Agency/Department/Entity Department of Education/Office of Early Learning
Name of Lead Contact  Courtnie Wheeless

Subsidy/Financial Assistance (section 3 and section 4)

Agency/Department/Entity  Department of Education/Office of Early Learning

Name of Lead Contact  Stephanie L. Gehres

Licensing/Monitoring (section 5)

Agency/Department/Entity  Department of Children and Families/Office of Child Care Regulation

Name of Lead Contact  Samantha Wass De Czege

Child Care Workforce (section 6)

Agency/Department/Entity  Department of Education/Office of Early Learning

Name of Lead Contact  Erin Smeltzer

Quality Improvement (section 7)

Agency/Department/Entity  Department of Education/Office of Early Learning

Name of Lead Contact  Erin Smeltzer

Grantee Accountability/Program Integrity (section 8)

Agency/Department/Entity  Department of Education/Office of Early Learning

Name of Lead Contact  Reginal Williams

1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b))
1.2.1 Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level?

In other words, identify whether CCDF program rules and policies are established by the state or territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies. Check one.

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

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

☑ Eligibility rules and policies (e.g., income limits) are set by the:
  ☑ State/Territory
  ☐ County.

  If checked, describe the type of eligibility policies the county can set

☐ Other local entity (e.g., workforce boards, early learning coalitions).

  If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity(ies) can set

☐ Other.

  Describe:

☑ Sliding fee scale is set by the:
  ☑ State/Territory
  ☐ County

  If checked, describe the type of sliding fee scale policies the county can set

☐ Other local entity (e.g., workforce boards, early learning coalitions).

  If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity(ies) can set

  The 30 early learning coalitions (ELCs) and Redlands Christian Migrant Association (RCMA) establish their individual local sliding fee scales. The sliding fee scales
include full-time and part-time parent copayment rates and any sibling discounts. The sliding fee scales are updated each year based on the Federal Poverty Guidelines and are submitted to and approved by the Office of Early Learning (OEL). A listing of the ELCs and RCMA can be found at the following link:

☐ Other.
Describe:

☑ Payment rates are set by the:
☑ State/Territory
☐ County.
If checked, describe the type of payment rate policies the county can set

☑ Other local entity (e.g., workforce boards, early learning coalitions).
If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set
The 30 early learning coalitions and RCMA establish child care provider payment rates for their service delivery areas, taking into consideration the average market rate. The rates are approved by OEL.

☐ Other.
Describe:

☑ Other.
List and describe (e.g., quality improvement systems, payment practices):
Local early learning coalitions have established local quality initiatives and QRIS Programs. There are currently 15 ELCs with a local voluntary QRIS. For the full list and links to each of the coalition's QRIS please see 7.2.1.
1.2.2 How is the CCDF program operated in your State/Territory?

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

a) Who determines eligibility?

☐ CCDF Lead Agency

☑ TANF agency

Describe.

The Florida Department of Children and Families (DCF) Economic Self-Sufficiency Program determines TANF eligibility.

☑ Other State/Territory agency.

Describe.

The DCF Office of Child Welfare, DCF- designated lead agencies on homelessness, and DCF-certified domestic violence centers. DCF also provides child care referrals for families with children who are determined "at risk" as defined in Section 1002.81(1), Florida Statutes (F.S.).

☑ Local government agencies such as county welfare or social services departments

Describe.

TANF Local Workforce Development Boards and their designated agent (for work requirements) provide child care referrals for families subject to federal work requirements receiving TANF or transitioning from TANF.

☐ Child care resource and referral agencies

Describe.

☑ Community-based organizations
Describe.

Community Based Care Organizations contracted with DCF Office of Child Welfare, Office on Homelessness, and Domestic Violence Program provide child care referrals for families with children who are determined "at risk" as defined in Section 1002.81(1), Florida Statutes (F.S.).

☑ Other.
Describe.

The 30 ELCs and RCMA determine eligibility for families based on the referrals and for all other non-referral based families. Sheriff's offices contracted with DCF may also provide referrals for children in families that are under protective investigation.

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

☑ CCDF Lead Agency
☐ TANF agency
Describe.

☑ Other State/Territory agency.
Describe.

DCF.
☑ Local government agencies such as county welfare or social services departments
Describe.

Sheriff's offices contracted with DCF for protective investigations.

☑ Child care resource and referral agencies
Describe.

The OEL's Child Care Resource and Referral (CCR&R) Network serves all families seeking early learning services in Florida free of charge. Trained staff provide consumer education on child care best practices and quality indicators for early learning to inform families on how to recognize quality in early learning programs. CCR&R specialists also provide listings of early learning program providers to parents within their local areas, and information for and referrals to other local community resources.

The CCR&R State Network serves two fundamental purposes: (1) to help parents identify and select quality early learning programs that best meet their children's
needs and (2) to provide technical assistance that addresses and improves the
quality, availability and affordability of child care. This is accomplished through the
 provision of information and resources about quality early learning options and
work/family solutions to families, child care professionals and government entities.
Each CCR&R program maintains a database of legally operating child care providers
within its service area. The CCR&R database captures information on licensed,
license-exempt, faith-based, registered family child care homes, and may also include
information on non-traditional child care providers, such as summer camps,
afterschool programs and Boys and Girls Clubs. This database is the primary data
source for families searching for child care arrangements. The database also supports
local businesses by serving as an advertisement resource for child care services.
Each family who contacts CCR&R for information receives a listing of child care
providers that meets that family's individual needs, suggestions on how the family can
proceed with its search for a child care provider, website information for the state
licensing database and an invitation to call back if further assistance is needed.
Parents also receive electronic or printed resources to assist parents in their search
for quality care.

☑ Community-based organizations
Describe.
Community Based Care Organizations contracted with DCF Office of Child Welfare.
☑ Other.
Describe.
The 30 ELCs, RCMA, Head Start Agencies.

c) Who issues payments?
☑ CCDF Lead Agency
☐ TANF agency
Describe.

☐ Other State/Territory agency.
Describe.
Local government agencies such as county welfare or social services departments
Describe.

Child care resource and referral agencies
Describe.

Community-based organizations
Describe.

Other.
Describe.

The 30 early learning coalitions and RCMA. Payments for child care services are issued to providers and are distributed electronically (EFT) or by check by the early learning coalitions and RCMA.

1.3 Consultation in the Development of the State Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government. (658D(b)(2)) General purpose local governments is defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

1.3.1 Check who and describe how the Lead Agency consulted with these entities in the development of the CCDF Plan (check all that apply).

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

☑ [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns

Describe:
Local public school district representatives received invitations to the workshop and were provided drafts for comments on two occasions.


Describe:

If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?

☐ Yes,
☐ No.

If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy

The CCDF Sub-committee includes cross-agency representation. The following state agencies were invited to participate in the subcommittee and reviewed the draft plan: Department of Education, Department of Children Families, Department of Health, and Department of Economic Opportunity.

☑ [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes.

Describe, including which Tribe(s) you consulted with
Mickeyousee Indian Tribe participated in the workshop and were provided drafts for comments on two occasions.

☐ Check N/A if no Indian Tribes and/or Tribal organizations in the State
☑ State/Territory agency responsible for public education.
Describe:

OEL is within the Florida Department of Education. Other DOE divisions that participated in the subcommittee and reviewed the draft plan are the Bureau of Exceptional Education and Student Services, the Office of K-12 School Choice, and the Homeless Education Program.

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

Describe:
The Florida Department of Education, Bureau of Exceptional Education and Student Services and the Office of K-12 School Choice participated in the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

☑️ State/Territory institutions for higher education, including community colleges.

Describe:
Polk State College participated in the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

☑️ State/Territory agency responsible for child care licensing.

Describe:
Department of Children and Families/Office of Child Care Regulation participated in the initial drafting of the Plan, attended the workshop and provided comments on both drafts that were sent out to the sub-committee. Additionally OEL and DCF meet biweekly to discuss implementation of CCDF.

☑️ State/Territory office/director for Head Start State collaboration.

Describe:
Florida Head Start Collaboration Office participated in the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

☑️ State/Territory/local agencies with Early Head Start-Child Care Partnerships grants.
Describe:
4C Head Start/Early Head Start received invitations to the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

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

Describe:
Florida Department of Health, Bureau of Child Care Food Programs participated in the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

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

Describe:

☑️ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services.

Describe:
The Association of Early Learning Coalitions, Florida State University Center for Prevention and Early Intervention Policy, Florida Governor's Office of Adoption and Child Protection, and The Children's Forum. All entities received invitations to the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

☑️ State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant

Describe:
Florida Home Instruction for Parents of Preschool Youngsters (HIPPY) Training and Technical Assistance Center, University of South Florida participated in the workshop and were provided drafts for comments on two occasions.

☑️ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).

Describe:
Bureau of Early Steps & Newborn Screening, Division of Children's Medical Services, Florida Department of Health participated in the workshop and were provided drafts for
comments on two occasions.

☑ McKinney-Vento State coordinators for Homeless Education.
Describe:
Homeless Education Program, Florida Department of Education received invitations to the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

☐ State/Territory agency responsible for public health.
Describe:
Florida Department of Health's Bureau of Child Care Food Programs and Bureau of Early Steps & Newborn Screening participated in the workshop and were provided drafts for comments on two occasions.

☐ State/Territory agency responsible for mental health.
Describe:

☑ State/Territory agency responsible for child welfare.
Describe:
Florida Department of Children and Families, Office of Child Welfare, received invitations to the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

☐ State/Territory liaison for military child care programs.
Describe:

☐ State/Territory agency responsible for employment services/workforce development.
Describe:
Department of Economic Opportunity participated in the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

☑ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).
ACCESS Program Policy, Department of Children and Families participated in the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

☑️ State/community agencies serving refugee or immigrant families.

Describe:
Redlands Christian Migrant Association (RCMA) participated in the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

☑️ Child care resource and referral agencies.

Describe:
Office of Early Learning, Early Learning Coalitions and local Child Care Resource and Referral entities participated in the workshop and provided comments for incorporation in the Plan. All comments received were reviewed and incorporated as appropriate.

☑️ Provider groups or associations.

Describe:
Child Development Education Alliance, Florida Association for Child Care Management, Florida Family Child Care Home Association, Florida Association of Christian Colleges and Schools, Florida Association for the Education of Young Children. All entities received invitations to the workshop and were provided drafts for comments on two occasions. All comments received were reviewed and incorporated as appropriate.

☐ Worker organizations.

Describe:

☐ Parent groups or organizations.

Describe:

☑️ Other.

Describe:
The United Way of Florida and The University of Florida - Lastinger Center for Education participated in the workshop and provided comments for incorporation in the Plan.
1.3.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)).

Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, the description should include:

a) Date(s) of notice of public hearing: 01/21/2016

   **Reminder** - Must be at least 20 calendar days prior to the date of the public hearing.

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


c) Date(s) of public hearing(s): 02/12/2016

   **Reminder** - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.

d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed Tallahassee, Florida, Office of Early Learning

e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s) The plan is posted on OEL's website, [http://www.floridaearlylearning.com/oel_resources/ccdf_plan.aspx](http://www.floridaearlylearning.com/oel_resources/ccdf_plan.aspx).

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? The OEL recorded the hearing and captured all comments made by the public for consideration or incorporation into the final 2016-2018 Child Care Development Fund Plan. The OEL also invited public comments to be submitted via email (ccdfplan@oel.myflorida.com) prior to and during the hearing.
1.3.3 Describe the strategies used by the Lead Agency to make the CCDF Plan and Plan Amendments available to the public. Check all that apply and describe the strategies below, including any relevant links as examples.

☑ Working with advisory committees.
Describe:
The OEL created a CCDF Sub-Committee to provide input on the development of the 2016-2018 Child Care and Development Fund State Plan.

☐ Working with child care resource and referral agencies.
Describe:

☐ Providing translation in other languages.
Describe:

☑ Making available on the Lead Agency website.
List the website:

☑ Sharing through social media (Twitter, Facebook, Instagram, email, etc.).
Describe:
OEL shared information regarding development of the CCDF Plan through email and the website prior to the hearing.

☑ Providing notification to stakeholders (e.g., provider groups, parent groups).
Describe:
Provider groups were invited to be members of the CCDF sub-committee.

☐ Other.
Describe:
1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

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

1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families. (658E(c)(2)(O))

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

☑ [REQUIRED] Programs operating at the Federal, State and local levels for children in pre-school programs (e.g., state-or locally-funded pre-k, Head Start, school-based programs, public and private preschools, programs serving preschool children receiving special education services, etc.).

Describe:

The OEL is responsible for administration and oversight of the State's Voluntary Prekindergarten Education Program (VPK). The 30 ELCs and RCMA administer VPK locally. These are the same entities responsible for school readiness, and they work closely with providers and the community to ensure a seamless system of early learning. Head Start, Early Head Start and Migrant and Seasonal Head Start grantees collaborate with the 30 ELCs to access available CCDF funds to provide full day, full year comprehensive services...
for eligible families. Head Start and Migrant Head Start also provide the VPK Program and coordinate with Local Education Agencies (LEA) to recruit and provide services to children with disabilities under Part B of the Individuals with Disabilities Act (IDEA). The OEL provides families an entry point within the statewide child care management system to access Head Start and Early Head Start program information and applications.

☑ [REQUIRED IF APPLICABLE] Tribal early childhood programs.
Describe, including which Tribes coordinating with:
The OEL has attempted to contact tribal organizations within Florida. At this time there are no coordinated activities taking place due to the inability to make contact with the appropriate people. The OEL will use resources provided by the Child Care Technical Assistance Network to continue pursuing opportunities for coordination.

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

☑ [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities.
Describe:
The OEL coordinates efforts with state agencies that oversee implementation of the Individuals with Disabilities Education Act (IDEA). The Florida Department of Health (DOH) oversees Part C, Early Steps Program; and the Florida Department of Education (DOE) oversees Part B, Pre-kindergarten Programs for Children with Disabilities. Early Head Start grantees coordinate with the Early Steps Program to recruit and provide comprehensive services to infants and toddlers with disabilities.
The OEL maintains a statewide toll-free Warm Line for the purpose of providing assistance and consultation to child care personnel about health, developmental, disability and special needs issues. Early learning coalitions collaborate with comparable local service providers. Many utilize inclusion specialists (employed by the early learning coalition or other service providers) to promote increased awareness of early childhood inclusion issues and provide training and technical assistance regarding the needs of children with disabilities. Local inclusion specialists work with child care personnel on issues such as typical and atypical development; environmental adaptations; social and emotional needs of children, managing challenging behaviors; and strategies to help children derive maximum benefit from the child care experience. In addition, a representative of programs serving children with disabilities serves as a member of each early learning coalition board.
The Florida Expanding Opportunities Workgroup for early childhood inclusion is a cross-
agency initiative promoting inclusive options for young children with disabilities and their families, representing DOE, OEL, DOH, Children's Medical Services Early Steps, the Florida Head Start State Collaboration Office, parent organizations, the Florida Developmental Disabilities Council, institutions of higher education, family members and representatives from community programs. This group has established a strategic plan to expand opportunities to children with special needs through greater collaboration at the state and local levels. Additionally, the workgroup is providing OEL support and expertise with the design of each quality initiative to ensure incorporation of inclusive practices for children with all exceptionalities.

[REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney-Vento Homeless Education Assistance Act).

Describe:
Children and families experiencing homelessness are categorically eligible for Head Start, Early Head Start and Migrant and Seasonal Head Start programs, meaning that regardless of income, families experiencing homelessness, as the McKinney-Vento Homeless Education Act defines, are eligible for Head Start program services. Families are referred to Head Start programs from the ELCs, LEAs and community homeless coalitions. This makes CCDF funds available for other families. The OEL, through collaboration with DCF designated lead agency on homelessness, is dedicated to providing accessible, affordable and quality early learning services to children and families experiencing homelessness. The DCF's Office on Homelessness recognizes 28 lead agencies that provide continuum of care services for homeless families in the state of Florida. These agencies create the framework for a comprehensive array of supportive services and emergency, transitional and permanent housing to address the various needs of people who are homeless or at risk of becoming homeless. Children are eligible for school readiness services if they are in the custody of a parent who is considered homeless, with DCF-designated lead agency on homelessness verification. A memorandum of agreement between early learning coalitions and DCF's Office on Homelessness-designated lead agencies establishes the process for collecting the required eligibility documentation. The designated lead agency's case manager with whom the family is working will initiate the referral process if the case manager determines that the family needs child care. The case manager may request school readiness services for the referred families. Section 1002.87, F.S., requires coalitions to categorize the referred families as priority two. In order to qualify and remain eligible for services, the child's parent(s) must actively participate in case management services through one of DCF's Office on Homelessness-designated lead agencies.
Early childhood programs serving children in foster care.

Describe:
Foster children and families are referred to school readiness programs from community-based organizations, and are considered to be in protective services for the purposes of CCDF. If the ELC has a waiting list they may refer these families to local Head Start programs. Children in foster care are categorically eligible for Head Start, Early Head Start and Migrant and Seasonal Head Start Services, meaning that the child is automatically eligible and they do not have to meet the Head Start income guidelines. This coordination of services assists the state in providing accessible, affordable and quality early learning services to children in foster care.

State/Territory agency responsible for child care licensing.

Describe:
The DCF is responsible for child care licensing. Pursuant to s. 402.26, F.S., the legislative intent is that DCF must ensure that children are well cared for in a safe, healthy, positive and educational environment by trained, qualified child care staff in licensed child care arrangements. Florida law identifies those child care establishments that must be licensed. State licensure standards address health, sanitation, safety and adequate physical surroundings; health and nutrition; and child development needs of children in child care. The DCF is statutorily responsible for administering child care licensing and training in 62 of the state’s 67 counties. State law also allows county governments with licensing standards that meet or exceed state minimum standards to designate a local licensing agency to license child care facilities in their counties. Currently, five counties have local licensing and inspection programs. In the remaining counties, DCF performs child care regulatory and compliance activities for licensed child care arrangements. Pursuant to s. 402.307, F.S., DCF’s oversight responsibility for child care licensing in the five locally licensed counties is:
- Within 30 days after the promulgation of state minimum standards, each county shall provide DCF with a copy of its standards if they differ from the state minimum standards. At the same time, each county shall provide DCF with the administrative procedures it intends to use for the licensing of child care facilities.
- The DCF shall have the authority to determine if local standards meet or exceed state minimum standards. Within 60 days after the county has submitted its standards and procedures, DCF, upon being satisfied that such standards meet or exceed state minimum standards and that there is compliance with all provisions of ss. 402.301-402.319, F.S., shall approve the local licensing agency.
- Approval to issue licenses for DCF shall be renewed annually. For renewal, the local licensing agency shall submit to DCF a copy of the licensing standards and procedures applied. An onsite review may be made if deemed necessary by DCF.

- If, following an onsite review, DCF finds the local licensing agency is not applying the approved standards, DCF shall report the specific violations to the county commission of the involved county, which shall investigate the violations and take whatever action necessary to correct them.

- To ensure that accurate statistical data are available, each local licensing agency shall report annually to DCF the number of child care facilities under its jurisdiction, the number of children served, the ages of children served and the number of revocations or denials of licenses.

OEL, in cooperation with the early learning coalitions, coordinates with the DCF and the local licensing agencies to avoid duplicating interagency activities, such as health and safety monitoring.

☑ State/Territory agency with Head Start State collaboration grant.

Describe:

Successful collaborations between Head Start, Early Head Start and Migrant and Seasonal Head Start grantees and OEL have expanded opportunities for additional children to receive Head Start comprehensive services (as described in 45 CFR Parts 98 and 99, Section 98.12). Using a variety of service delivery models, and maximizing the funds, Head Start and local early learning coalitions can provide more families with more comprehensive services, thus better meeting the needs of working families throughout the state. Head Start grantee agencies may also participate in VPK and currently provide VPK services to nearly 10,000 Head Start 4-year-old children. Each early learning coalition board has a representative member from Head Start. As a provision of the Revised Head Start Act of 2007, Head Start grantees must develop agreements with their early learning coalitions for enhanced communication, service delivery and data collection purposes. At the state level, the Head Start State Collaboration Office is housed within OEL and they work closely together on policies.

☐ State Advisory Council authorized by the Head Start Act.

Describe:

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

Describe:

The OEL collaborates with the Head Start State Collaboration Office, the ELCs and the nine
Early Head Start- Child Care Partnership grantees to coordinate the delivery of services, inform policy decisions and to ensure smooth implementation of these new grants. OEL has set up an email address dedicated to policy questions specific to these grants. Some of these policy decisions, for these grantees, include extending to a 12-month redetermination of family eligibility instead of a six-month redetermination process and waiving parent fees on a case by case basis when parents engage in Early Head Start parent training activities.

☑ McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons

Describe:
The Homeless Education Program in the Florida Department of Education (DOE) participates on advisory groups and provides consultation, as needed, on outreach and identification of qualifying families. Local Education Agency (LEA) Homeless Education Liaisons provide School Readiness Program information to newly identified homeless families and make referrals to their local ELC. Head Start, Early Head Start and Migrant and Seasonal Head Start programs also coordinate with their McKinney-Vento Liaisons to recruit and enroll homeless families through partnership agreements with LEAs. This coordination of services assists the state in developing a supply of quality care for the homeless population.

☑ Child care resource and referral agencies.

Describe:
The CCR&R State Network office, housed within OEL, contracts and coordinates with 30 early learning coalitions throughout the state to offer families and providers comprehensive child care resource and referral services at the local level, including consumer education, provider listings, information on financial and community resources, and provider training and technical assistance. State network staff develop and provide local CCR&R agencies with consumer education resources to educate parents and providers on best practices in child development and early childhood care and education. This coordination links comprehensive services to children in child care settings.

☑ State/Territory agency responsible for public education.

Describe:
The Florida Department of Education Office of Early Learning (OEL) is the Lead Agency responsible for administering the State's CCDF program. Early learning coalition board representation includes the district school superintendent. Early learning coalitions and RCMA work with local school districts and community colleges within their areas to provide supports or direct services for the School Readiness and VPK Education programs.
Coordination efforts with DOE also include development of the *Florida Early Learning Developmental Standards: Birth to Five*, development of VPK Standards for children enrolled in VPK programs and administration of accountability requirements for the VPK Program through development and implementation of the Florida Kindergarten Readiness Screener (FLKRS). These efforts assist the state in enhancing and aligning quality of services.

☑ State/Territory institutions for higher education, including community colleges.

Describe:
The OEL also contracts with the University of South Florida to provide the Home Instruction for Parents of Preschool Youngsters (HIPPY) program, which is a home-based instruction program for at-risk families with children ages 3 to 5. This coordination of services assists the state in linking comprehensive services to children in child care settings for a smooth transition between programs.

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

Describe:
The OEL coordinates with DOH to share resources on healthy food and nutrition practices and to reduce fraud in the Child and Adult Care Food Program. The goal is to streamline services.

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

Describe:

☐ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services.

Describe:

☐ State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant.

Describe:

☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).

Describe:
State/Territory agency responsible for public health.
Describe:
The OEL coordinates with DOH for KidCare (state children's health insurance program), early intervention services through Children's Medical Services, Early Steps and the Child Care Food Program to enhance and align the quality of services. Some early learning coalitions contract with local county health departments to enhance the quality of services to families. A county health department director or designee serves on each early learning coalition board. The OEL’s Warm Line links child care providers to early intervention services such as Early Steps.

State/Territory agency responsible for mental health.
Describe:

State/Territory agency responsible for child welfare.
Describe:
The OEL coordinates with the DCF Family Safety Office to promote child safety and ensure at-risk children have continuity of care and access to high-quality care.

State/Territory liaison for military child care programs.
Describe:

State/Territory agency responsible for employment services/workforce development.
Describe:
The Department of Economic Opportunity (DEO) coordinates with DCF to implement employment and training work requirements for TANF recipients. The goal of these efforts is to coordinate services and resources and fund coordination and availability of services at One-Stop Centers.

State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).
Describe:
The DCF is responsible for the administration of TANF eligibility. The OEL and ELCs coordinate child care placements for TANF recipients to help ensure that TANF requirements are met and to expand accessibility and continuity of care.

State/Territory community agencies serving refugee or immigrant families
The DCF, Office of Refugee Services; RCMA, a private, not-for-profit organization, contracts with OEL to provide and align quality of services to the unique population of migrant, seasonal and former farm worker families throughout 20 Florida counties.

Provider groups or associations.

Worker organizations.

Parent groups or organizations.

Other.

Children's Services Councils (CSC) are special taxing districts created specifically to fund children's services in the counties where they exist. Chapter 125, F.S., governs the creation and operation of a CSC. Florida is the only state in the nation to have a law that enables local communities to create a special taxing district for investing in children's services. In instances where a CSC has been created, its executive director or chair is a member of the early learning coalition board. This partnership provides blended funding and access to more training and technical assistance resources across agencies. In communities with CSCs, partnerships expand the quality, availability and accessibility of services to children of low-income working families. CSCs are local government agencies created for the purpose of funding prevention and early intervention services supporting improved outcomes for children and families. The means by which CSCs support community early learning efforts vary, but each works to support improved coordination efforts, effective policies and expanded early learning services.

The Florida Council on Homelessness, coordinated by DCF's Office on Homelessness, works with the local homeless coalitions and continuum of care lead agencies throughout Florida. These agencies provide School Readiness Program information to newly identified homeless families and make referrals to their local coalition.
1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O)(ii)) Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high quality care that meets the needs of children and families. For example, State/Territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a State/Territory may allow county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits (https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

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

☑ Yes, If yes, describe at a minimum:

How do you define "combine"

Layering of funds to provide child care and comprehensive services. The OEL blends state and federal funds for subsidized child care at the state level and allocates the blended funds for services to local agencies.

Which funds will you combine

State, TANF, private and CCDF funds are combined at the State and local levels for
seamless service delivery for families.
CCDF is used to provide wrap-around care for school readiness children participating in VPK.
EHS-CC Partnership grant funds and CCDF are layered to provide comprehensive services for working families meeting EHS requirements, and can be allocated to other participating children.
Goal(s) of combining funds (why?) and expected outcomes, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations.
The goal for combining funds is to increase access to services, extend the services available and increase capacity for quality services through combined support for early childhood educators and early care and education programs. This results in a seamless process for families applying for services and for agencies that administer the program.

Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?)
Funds are combined at the state and local levels. At the State level, the legislature annually appropriates state and federal School Readiness funds to the early learning coalitions. OEL enters into a grant agreement with each early learning coalition and provides the appropriated funds to the ELCs through Notice(s) of Award. Additionally, ELCs may layer in local funding to provide child care and comprehensive services. More detail can be found in section 8.1.
How are the funds tracked and method of oversight
School readiness expenditures are tracked at the local and state levels. Expenditures for CCDF contracted activities are tracked each month, and OEL monitors subrecipients for adherence to contract terms.

No.
1.6 Public-Private Partnerships

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

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

Florida's Early Learning Advisory Council, also referred to as ELAC, is an advisory board made up of governor-appointed early learning coalition chairs. It provides recommendations to OEL’s Executive Director for the improvement of child care programs. The council submits recommendations on such matters as the administration of the VPK Program, the School Readiness Program and the Child Care Resource and Referral Program (CCR&R).

The Florida Child Care Executive Partnership (CCEP) program is a public/private partnership program that helps employers meet the needs of working parents. It operates under the statutory authority of s. 1002.94, F.S., which provides the board and participating partners staff support through OEL. The early learning coalitions are responsible for seeking local business partnerships and securing commitments from businesses, non-profit organizations and government entities. In order to request CCEP funds, each early learning coalition must annually submit a CCEP funding application listing the secured partnerships and the corresponding monetary commitment. Through this program, federal and state funding is "matched" with contributions from local governments, charitable foundations and private businesses on a dollar-for-dollar basis to provide child care services to participating families.

Local Level Public-Private Collaborations
Statutorily, the School Readiness Program is administered by OEL through 30 or fewer early learning coalitions at the local level, which are all not-for-profit organizations that coordinate service delivery efforts. Thus, most public-private partnerships are formed and realized in local communities. The OEL encourages and monitors these efforts.

Each early learning coalition has a board that must have at least 15, but not more than 30, members. The law requires that the board of each early learning coalition include the following members:

- Governor-appointed chair and two other members who must meet the same qualifications as private sector business members.
- A Department of Children and Families regional administrator or a permanent designee authorized to make decisions on behalf of the department.
- A district superintendent of schools or a permanent designee authorized to make decisions on behalf of the district.
- A regional workforce board executive director or a permanent designee.
- A district superintendent of schools or a permanent designee authorized to make decisions on behalf of the district.
- A children's services council or juvenile welfare board chair or executive director, if applicable.
- An agency head of a local licensing agency as defined in s. 402.302, F.S., where applicable.
- A president of a Florida College System institution or a permanent designee.
- One member appointed by a board of county commissioners or the governing board of a municipality.
- A Head Start director.
- A representative of private for-profit child care providers, including private for-profit family day care homes.
- A representative of faith-based child care providers.
- A representative of programs for children with disabilities under the federal Individuals with Disabilities Education Act.
- A central agency administrator, where applicable.

Including the members appointed by the governor, more than one-third of the members of each early learning coalition must be private-sector business members.

One benefit from local early learning coalitions including members representing local public and private entities is that the coalitions are more easily able to raise and attract private funds to enhance the quality of care.

Other Examples and Results of Public-Private Collaborations at the Local Level

Under Florida law, county governments are empowered to create children's services councils, which are special taxing districts that empower local voters to levy ad valorem taxes (e.g., property taxes) earmarked for children's services. There are 11 children's services councils across the state of Florida. Eight are independent special taxing districts and the remaining three are dependent upon local governmental entities for funding. Children's services councils are successful public-private partnerships that enable local communities to address many service needs of children and their families in local communities. Early learning coalitions and RCMA work collaboratively with the children's services councils where they exist, and this
collaboration results in the infusion of local funds, which are used to expand local early learning coalition services and efforts.

Early learning coalitions have partnered with numerous public and private entities to enhance service delivery. A few examples are

- The Child Care Florida WAGE$® Program provides salary supplements to early learning providers in participating early learning coalition service areas based on their education and continuity of employment.
- Collaborative partnerships with community-based care organizations (local child welfare service coordinators) to provide specialized services to foster families and children in protective services.
- Coordination with local civic organizations to provide books and reading opportunities for young children.
- Partnerships with civic organizations and local governments to enhance play and learning opportunities for young children and their families at local parks.

At the local level, early learning coalitions make funding decisions, administer the program, manage contributions and conduct eligibility determinations for families who wish to participate in the program.

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

States may use funds to support or establish Child Care Resource and Referral (CCR&R systems (also see section 7.4). If they do, there are specific requirements for CCR&Rs (658E(c)(3)(B)(iii)) These include:

- Provide families with information on a full range of child care options (including faith-based, community-based child care centers and family child care homes, nontraditional hours and emergency child care centers) in their local area or region
- To the extent practicable, work directly with families who receive child care assistance to offer the families support and assistance in making an informed decision about child care options in an effort to ensure families are enrolling their children in the most appropriate child care setting to suit their needs and that is of high quality as determined by the State/Territory
- Collect data and provide information on the coordination of services and supports, including services provided through the Individuals with Disabilities Education Act for children with disabilities
- Collect data and provide information on the supply of and demand for child care services in local areas or regions of the State/Territory and submit such information to the State/Territory
- Work to establish partnerships with public agencies and private entities, including faith-
based and community-based child care centers and family child care homes providers, to increase the supply and quality of child care services in the State/Territory. As appropriate, coordinate their activities with the activities of the Lead Agency and/or local agencies that administer CCDF.

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

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

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

If yes, the local or regional referral agency is required to do all of the activities listed here.

See also related follow-up questions in Section 7.1 and 7.4. Does the CCR&R system provide all services identified below:

The OEL houses the CCR&R State Network and contracts with 30 early learning coalitions to provide CCR&R services locally in each of Florida's 67 counties. Each coalition is responsible for administering CCR&R services to families in its service area. CCR&R services are provided by trained specialists and available to all families regardless of income or individual circumstances. These services include providing child care listings and information about consumer education, financial assistance programs, information on programs for children with special needs and community resources to families. The Florida CCR&R state-level Network works closely with early learning coalitions and local CCR&R offices statewide. Network staff develop written materials, brochures and guidance documents and offer technical assistance and training designed to support parents and providers.

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

1.8 Disaster Preparedness and Response Plan

The CCDBG Act of 2014 added a requirement that States must include a Statewide Child Care Disaster Plan for coordination of activities with the State/Territory human services agency, emergency management agency, child care licensing agency, State/Territory local resource and referral agencies, and the State Advisory Council (SAC) or other state-designated cross-agency body if there is no SAC. (658E(c)(2)(U)) The Statewide Child Care Disaster Plan must include:
- Guidelines for continuing CCDF assistance and child care services after a disaster, which may include provision of temporary child care, and temporary operating standards for child care after a disaster.
- Requirements that child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.
- Requirements that child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.

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

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

If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan.

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

DCF has guidelines for continuing child care services after a disaster outlined in the Child Care Desk Reference Guide (CF-Pamphlet 175-2) for licensing offices.
statewide. The OEL has procedures and guidelines outlined in the Continuity of Operations Plan (COOP) and Program Instruction 240.20 relating to Disaster Guidance to ensure continuity of services and payments. The guidance also addresses determination of eligibility for disaster-impacted families, fee waivers and using quality funds for repair and renovation of programs after a disaster event.

Chapters 65C-20 and 65C-22, Florida Administrative Code (FAC), require licensed family day care home providers and licensed child care facilities to have a written emergency preparedness plan in place to include, at a minimum, procedures for evacuation, lockdown, shelter-in-place, fire and inclement weather, and facilitating communication and reunification with families. The plan must also describe how the facility will meet the needs of all children, including children with special needs, during and following an emergency event.

Additionally, Chapters 65C-20 and 65C-22, FAC, require that licensed family day care home providers and licensed child care facilities conduct emergency preparedness drills when children are in care. Each drill outlined in the emergency preparedness plan must be practiced a minimum of one time per year, and may substitute for up to three monthly fire drills as referenced in paragraph 65C-22.002(7)(e), FAC, documentation of which must be maintained for one year. A current attendance record must accompany staff during the drill or actual emergency and must be used to account for all children.

Head Start, Early Head Start and Migrant and Seasonal Head Start grantees must have written emergency preparedness plans in place according to the Florida Administrative Code referenced above. They must coordinate their disaster preparedness plans with their local communities' plans and report effects of disasters to the Head Start State Collaboration Office and to the Region IV Administration for Children and Families Office of Head Start.

Unmet requirement - Identify the requirement(s) to be implemented child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.

Tasks/Activities - What specific steps will you take to implement the unmet
requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative, rule and statewide provider contract revisions.

Current statute does not include requirements for license exempt providers relating to emergency preparedness. Legislation is currently pending that would grant OEL authority to establish standards for emergency preparedness and response for providers of the School Readiness Program. Once adopted, the office will extend existing standards for emergency preparedness plans and drills required of licensed providers to all providers receiving CCDF funds.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: OEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DCF

Unmet requirement - Identify the requirement(s) to be implemented: child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The DCF is in the process of finalizing a Statewide Disaster Preparedness and Response Plan.

DCF will address additional emergency preparedness requirements for licensed providers through rule revision.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DCF.
Partners - Who is the responsible agency partnering with the State/Territory lead
agency to complete implementation of this activity

OEL.

2 Promote Family Engagement through Outreach and Consumer Education

Parents are their children’s most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12. The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to "promote involvement by parents and family members in the development of their children in child care settings." States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children's teacher and advocate. Key new provisions include:

1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
   - a) the availability of child care assistance,
   - b) the quality of child care providers (if available),
   - c) Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify.
   - d) Individuals with Disabilities Education Act (IDEA) programs and services,
   - e) Research and best practices in child development, and
   - f) State/Territory policies regarding social- emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on the expulsion of preschool-aged children (children from birth to five for purposes of this requirement) from early childhood
programs receiving CCDF.

2. Information related to the health and safety of children in child care settings. The plan must certify that the State/Territory will make public certain information about the results of health and safety monitoring (described in section 5) using a website that is consumer-friendly and in an easily accessible format, including:

- a) Provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints; 2) last date of inspection; and 3) information on corrective actions taken (if applicable).

- b) Information about: 1) the annual number of deaths; 2) the annual number of serious injuries; and 3) annual number of incidences of substantiated child abuse in child care settings.

- c) State/Territory processes for: 1) licensing child care providers; 2) conducting background checks and the offenses that would keep a provider from being allowed to care for children; and 3) conducting monitoring and inspections of child care providers.

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

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care services. (658D(b)(1)(A)), 658E(c)(2)(E)(i)(1))

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

a) How does the State/Territory identify populations and areas of potentially eligible families (e.g., using available federal, State/Territory and local needs assessments to identify potentially eligible families?)

Some of the early learning coalitions conduct needs assessments to identify populations in need of child care assistance. Local coalitions also partner with their local child care licensing office, community partners, community-based organizations, public schools, local Head Start centers/offices and health care professionals to refer families to the local early learning coalitions and alert early learning coalitions of the need for services. Early Learning Coalitions have access to Head Start, EHS and Migrant and Seasonal Head Start annual needs assessment data, which identifies potential school readiness-eligible families and provides opportunities for collaboration.

The OEL partners with the University of Florida (UF) to identify populations of potentially eligible families. UF updates data from national and state sources annually to inform local
and statewide decision-making and ensure early learning programs are consistently meeting the needs of children and families in Florida.

b) What partners help with outreach? For example, child care resource and referral agencies, home visitors, pediatricians, faith-based services, State/Territory or local agencies and organizations or other familiar and safe access points serving vulnerable or low-income populations.

Each early learning coalition provides CCR&R services to families. Services include consumer education regarding early learning quality indicators, referrals to child care providers that meet the needs of the child and other available financial and community resources that meet the needs of the family. OEL also is party to an interagency agreement (sponsored by Florida's Children and Youth Cabinet) that coordinates services and supports for children to develop local and statewide resources for children being served by multiple state agencies.

Local coalitions build collaborative partnerships with community-based care organizations (local child welfare service coordinators) and local homeless coalitions to provide services to foster families, children in protective services and homeless families.

LEA Homeless Education Programs help with outreach through distributing of consumer education and information, identifying qualifying children and families, and providing referrals to available services.

Local coalitions are governed by a board partially consisting of governor-appointed board members from the communities the coalitions serve. Other board members represent a variety of agencies and private businesses such as local representatives from DCF, school districts, regional workforce boards, health departments, children's services councils, Head Start directors, a representative of programs for children with special needs and private child care providers.

Home Instruction for Parents of Preschool Youngsters (HIPPY) aims to promote preschoolers' school readiness and support parents as their children's first teacher by providing instruction in the home. HIPPY provides outreach in the form of weekly, hour-long home visits for 30 weeks per year, and two-hour long group meetings a minimum of six times per year. The program model is designed for parents who lack confidence in their ability to prepare their children for school, including parents with past negative school experiences or limited financial resources.

The Healthy Start Initiative provides funds to local agencies to promote health education and
provide outreach and support for women, infants and children up to age 3 who are at risk for poor birth, health and developmental outcomes. Local programs participating in Healthy Start also deliver services and provide support and education through home visits to clients with identified risks.

The Maternal Infant Early Childhood Home Visiting Program helps families with their children's school readiness and linkage to childcare.

c) What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach?


Parent pages.
Pinterest.
Facebook.
Twitter.
Family Guide/ Quality Checklist.
Community Partners.
Participation in community and state-wide events.
Many of the early learning coalitions have media campaigns for reaching families in need of child care or assistance in other areas. Coalitions also host a variety of events to raise awareness such as 5K races/fun runs, family fun days, back-to-school events and community baby showers.

Where needed, family outreach, trainings and materials (e.g., CCR&R packets) target non-English language. Many print and media outlets are offered in multiple languages, including Spanish, Haitian-Creole, Portuguese and others. Child screening and assessment information is also provided in Spanish and English in many areas of the state.

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

☑ Electronically via online application, mobile app or email.

Provide link  https://familyservices.floridaeearlylearning.com/Account/Login

☑ In-person interview or orientation.

Describe agencies where these may occur:
The 30 Early Learning Coalitions and RCMA.

☑ Phone
Mail
At the child care site
☑ At a child care resource and referral agency.
☑ Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations.

Describe:
Some of the early learning coalitions have kiosks and all of the CCR&R programs at the coalitions and RCMA assist parents with online applications through the Family Portal. The Family Portal is a web-based process that the ELC and contractors use to retrieve and manage applications that the public submits and is available only to users that have a username and password.

☑ Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time).

Describe:
Some Early Learning Coalitions provide a link to the local Head Start program to allow for a coordinated application process.

☐ Other strategies.

Describe:

2.2 Consumer Education Website

The CCDBG Act of 2014 added a purpose of the child care program "to promote involvement by parents and family members in the development of their children in child care settings." (658A(b)(3)) The consumer education requirements address multiple topics that parents and family members need in order to make informed choices and act as their most important teacher and advocate. Lead agencies must certify that they will collect and disseminate the following information through resource and referral agencies or other means. (658E(c)(2)(E))

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

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

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

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
2.2.2 Describe how the State/Territory makes information available about the full diversity of child care services that will promote informed child care choices, including consumer-friendly strategies such as materials that are culturally responsive and in multiple languages as needed that reflect the literacy levels of consumers, and are easy to access.

a) Describe how the State/Territory makes information about the full diversity of child care services available to 1) parents of eligible children, 2) providers and 3) the general public.

The OEL partners with other state agencies, TANF offices, child care resource and referral agencies, community-based organizations, local public schools, faith-based child care organizations, local Head Start agencies, Early Head Start and Migrant and Seasonal Head Start to inform parents, providers and the general public about the full diversity of child care services available in Florida. The 30 early learning coalitions work closely with the agencies in their local communities to distribute information about all varieties of child care available in their area.

Child Care Resource and Referral (CCR&R) serves all parents seeking early learning services in Florida free of charge. Trained staff provide consumer education on quality indicators for early learning to inform families about ways to recognize quality early learning programs. CCR&R specialists also provide referrals to early learning programs, and information and referrals to other local community resources.

The CCR&R State Network serves two fundamental purposes: (1) to help parents identify and select quality early learning programs that best meet their children's needs and (2) to provide technical assistance that addresses and improves the quality, availability and affordability of child care. This is accomplished through the provision of information and resources about quality early learning options and work/family solutions to families, child care professionals and government entities.

Each CCR&R program maintains a database of all legally-operating child care providers in its service area. The CCR&R database contains licensed, license-exempt, faith-based, registered family child care homes and non-traditional child care providers, which includes summer camps, afterschool programs and Boys and Girls Clubs. This database is the primary data source for families searching for child care arrangements, and the data also supports local businesses by serving as an advertisement for child care services.
Additionally, each family who contacts CCR&R for information receives a listing of child care providers that meets that family’s individual needs, suggestions on how the family can proceed with its search for a child care provider, website information for the state licensing database and an invitation to call back if further assistance is needed. Parents also receive electronic or printed items created by OEL to assist in their search for quality care. The OEL website provides consumer education and resources with accommodations for persons with disabilities.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

Through promotional materials, community outreach meetings, workshops or other in-person meetings, radio or television announcements, print media, websites, and other digital media such as Facebook, Twitter and Pinterest, the early learning coalitions and OEL provide parents and the general public with opportunities to learn about all of the different types of child care and assistance for families in Florida.

The OEL and the local CCR&R programs provide parents with an unbiased listing of child care providers that meets each family’s individual needs, suggestions on how the family can proceed with its search for a child care provider, website information for the state licensing database and an invitation to call back if further assistance is needed. Parents are also provided with electronic or printed items created by OEL to assist in their search for quality care.

The OEL and the early learning coalitions also provide information on their websites to support families in the selection of quality child care providers and inform them about the variety of child care programs and settings for children in local communities. OEL’s website, [www.floridaearlylearning.com](http://www.floridaearlylearning.com), allows families the access to The Guide for Parents and the Quality Checklist. DCF’s website, [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare), offers families the ability to locate childcare providers online and to research provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints, 2) last date of inspection and 3) information on corrective actions taken (if applicable). DCF’s website allows providers and parents access to information about 1) licensing child care providers, 2) conducting background checks and the offenses that would keep a provider from being allowed to care for children and 3) conducting monitoring and inspections of child care providers. Parents, providers and the general public can obtain information about child abuse and mortality rates and causes on DCF’s website, including aggregate annual information about 1) the annual number of deaths, 2) the annual number of serious injuries and 3) the annual number of incidences of substantiated child abuse.
The OEL CCR&R state network office and the early learning coalitions' local CCR&R programs have personnel available to speak with parents, providers, and the general public in languages other than English. Many of the early learning coalitions have multilingual staff available to translate brochures, flyers, forms, and other printed materials into languages other than English that are most commonly found in their area, or they outsource translations to make these materials available.

c) Describe who you partner with to make information about the full diversity of child care choices available

The DCF, local Head Start, Early Head Start and Migrant and Seasonal Head Start agencies, Child Care Aware, early learning coalitions, RCMA, Help Me Grow Florida, 2-1-1 organizations, local public schools and the Florida Early Steps program (Florida Department of Health).

2.2.3 Describe how the State/Territory makes information about the quality (such as through a quality rating and improvement system, if available, nationally-recognized accreditation, or other means) of child care services available to the public, including consumer-friendly strategies such as messages that are designed to engage intended audiences and are easy to understand

a) Describe how the State/Territory makes information about child care quality available to 1) parents of eligible children, 2) providers and 3) the general public

The Lead Agency partners with other state agencies, TANF offices, child care resource and referral agencies, community-based organizations, local public schools, faith-based child care organizations and local Head Start, Early Head Start and Migrant and Seasonal Head Start agencies to inform parents, providers, and the general public about the quality of child care services available in Florida.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

The 30 early learning coalitions work closely with the agencies in their local communities to distribute information to help parents understand the importance of high-quality child care and help them locate quality child care available in their areas. The OEL has information on its website, and through the CCR&R program, distributes information to parents and the general public through phone calls, emails, and mail about quality child care.
The DCF has information on its website about quality child care and selecting quality child care for children, as well as brochures and checklists available online and in print. The DCF administers the Gold Seal Quality Care Program - a designation for providers that was established by the Florida Legislature in 1996 to acknowledge child care facilities and family day care homes that are accredited by DCF-approved Gold Seal accrediting agencies and whose standards reflect national levels of quality of care and supervision provided to children. Parents can search online in their area for providers with a Gold Seal designation. Florida law allows early learning coalitions and RCMA to reimburse providers at higher rates (up to 20 percent of the approved reimbursement rate) if the provider has received a Gold Seal Quality Care designation as determined by DCF pursuant to s.402.281, F.S.

The Lead Agency provides resources on quality indicators and quality activities on its website as well as through Facebook, Pinterest and Twitter. There are also "Parent Pages," which are information flyers developed and distributed monthly throughout the state. They contain information about quality early learning experiences.

c) Describe who you partner with to make information about child care quality available

The Department of Children and Families, local Head Start agencies, Child Care Aware, early learning coalitions, RCMA, Help Me Grow Florida, 2-1-1 organizations, local public schools and Florida Early Steps (Florida Department of Health). The Lead Agency also collaborates with the state Head Start Training and Technical Assistance Early Childhood Education provider and the Head Start State Collaboration Office on these initiatives.

2.2.4 Describe how the State/Territory shares information with eligible parents about other available human service programs.

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

a) Temporary Assistance for Needy Families (TANF)

Local CCR&R organization are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information
via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the TANF program. The OEL also includes contact information for the TANF program in the community resources flyer.

b) Head Start and Early Head Start Programs
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as Early Head Start and Head Start programs. The OEL also includes contact information for Early Head Start and Head Start programs in the community resources flyer.

c) Low Income Home Energy Assistance Program (LIHEAP)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer other resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the LIHEAP program. The OEL also includes contact information for the LIHEAP program in the community resources flyer.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the SNAP program. The OEL also includes contact information for the SNAP program in the community resources flyer.

e) Women, Infants, and Children Program (WIC)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the WIC program. The OEL also includes contact information for the WIC program in the community resources flyer.

f) Child and Adult Care Food Program (CACFP)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information
via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the CACFP program, along with other food programs, such as local food banks. OEL also includes contact information for the CACFP program in the community resources flyer.

g) Medicaid
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the Medicaid program. OEL also includes contact information for the Medicaid program in the community resources flyer.

h) Children's Health Insurance Program (CHIP)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the CHIP program, along with Florida Kid Care, another low-cost health insurance program for children. The OEL also includes contact information for the CHIP program in the community resources flyer.

i) Individuals with Disabilities Education Act (IDEA)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer services to all families via phone, Internet and in-person. CCR&R specialists provide families with resources, information about and access to programs such as the Individuals with Disabilities Education Act. The OEL also includes information on the American's with Disabilities Act and inclusive childcare in our Family Guide for Selecting Quality Early Learning Programs.

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the state’s VPK Program for 4-year-olds, which is housed within all early learning coalitions. The OEL also directs families with 4-year-olds to the VPK department.

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and
referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as Home Instruction for Parents of Preschool Youngsters (HIPPY), Healthy Families Florida, Early Head Start and Head Start, local 211’s and Help Me Grow program, as well as other local community resources and statewide early childhood programs.

2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs.

For example, does the State/Territory provide information to providers through CCR&R outreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc?

a) Temporary Assistance for Needy Families (TANF)

Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All providers can receive this information via phone, Internet and in-person. However, local coalitions and CCR&R's actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL's and local CCR&R websites. Additionally, CCR&R specialists supply providers with resources and information regarding access to programs such as the TANF program. OEL also includes contact information for the TANF program in the community resources flyer which is distributed to providers annually via the DCF quarterly provider mail out, or as updated.

b) Head Start and Early Head Start Programs

Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All providers can receive this information via phone, Internet and in-person. However, local coalitions and CCR&R’s actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL’s and local CCR&R websites. Additionally, CCR&R specialists supply providers with resources and information regarding access to programs such as the Head Start and Early Head Start programs. OEL also includes contact information for the Head Start and Early Head Start programs in the community resources flyer which is distributed to providers annually via the
DCF quarterly provider mail out, or as updated.

c) Low Income Home Energy Assistance Program (LIHEAP)

Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All providers can receive this information via phone, Internet and in-person. However, local coalitions and CCR&R's actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL’s and local CCR&R websites. Additionally, CCR&R specialists supply providers with resources and information regarding access to programs such as the LIHEAP program. OEL also includes contact information for the LIHEAP program in the community resources flyer which is distributed to providers annually via the DCF quarterly provider mail out, or as updated.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)

Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All providers can receive this information via phone, internet and in-person. However, local coalitions and CCR&R's actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL’s and local CCR&R websites. Additionally, CCR&R specialists supply providers with resources and information regarding access to programs such as the SNAP program. OEL also includes contact information for the SNAP program in the community resources flyer which is distributed to providers annually via the DCF quarterly provider mail out, or as updated.

e) Women, Infants, and Children Program (WIC)

Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All providers can receive this information via phone, Internet and in-person. However, local coalitions and CCR&R's actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL’s and local CCR&R websites. Additionally, CCR&R specialists supply providers with resources and information regarding access to programs such as the WIC program. OEL also includes contact information for the WIC program in the community resources flyer which is distributed to providers annually via the DCF quarterly provider mail out, or as updated.

f) Child and Adult Care Food Program (CACFP)

Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All providers can receive this information via phone, Internet and in-person. However, local coalitions and CCR&R’s actively give
providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL’s and local CCR&R websites. Additionally, CCR&R specialists supply providers with resources and information regarding access to programs such as the CACFP program, along with other food programs, such as local food banks. OEL also includes contact information for the CACFP program in the community resources flyer which is distributed to providers annually via the DCF quarterly provider mail out, or as updated.

g) Medicaid
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All providers can receive this information via phone, Internet and in-person. However, local coalitions and CCR&R’s actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL’s and local CCR&R websites. Additionally, CCR&R specialists supply providers with resources and information regarding access to programs such as the Medicaid program as well as other subsidized health insurance programs. OEL also includes contact information for the Medicaid program in the community resources flyer which is distributed to providers annually via the DCF quarterly provider mail out, or as updated.

h) Children’s Health Insurance Program (CHIP)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All providers can receive this information via phone, Internet and in-person. However, local coalitions and CCR&R’s actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL’s and local CCR&R websites. Additionally, CCR&R specialists supply providers with resources and information regarding access to programs such as the CHIP program as well as other subsidized health insurance programs. OEL also includes contact information for the CHIP program in the community resources flyer which is distributed to providers annually via the DCF quarterly provider mail out, or as updated.

i) Individuals with Disabilities Education Act (IDEA)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer services and information to providers via phone, internet and in-person. However, local coalitions and CCR&R’s actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL’s and local CCR&R websites. Additionally, CCR&R specialists supply
providers with resources and information regarding access to programs such as the IDEA program. OEL also includes contact information for the IDEA program in the community resources flyer which is distributed to providers annually via the DCF quarterly provider mail out, or as updated. OEL provides information on the American's with Disabilities Act and inclusive childcare in our Family Guide for Selecting Quality Early Learning Programs.

j) Other State/Federally Funded Child Care Programs (example-State Pre-K)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All providers can receive this information via phone, Internet and in-person. However, local coalitions and CCR&R's actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL’s and local CCR&R websites. Additionally, CCR&R specialists supply providers with resources and information regarding access to programs such as the VPK program, which is housed within all early learning coalitions. OEL also includes contact information for the VPK program in the community resources flyer which is distributed to providers annually via the DCF quarterly provider mail out, or as updated.

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)
Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All providers can receive this information via phone, Internet and in-person. However, local coalitions and CCR&R's actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL’s and local CCR&R websites. Additionally, CCR&R specialists give providers resources, information about and access to local and statewide early childhood programs such as the Home Instruction for Parents of Preschool Youngsters (HIPPY), and Healthy Start programs for parents and children. OEL also includes contact information for the about these programs in the community resources flyer which is distributed to providers annually via the DCF quarterly provider mail out, or as updated.

2.2.6 Describe how the State/Territory makes available information to parents of eligible children, the general public, and where applicable, providers (see also section 6) about research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and
physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement. (658E(c)(2)(E)(VI))

a) Describe how the State/Territory makes information about research and best practices in child development available to 1) parents of eligible children, 2) providers and 3) the general public

Consumer education resources and information are made available to parents, providers and the general public on research and best practices in early childhood development, social and emotional behavioral health, developmental screenings, meaningful parent and family engagement, and physical and mental health and development, including healthy eating and physical activity. This information is disseminated through OEL, early learning coalition and RCMA websites, parent workshops, newsletters, brochures, parent and provider guides, Facebook pages, Pinterest boards and Twitter.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

Printed materials regarding the above-mentioned research and information topics are made available to parents, providers and the general public through the local early learning coalitions and are available for download on many of their websites, including OEL's website. Upon request, these materials are also mailed parents, providers or others requesting them. Some of these resources include "A Parent's Guide to Child Care," the "Quality Checklist for Evaluating Early Learning Programs" and a variety of other parent and provider guides, brochures and flyers.

Additionally, information regarding the above-listed topics is provided during direct communication with parents, providers and the general public - for example, during eligibility interviews or calls for resource and referral services.

To help parents and providers know what children should understand and be able to do as they move from birth to 5, Florida adopted the Florida Early Learning and Developmental Standards: Birth to Five in 2011. The standards address physical, social-emotional, cognitive, language and communication development and strategies to help young children learn (approaches to learning). Parents and providers can read, search or download a printable version of the standards on OEL's website (www.floridaearleaning.com/parents/parent_resources/floridas_early_learning_and_development_standards_birth_to_five.aspx) and use them to plan experiences and activities with children. The standards have valuable information and tips for supporting children's development in the first five years.
Many early learning coalitions provide workshops and newsletters for parents and providers on these topics and have videos available onsite or online for them to view. The OEL makes resources available on all of the topics listed to all of the early learning coalitions, the Head Start Collaboration Office and RCMA through newsletters and SharePoint.

c) Describe who you partner with to make information about research and best practices in child development available

The OEL's programs partner with early learning coalitions, RCMA, DCF, the Head Start State Collaboration Office and local Head Start, Early Head Start and Migrant and Seasonal Head Start agencies, The University of Florida (UF) through Early Learning Florida training for early childhood professionals, Help Me Grow Florida, 2-1-1 organizations, local public schools, Florida Early Steps (DOH) and Child Care Aware to provide information through list servs, websites, meetings, webinars and email newsletters. Research and information is also shared by OEL through statewide conferences and early childhood association meetings.

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

a) Describe how the State/Territory makes information regarding social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to 1) parents of eligible children, 2) providers and 3) the general public. At minimum, describe what you provide (e.g., early childhood mental health consultation services to child care programs) and how (i.e., methods such as written materials, direct communication, etc.) for each group:

i. Parents

Resources are available as print materials; online resources; social media such as Facebook, Pinterest and Twitter; workshops for parents; and parent meetings, newsletters and referrals for support from other agencies through the CCR&R specialists. Florida’s Early Learning and Developmental Standards for children: Birth to 5 is available on OEL’s website for parents, providers and the general public. Resources through 211 call centers and Help Me Grow are intended to provide linkages for children's social-

ii. Providers

Resources are available as print materials; online resources; social media such as Facebook, Pinterest and Twitter; workshops for providers; and provider meetings, newsletters and referrals for support from other agencies through the CCR&R specialists. Training and technical assistance are available through OEL, DCF, ELC/RCMA program staff and UF through Early Learning Florida. Florida’s Early Learning and Developmental Standards for children: Birth to 5 is available on OEL’s website for parents, providers and the general public (http://www.floridaearlylearning.com/parents/parent_resources/floridas_early_learning_and_development_standards_birth_to_five.aspx).

The state has a toll-free number to provide assistance and consultation about including children with disabilities and special health care needs. The Warm Line is available to any early care and education provider requesting information relating to the disability and special health care needs of children. Each early learning coalition provides warm line services for child care providers on strategies to support inclusive practices, including Positive behavioral support.

Curriculum.

Child development.

Health.

Environmental adaptations.

Laws and regulations (e.g., The Americans with Disabilities Act).

The Florida Association of Infant Mental Health provides discounted memberships for child care providers and offers websites, trainings and conferences about infant mental health (www.FAIMH.org). Many of the children's services councils offer early childhood mental health consultation to child care providers and a variety of infant mental health training, aligned with IMH competencies, for child care providers. Florida’s LAUNCH grant has provided training on early childhood mental health consultation. In 2015, First 1000 Days joint conference brought together for training ELCs, Part C, the Florida Association of Infant Mental Health (FAIMH), Maternal Infant Early Childhood Home Visiting Program (MIECHV), Healthy Start and more than 700 child advocates, including the Infant Mental Health track.
iii. General public

Resources are available as print materials; online resources; social media such as Facebook, Pinterest and Twitter; workshops for parents and parent meetings; newsletters; and referrals for support from other agencies through CCR&R specialists. *Florida's Early Learning and Developmental Standards for children: Birth to 5* is available on OEL's website for parents, providers and the general public ([http://www.floridaearlylearning.com/parents/parent_resources/floridas_early_learning_and_development_standards_birth_to_five.aspx](http://www.floridaearlylearning.com/parents/parent_resources/floridas_early_learning_and_development_standards_birth_to_five.aspx)).

b) Describe any partners used to make information regarding social-emotional/behavioral and early childhood mental health of young children available

The early learning coalitions, RCMA, DCF, local Head Start, Early Head Start and Migrant and Seasonal Head Start agencies, Child Care Aware, Help Me Grow Florida, 2-1-1 organizations, Florida Developmental Disabilities Council, Florida Inclusion Network, FAIMH, local public schools and Florida Early Steps (the Florida Department of Health).

c) Does the State have a written policy regarding preventing expulsion of:

Preschool children (from birth to five) in early childhood programs receiving child care assistance?

☐ Yes.

If yes, If yes, describe how the State/Territory makes information about that policy available to parents, providers and the general public (what you provide, how you provide and any partners used) and provide a link

☑ No.

School-age children from programs receiving child care assistance?

☐ Yes.

If yes, describe how the State/Territory makes information about that policy available to 1) parents, 2) providers and 3) the general public (what you provide, how you provide and any partners used) and provide a link

☑ No.
2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

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

Describe the status of the State/Territory's procedures for providing information on and referring families to existing developmental screening services.

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

List the Lead Agency policy citation(s) and:

Rule 6M-4.720, FAC, Screening of Children in the School Readiness Program and Section 1002.84 (5), F.S.

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

The early learning coalitions must coordinate with parents and providers to offer access to developmental screening tools for all children enrolled in the School Readiness Program, and work in cooperation with other agencies to make referrals for those families whose children may need special services. OEL, 211 agencies, Help Me Grow Florida, DOH, DCF, and other agencies and non-profit organizations refer parents to the early learning coalitions or local health professionals to have their children screened for developmental delays, including social, emotional, physical or linguistic delays, as well as other health issues. The initial developmental screening must be completed within the first 45 days of receiving services. Subsequently, all children birth to 5 receiving services are rescreened annually. This is only applicable to school readiness children with parental consent.
b) Describe how CCDF families or child care providers receiving CCDF may utilize the resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays

The School Readiness Program provides developmental screenings for enrolled children through the coalitions and RCMA, referrals to health and educational specialists, and works in cooperation with other programs for young children, such as Head Start, Early Head Start, Migrant and Seasonal Head Start and the VPK Education Program. The early learning coalitions and OEL's Child Care Resource and Referral provide parents information about developmental screenings, developmental milestones and referrals to special programs for those children who need cognitive, physical or social-emotional support. OEL and the early learning coalitions provide information on their websites about developmental screenings, developmental milestones and agencies that have resources for children who need cognitive, physical or social-emotional support. The state has a toll-free number, the Warm Line, to provide assistance and consultation to any family whose child(ren) may need developmental screenings to determine if they have disabilities or special health care needs.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
2.2.9 Describe how the State/Territory meets the requirement to maintain a record of substantiated parental complaints. (658E(c)(2)(C))

a) How does the State/Territory define substantiated parental complaint

When the information or alleged violation given in a complaint is verified, the complaint is considered a substantiated complaint. The OEL and DCF have a process for keeping track and responding to parental complaints. If a complaint comes to OEL’s CCR&R parent line, staff collect a summary of the complaint and caller information, including name, county and contact information. All parent/provider complaints are entered into OEL’s complaint database for tracking. CCR&R staff contact the appropriate coalition’s designated staff member and copy the supervisor and executive director. All correspondence regarding the complaint is logged into the database. Once the complaint is resolved, the case is closed. Complaints are logged and kept readily available upon request for a minimum of five years. The OEL has an online parent complaint form and takes complaints through calls and written correspondence. Complaints received by OEL’s CCR&R staff are resolved through coordination/working with the ELCs or sent to DCF.

The OEL sends complaints regarding licensing violations to DCF. Licensing violation complaints result in a complaint inspection. A complaint inspection is an on-site investigation that is conducted as the result of a reported violation of the child care standards (ss. 402.301-319, F.S.). The purpose of the complaint investigation is to determine whether the allegations can be substantiated (proven noncompliance with licensing standard(s)). A complaint inspection generally includes only those items on the inspection checklist that relate to the complaint allegations, unless additional non-compliance items are observed during the inspection. In this case, additional standards may be added or a full routine inspection can be conducted.

A licensing violation complaint inspection is always archived to the Child Care Information System (CCIS), but only appears on the DCF Child Care Program’s website if the inspection
shows noncompliant standards. The date the complaint was received and completed must be documented in the complaint inspection report.

b) How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format)

The OEL and local CCR&Rs keep a record of complaints received about providers and retain the information for five years. The DCF has an online database of all complaints filed against providers. Parents, providers and the general public can search for providers online and view the complaints.

Licensing violation complaints are usually received by telephone at DCF. Licensing complaints are not confidential. All complaints are public record and are maintained in the child care licensing/registration file and the Child Care Information System. A licensing violation complaint inspection is always archived to the Child Care Information System (CCIS), but only appears on the Child Care Program's website if the inspection shows noncompliant standards. Electronic inspections, including complaint inspections, are maintained in the CCIS system (no records removed).

c) How does the State/Territory make substantiated parental complaints available to the public on request

The DCF makes substantiated complaints for licensed/registered providers available to the public through its website.

Using the Licensing Application is required for documenting complaint investigations. The counselor must document the "Response" and "Investigative Findings" sections of the Complaint Reports in the Licensing Application.

A licensing violation complaint inspection is always archived to the Child Care Information System (CCIS), but only appears on the child care program's website if the inspection shows noncompliant standards (findings of complaint were substantiated). Licensing complaints are not confidential. All complaints are public record and will be maintained in the child care licensing/registration file and stored in the CCIS database under the provider's history.

d) Describe how the State/Territory defines and maintains complaints from others about providers

The OEL and DCF have a process for keeping track and responding to all complaints. All complaints that are received by OEL's CCR&R are resolved through cooperation with the early learning coalitions or are sent to DCF. The OEL keeps complaints in the system for five years.

All licensing complaints investigated are assumed to contain allegations made in good faith and should be taken seriously and acted on appropriately. The DCF views each complaint as
being against the facility or home that holds the license or registration, not against a specific individual within the facility or home. Taking and investigating complaints accounts for a significant amount of the licensing counselor’s time and requires a set of complex skills and competencies. Electronic inspections, including complaint inspections, are maintained in the CCIS system (no records removed).

Concerns related to licensing and registration laws and rules are referred to the licensing counselor, who will follow up on all complaints that allege possible violations of these rules or laws. Concerns such as the amount of money charged for fees, lost clothing, children disenrolled from a facility or home and program or curriculum concerns are examples of complaints that cannot be investigated by DCF because they are not violations of standards. If a complaint is received that involves a violation that is not a licensing standard, the complainant is advised that DCF does not have the authority to investigate the complaint. The complainant is advised to contact the abuse hotline if the allegations meet the criteria for acceptance.

If the complaint involves an environmental health (septic, well, swimming pool) or fire safety issue, the same procedure must be followed by licensing staff, directing the complainant to contact the appropriate agency or applicable local environmental health or fire inspection unit. The licensing staff remain in direct communication with the designated entity to ensure complaints are addressed and resolved.

If a complaint is received that relates to grant funding and child care payments, the complainant is advised that DCF does not have the authority to investigate the complaint. The complainant and a summary of the complaint is forwarded to the representative agency in the county.

The early learning coalitions also may respond to complaints regarding violations of their service contracts with school readiness providers.

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

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

- Application in other languages (application document, brochures, provider notices)
Informational materials in non-English languages
Training and technical assistance in non-English languages
Website in non-English languages
Lead Agency accepts applications at local community-based locations
Bilingual caseworkers or translators available
Bilingual outreach workers
Partnerships with community-based organizations
Other

OEL contracts with RCMA to provide services to children of a largely Hispanic (Dual Language Learners) population who work in the agriculture industry. Head Start, Early Head Start and Migrant and Seasonal Head Start programs also serve more than 25 percent Hispanic families and can serve as interpreters for their local communities.

None

2.2.11 If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State/Territory has the ability to have translation/interpretation in all primary and secondary languages

Spanish, Haitian-Creole and Portuguese are the primary languages used in offering services or in translating materials for non-English speaking parents and other family members. For indigenous languages that are not written, some ELCs, RCMA, Head Start, Early Head Start and Migrant and Seasonal Head Start programs locate translators to interpret information for parents and other family members. Where needed, family outreach, trainings and materials (e.g., CCR&R packets) target non-English language print and media outlets and are offered in multiple languages. Child screening and assessment information is provided in Spanish and English in many areas of the state.

2.2.12 Describe how the Lead Agency or partners provide outreach and services to eligible persons with disabilities

The application for child care services is a web-based application. Applications, resources and information provided on the OEL website include accommodations for persons with
disabilities. Additionally, ELCs/RCMA assist persons with disabilities by offering face-to-face assistance in providing information or applying for services.

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing processes for licensing and monitoring child care providers, processes for conducting criminal background checks, and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse.

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

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

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

Provide the link to the website:

and describe how the consumer education website meets the requirements to:

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

b) Include a description of health and safety requirements and licensing or regulatory requirements for child care providers. Describe

c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers. Describe
d) Provide information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe

e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate. Describe

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

Overall Target Completion Date (no later than September 30, 2016 for all components of the website except posting the results of the monitoring on the website which is November 19, 2017) 11/19/2017

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Partially Implemented: The website for DCF, www.myflfamilies.com/childcare, offers families the ability to locate childcare providers online and to research provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints, 2) last date of inspection and 3) information on corrective actions taken (if applicable).

Additionally, provider-specific information about Health and Safety, Licensing and Regulatory Requirements is available on the website for all currently regulated facilities and homes. The website includes links to the standards themselves, which are found in Chapters 65C-22, 65C-20, FAC, and the standard classification summaries for each regulated provider type (facilities, homes and large homes). This
does not include religious exempt and public/nonpublic school providers as applicable standards are being promulgated through the legislative process and OEL.
The DCF’s website allows providers and parents the access to information about 1) processes for licensing of child care providers, 2) processes for conducting background checks and the offenses that would keep a provider from being allowed to care for children and 3) processes and procedures for conducting monitoring and inspections of child care providers.

Unmet requirement - Identify the requirement(s) to be implemented
The website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
OEL and DCF will review the DCF website to ensure it is consumer friendly, including: easily accessible, provides multiple search options, has minimized number of clicks, and is in plain language. Once the review is complete, DCF will begin making the necessary changes to their website. DCF will then begin the process of making the changes. When the website is complete DCF will link their website to OEL’s website to ensure a seamless delivery of information. Estimated timeline below:

April 6, 2016 - Review of website complete.
September 30, 2016 - Edits to DCF website including link to OEL’s website complete.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DCF.
Partners - Who is the responsible agency partnering with to complete implementation of this activity OEL.
Unmet requirement - Identify the requirement(s) to be implemented. Provide annual aggregate information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

DCF is in process of posting aggregate data on the number of deaths and serious injury by child care arrangement type. Legislative change and rule promulgation is necessary to require the reporting of serious injury and/or death to DCF. Additionally, DCF is in the process of creating a report within the Child Care Information System to pull the aggregate data on number of deaths and serious injury by child care settings, coordinating with web services to post the report to the public website, and determining the designation in statute of the source of the information on DCF’s website. Estimated timeline below:

March 11, 2016 - Legislative session ends
July 1, 2016 - New legislation becomes effective
September 30, 2016 - Expected completion of DCF rule promulgation
October 30, 2016 - Posting of Provider Specific Information on DCF website.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 10/30/2016
Agency - Who is responsible for complete implementation of this activity: OEL.
Partners - Who is the responsible agency partnering with to complete implementation of this activity: DCF.

Unmet requirement - Identify the requirement(s) to be implemented. Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations).

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative authority is required for OEL to enter into a memorandum of
understanding for the monitoring and inspection of license exempt providers, and also to require the posting of monitoring inspections for these providers. Estimated timeline below:

March 11, 2016 - Legislative session ends.
July 1, 2016 - New legislation becomes effective.
September 30, 2016 - MOUs with DCF and LLA’s expected to be completed.
November 19, 2017 - Inspection posting protocol with Florida Department of Education (DOE) School Districts and U.S. Department of Defense (DoD) expected to be complete
November 17, 2017 - Posting of Provider Monitoring Inspection Information on DCF website.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 11/19/2017
Agency - Who is responsible for complete implementation of this activity OEL.
Partners - Who is the responsible agency partnering with to complete implementation of this activity
DCF, DOE, DoD

3 Provide Stable Child Care Financial Assistance to Families

The expanded purposes of CCDBG highlight the opportunities States and Territories have to "deliver high-quality, coordinated early childhood care and education services to maximize parents" options and support parents trying to achieve independence from public assistance"; and "to improve child care and development of participating children." (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements - and the opportunity for children to form trusting relationships with teachers - are often interrupted and unstable. Child care financial assistance policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).
The CCDBG Act of 2014 included requirements to establish minimum 12-month eligibility and redetermination periods, requiring that States and Territories have a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not disrupted by program requirements, policies to provide for job search of not less than three (3) months, and to describe policies for graduated phase-out of assistance. The definition of an eligible child includes that a family's assets may not exceed $1,000,000 (as certified by a member of such family). Procedures for enrollment of homeless children pending completion of documentation are also now required. There is nothing in statute to prohibit States from establishing policies that extend eligibility beyond 12 months or establish other similar policies to align program requirements that allow children enrolled in Head Start, Early Head Start, state or local pre-kindergarten and other collaborative programs to finish the program year and to promote continuity for families receiving services through multiple benefits programs.

3.1 Eligible Children and Families

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

3.1.1 Eligibility Criteria Based upon Child's Age

a) The CCDF program serves children from zero (weeks/months/years) to 13 years (through age 12).

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

☐ Yes, and the upper age is (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity:

☑ No
c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B))

☐ Yes and the upper age is  (may not equal or exceed age 19)
☒ No.

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

a) residing with -

Living with a parent, legal guardian or other adult relative caretaker in the same home.

b) in loco parentis -

A responsible adult with whom the child lives, who is responsible for the day-to-day care and custody of the child when the child's parent by blood, marriage, adoption or court order is not performing such duties. Rule 6M-4.200(1)(b), FAC

3.1.3 Eligibility Criteria Based on Reason for Care

a) How does the Lead Agency define "working, attending job training and education" for the purposes of eligibility at the point of determination? Provide a brief description below, including allowable activities and if a minimum number of hours is required by State/Territory (not a federal requirement).

* working:

Participating in educational or work activities a minimum of 20 hours per week for a single-parent family, 40 hours per week for a two-parent family or a two-parent family in which one of the parents with whom the child resides is exempt from work requirements due to age or disability, as determined and documented by a physician licensed under Florida Statutes, and one parent is employed or engaged in eligible work or education activities at least 20 hours per week, a one or two-parent family in which the parent(s) are exempt from work requirements due to age or disability as determined and documented by a physician licensed under Florida Statutes. Work activities applicable to the Welfare Transition participants (WTP) could include employment, non-subsidized employment; subsidized private sector employment, on the job training, subsidized public sector employment, community service work experience, job search, job readiness assistance; or vocational education or training designed to prepare the participant for
employment or other prescribed activities as approved by Welfare Transition program. Work activities for non WTP clients includes employment or educational activities. Some TANF recipients may have work requirements/activities that are not subject to the 20-hour per week minimum.

* attending job training

Attendance in a job training or education program for transitional TANF clients who receive CCDF-funded child care. This requirement is monitored by the Florida Department of Economic Opportunity through regional Workforce Development Boards or their contracted providers.

* attending education

Single parent families may also qualify for child care assistance if they are in school and training the equivalent of 20 hours or more per week or a combined total of at least 40 hours per week for a two-parent family. This is normally defined as full-time by the educational institution with recognition of class time, study time, reasonable travel times and lab times. An official of the school or institution must complete documentation showing the applicable number of classroom hours, any lab hours, the date the semester/training period starts and the date it ends. Online courses are an allowable form of education or training activities as long as appropriate documentation is submitted.

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

☑ Yes.
☐ No.

If no, describe additional requirements

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

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

1) Definition of protective services -

For the purposes of eligibility, protective services participants are defined as "at-risk" in s. 1002.81(1), F.S. "At-risk child" means

- A child from a family under investigation by DCF or a designated sheriff's office for child abuse, neglect, abandonment or exploitation.
- A child who is in a diversion program provided by the Department of Children and Families or its contracted provider and who is from a family
that is actively participating and complying in department-prescribed activities, including education, health services or work.
- A child from a family that is under supervision by DCF or a contracted service provider for abuse, neglect, abandonment or exploitation.
- A child placed in court-ordered, long-term custody or under the guardianship of a relative or nonrelative after termination of supervision by DCF or its contracted provider.
- A child in the custody of a parent who is a victim of domestic violence who is receiving services from a certified domestic violence center.
- A child in the custody of a parent who is considered homeless as verified by a DCF certified lead agency.

A child who has special needs, has been determined eligible as a student with a disability, has a current individual education plan with a Florida school district, and is not younger than 3 years of age and has not enter kindergarten is also defined as in need of "protective services" as identified as a vulnerable population.

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

☐ Yes.
☐ No.

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

☐ No.

3.1.4 Eligibility Criteria Based on Family Income

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

* Definition of income -
"Family income" means the combined gross income, whether earned or unearned, that is derived from any source by all family or household members who are 18 years of age or older who are currently residing together in the same dwelling unit. The term does not include income earned by a currently enrolled high school student who, since attaining the age of 18 years, or a student with a disability who, since attaining the age of 22 years, has not terminated school enrollment or received a high school diploma, high
school equivalency diploma, special diploma or certificate of high school completion. Income does not include income earned by a teen parent residing in the same residence as a separate family, nor does income include food stamps, adoption subsidies, foster care payments, documented child support and alimony payments paid out of the home, federal nutrition programs, federal tax credits, state/territory tax credits, housing allotments, LIHEAP or energy assistance, military housing or other allotment/bonuses, federal housing assistance payments issued directly to a landlord or the associated utilities expense, scholarships, education loans, grants, income from work study, disaster relief or other forms of temporary assistance of families in a natural disaster areas, income of foster parents and court ordered relative and non-relative caregivers, independent living grant, lump sum settlement, money borrowed with an established repayment plan, one time only gifts, sale of personal assets, VISTA payments, Supplemental Security Income (excluded for children only).

b) Provide the CCDF income eligibility limits in the table below. Complete columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) ONLY IF the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum "exit" eligibility level if applicable and below the federal limit of 85% of current SMI.

☐ Note - If the income eligibility limits are not statewide, check here

Describe how many jurisdictions set their own income eligibility limits

Fill in the chart based on the most populous area of the state.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a) 100% of State Median Income (SMI) ($/month)</th>
<th>(b) 85% of State Median Income (SMI) ($/month) [Multiply (a) by 0.85]</th>
<th>(c) (IF APPLICABLE) $/month Maximum &quot;Entry&quot; Income Level if lower than 85% Current SMI</th>
<th>(d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI</th>
<th>(e) (IF APPLICABLE) $/month Maximum &quot;Exit&quot; Income Level if lower than 85% Current SMI</th>
<th>(f) (IF APPLICABLE) % of SMI [Divide (e) by (a), multiply by 100] Income Level if lower than 85% Current SMI</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3934.33</td>
<td>3344.18</td>
<td>1961.67</td>
<td>50%</td>
<td>1961.67</td>
<td>50%</td>
</tr>
<tr>
<td>2</td>
<td>4465.83</td>
<td>3795.96</td>
<td>2655.00</td>
<td>59%</td>
<td>2655.00</td>
<td>59%</td>
</tr>
</tbody>
</table>
### Table: Income Limits

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a) 100% of State Median Income (SMI) ($/month)</th>
<th>(b) 85% of State Median Income (SMI) ($/month)</th>
<th>(c) $/month Maximum &quot;Entry&quot; Income Level if lower than 85% Current SMI</th>
<th>(d) % of SMI if lower than 85% Current SMI</th>
<th>(e) $/month Maximum &quot;Exit&quot; Income Level if lower than 85% Current SMI</th>
<th>(f) % of SMI if lower than 85% Current SMI</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>4751.00</td>
<td>4038.35</td>
<td>3348.33</td>
<td>70%</td>
<td>3348.33</td>
<td>70%</td>
</tr>
<tr>
<td>4</td>
<td>5542.42</td>
<td>4711.05</td>
<td>4041.67</td>
<td>73%</td>
<td>4041.67</td>
<td>73%</td>
</tr>
<tr>
<td>5</td>
<td>5401.33</td>
<td>4591.13</td>
<td>4735.00</td>
<td>88%</td>
<td>4735.00</td>
<td>88%</td>
</tr>
</tbody>
</table>

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

c) SMI Source and year U.S. Census Bureau, from the American Community Survey by Family Size (1 year), 2014


d) These eligibility limits in column (c) became or will become effective on: July 1, 2015

e) Provide the link to the income eligibility limits


### 3.1.5 Graduated Phase-Out of Assistance

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

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

List the Lead Agency's policy citation(s) and describe the policies and procedures for graduated phase-out

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

Overall Target Completion Date (no later than September 30, 2016) 03/31/2017

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Not yet started

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Unmet requirement - Identify the requirement(s) to be implemented A graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative and rule changes are needed to implement the graduated phase out.

Estimated timeline below:
March 11, 2016 - Legislative session ends
July 1, 2016 - New legislation becomes effective
July 15, 2016 - Internal rule development expected completion
July 28, 2016 - Last day to hold rule workshop.
August 11, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
September 23, 2016 - Rule reviewed by Florida State Board of Education expected completion.
October 21, 2016 - Rule approval by Florida Department of State expected completion.
Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 03/31/2017
Agency - Who is responsible for complete implementation of this activity: OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: Early Learning Coalitions and RCMA.

3.1.6 Fluctuation in Earnings

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

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

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

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

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Workgroup has developed a methodology for use, methodology will be incorporated in the Grant Agreement by way of the School Readiness Guide at the start of the state fiscal year. Target completion date includes implementation phase of three months after the start of the state fiscal year.

Unmet requirement - Identify the requirement(s) to be implemented A process for initial determination and redetermination take into account irregular fluctuations in earnings.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Modification of grant agreement documents and rule changes are needed to fully implement fluctuation in earnings methodology. Estimated timeline below:

June 30, 2016 - Grant Agreements with the ELCs updated to include methodology.
July 15, 2016 - Internal rule development expected completion.
July 28, 2016 - Last day to hold rule workshop.
August 11, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
September 23, 2016 - Rule reviewed by Florida State Board of Education expected completion.
October 21, 2016 - Rule approval by Florida Department of State expected
Training and Implementation of policy will run concurrently with rule approval steps above.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity Early Learning Coalitions and RCMA.

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information.

Check the information that the Lead Agency documents. There are no federal requirements for specific documentation or verification procedures.

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

Applicant identity.
Describe:
The applicant must meet the definition of a parent consistent with regulatory requirements. Federal guidelines stipulate case confidentiality, which is also defined in s. 1002.97, F.S. By speaking only to a household member with an established relationship to the child, the case worker ensures that case confidentiality is maintained. To establish the relationship to the child, the parent should establish identity by presenting an acceptable form of verification. This may include a copy of the child's birth certificate. If the parent's name does not appear
on the birth certificate, then a court order or another legal document that substantiates the adult's relationship to the child(ren) should be provided. Valid child care referrals, a government-issued ID or employment or student ID can also be used to establish relationship to the child. The OEL does not recognize preferred source documentation to meet these criteria. All documentation listed above is acceptable. A copy must be maintained in the case record. If the document does not have a photo included, then two forms of ID showing the parent's name should be obtained, such as a Social Security card, pay stubs, employment record, an insurance card or other documentation secured throughout the eligibility determination process. If none of the above documents can be made available, a third party attestation may be used to establish identity and parental relationship. This document must include a fraud disclaimer, describe the individual and the relationship to the child and include a brief explanation as to how the individual knows this information. If this option is used, the early learning coalition must also collect an attestation from the parent stating his or her legal relationship to the child, and that the parent understands he or she is making the attestation under the penalty of perjury, which is a first degree misdemeanor, punishable by a definite term of imprisonment, not exceeding one year and/or a fine not exceeding $1,000 pursuant to ss. 837.012, 775.082 or 775.083, F.S. The case narration must explain why alternative sources were not available and the efforts made to obtain such documentation. Unacceptable types of identification include

- A photo ID made from an unofficial source (e.g. flea market, internet, etc.).
- Any type of form generated by the parent/guardian and not issued by a third party source (e.g. an application completed by the parent/guardian for another type of service).
- One World Government IDs.

Applicant's relationship to the child.

Describe:

After the applicant has established his or her identity by providing acceptable documentation, these same documents are also used to establish the applicant's relationship to the child. Please refer to the description in the "applicant identity" section.

Child's information for determining eligibility (e.g., identity, age, etc.).

Describe:

Birth certificates are the most commonly used method to verify the age of the school readiness child. The following are recommended documents to be used to establish the following:
Age of the child
- An original or certified copy of the child's U.S. birth record filed according to law with the appropriate public officer.
- U.S. hospital record.
- U.S. passport.
- An original or certified copy of the child's certificate of baptism or other religious record of the child's birth, accompanied by an affidavit stating that the certificate is true and correct, sworn to or affirmed by the child's parent.
- Citizenship or naturalization certificate.
- TANF child care referral.
- A DCF-issued standardized referral form, CF-FSP 5002, for at-risk clients that has the Medicaid-eligible status checked "yes."

✔

Work.
Describe:
Employment income: Applicants are asked to submit six weeks of current and consecutive paystubs. If an applicant cannot produce a sufficient number of paystubs, the applicant's employer is asked to complete an income verification form that details hours worked per week and rate of pay. If the applicant produces neither of the above, then the eligibility specialist contacts the applicant's employer directly.
Self-employment income documentation: The most commonly accepted form of documentation is IRS Tax Schedule C from the most recent year if reflective of current earnings. The income from Schedule C (corporate documents, if incorporated) should be used and averaged over the number of months of employment. If not reflective of current earnings for the household, older than six months or applicant/recipient has not been self-employed long enough to have filed income tax, then a profit/loss statement is requested from the household. If questionable, additional receipt and expense documentation is

✔ requested.

Job Training or Educational Program.
Describe:
For applicants who are involved in a job training program, a TANF child care referral serves as verification. If the gross income of the applicant is not notated on the child care referral, the applicant must submit six weeks of current paystubs to the early learning coalition.
School registration records: For Educational Programs, a current document completed by an official of the school or institution showing the number of classroom hours and any lab hours,
date the semester/training period starts, and the date it ends on appropriate stationery from
the school/institution or training program which may contain an official seal.

☑ Family Income.
Describe:
Early learning coalitions can use the following documents to verify income:
- Six weeks of current and consecutive pay stubs, using gross income (before any
deductions, including pretax deductions). When paid biweekly, three current and
consecutive pay periods are requested. For semi-monthly or monthly pay periods, two
months of pay periods are requested.
- An income verification form signed by the employer. Hours worked times rate of pay
is then used to calculate earnings.
- A signed contract for employment.
- If none of the above sources are available, direct contact is made with the employer
to discuss the applicant's employment income, which is used to arrive at an income
projection that is representative of future earnings. Also recorded is any information
provided by the employer, such as projected hours of employment, amount per hour,
date the employee started and date of the first received pay.
Child support enforcement records: OEL prefers verification from child support enforcement
or a clerk of the court website showing gross amount paid to the household on behalf of the
child and the period over which it is paid.
Alternatively, a written statement from the absent parent stating the amount(s) the absent
parent paid over the last six weeks, including the dates payments were made. Copies of
checks or canceled checks can accompany written statements or be submitted in lieu of
written documents.
A court order can be used if it was recently issued. However, if the court order has been
established for a period of time, and the custodial parent states that the court order does not
reflect current payments, then proof is requested of the last six weeks (two months if paid
monthly) of payment and the income is averaged.
If, for any reason, the first two sources are not available, an attestation from the parent
stating the amount of child support received or not received under the penalty of perjury is
acceptable.
Other sources of unearned income: An award letter or verification statement may be used to
☑ document other sources of unearned income.
Household composition.
Describe:
The family unit composition is determined by the application for school readiness and the
School Readiness Income Worksheet for Eligibility and Parent Copayments ( Form OEL-SR
Documentation may also include a supplemental form that describes additional family members and relationships.

Applicant Residence.

Describe:

Early learning coalitions can use the following documents to verify residence:

- Government-issued document (e.g., Florida driver's license, Florida identification card, property tax assessment for current calendar year showing a homestead exemption).
- Military order showing that the child's parent is a service member in the United States Armed Forces assigned to duty in Florida.
- Signed and dated rent receipt or lease agreement for current calendar year.
- Utility bill received within the last six weeks.
- Landline telephone bill received within the last six weeks.
- Pay stub received within the last six weeks.
- Property tax bill for current calendar year.
- If a homeless child does not have access to any of the supporting documents listed above, documentation from a homeless shelter, domestic violence shelter or authorized emergency management location may be accepted.
- Child Care Application and Authorization (referral).
- An affidavit the child's parent swore to or affirmed accompanied by a letter a landlord or property owner wrote within 30 days of the affidavit that confirms that the child resides at the address shown in the affidavit.

Other.

Describe:

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

- Check: Time limit for making eligibility determinations.
  Describe length of time:
  Ten-day time limit for TANF and at-risk child care referrals. For working families, eligibility determinations will be made within 30 calendar days of the date of the application (OEL Grant Agreement).

- Check: Track and monitor the eligibility determination process
  Other: None
  Describe:

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

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

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

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

    State/Territory TANF Agency: Florida Department of Economic Opportunity (DEO)
b) Provide the following definitions established by the TANF agency.

"appropriate child care":
The care, protection and supervision of a child that supplements parental care enrichment and healthy supervision for the child in accordance with his or her individual needs. Such care should increase the child's chances of achieving future educational success and becoming a productive member of society.

"reasonable distance":
Reasonable distance depends on the geographic area and availability of public transportation. Program staff discusses and determines mileage and/or time needed for travel to and from the job site with the participant.

"unsuitability of informal child care":
The Florida Abuse Hotline Information System records check must be completed on all informal child care providers who receive funding to provide child care services through the subsidized child care program. If any individual in the household has a report with "some indication" or "verified findings" of abuse, the early learning coalition analyzes the clearance form to determine whether the proposed provider will receive compensation from public funds. The coalition or their subcontract provider notifies the parent of the decision by letter, and the parent has the opportunity to select an alternate care provider.

"affordable child care arrangements":
Annually, the Child Care Resource and Referral Network surveys all legally operating child care providers to obtain program and rate information. Biennially, the Office of Early Learning uses the rate information to determine the prevailing market rate by age category and provider type at the county-level. Coalitions use the prevailing market rate to set the maximum reimbursement rates for their service area.

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

- In writing
- Verbally
- Other.

Describe:
List the citation to this TANF policy.

List:

State Plan for Temporary Assistance for Needy Families, Sections 3.4., 3.7, and Section 414.065(1)

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

Yes. The Lead Agency certifies that it will require families to certify that the family assets do not exceed $1,000,000 no later than September 30, 2016.

3.2 Increasing Access for Vulnerable Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. This did not change under reauthorization. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B))

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

a. Provide definition of "Children with special needs": Children, ages 3 to admission to kindergarten, who have been determined eligible as students with disabilities in accordance with State Board of Education Rules Chapter 6A-6, FAC, or are eligible clients of the Agency for Persons with Disabilities. Local school districts have Individual Education Plans (IEPs) or Family Support Plans developed for these children, which would assist with determination. Both plans are required through the Individuals with Disabilities Education Act (IDEA, Part C and B).

and describe how services are prioritized:

Listed as the eighth priority for SR services pursuant to s. 1002.87(1)(h), F.S. Children in families that meet the income requirements may be served in priority three as well.
b. Provide definition of "Families with very low incomes": Pursuant to s. 1002.81(7), F.S., the term economically disadvantaged means having a family income that does not exceed 150 percent of the federal poverty level and includes being a child of a working migratory family as defined by 34 C.F.R. s. 200.81(d) or (f) or an agricultural worker who is employed by more than one agricultural employer during the course of a year, and whose income varies according to weather conditions and market stability.

and describe how services are prioritized:

Listed as the third priority for school readiness services pursuant to s. 1002.87(1)(c), F.S., for children ages birth to entry to kindergarten (and may include siblings up to sixth grade) and listed as the sixth priority pursuant to s. 1002.87(1)(f), F.S., for children younger than 13 years of age.

c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act)

The Florida Legislature sets priorities for serving CCDF-eligible children. Pursuant to s. 1002.87, F.S., the School Readiness Program is established for children in the following priorities:

- A child younger than 13 years of age from a family that includes a parent who is receiving temporary cash assistance under chapter 414, F.S., and is subject to federal work requirements.
- An at-risk child younger than 9 years of age (at-risk includes protective services, foster care, homeless and children in families who are victims of domestic violence).
- A child from birth to kindergarten entry who is from a working family that is economically disadvantaged, and may include eligible siblings.
- A child of a parent who transitions from the work program into employment as described in s. 445.032, F.S., from birth to kindergarten entry.
- An at-risk child who is at least 9 years of age but younger than 13 years of age.
- A child who is younger than 13 years of age from a working family that is economically disadvantaged.
- A child who has special needs, has been determined eligible as a student with a disability, has a current individual education plan with a Florida school district, and is not younger than 3 years of age to kindergarten entry.
- A child who otherwise meets one of the eligibility criteria in paragraphs (a)-(d) but who is also enrolled concurrently in the federal Head Start Program and VPK.
3.2.2 Improving Access for Homeless Children and Families.

The CCDBG Act of 2014 places greater emphasis on serving homeless children and families. Stable access to high-quality child care provides tremendous benefits to all children, especially our most vulnerable children. Children and families who experience homelessness face many challenges. Improving access to child care can buffer children and families from the challenges and risks associated with homelessness by supporting children's learning and development in safe, stable and nurturing environments. Under the new law, States and Territories are required to use CCDF funds to 1) allow homeless children to receive CCDF assistance after an initial eligibility determination but before providing required documentation (including documentation related to immunizations); 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and 3) conduct specific outreach to homeless families. (658E(c)(3))

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

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

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe the following:

a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements

To improve access to child care for homeless families, the definition of "at-risk child" was expanded in 2013 for the School Readiness Program to include a child in the custody of a parent considered homeless as verified by DCF designated lead agency on
homelessness (s. 1002.81(1)(f), F.S.), and also to include services for homeless families, including those in domestic violence shelters. Immunization records are not collected by the school readiness agency as a condition of initial eligibility for child care. Child care providers are responsible for obtaining and keeping on file a record of the child's immunizations, physical development and other health requirements. Parents have a 30-day grace period to submit immunization records to the child care provider. School-aged children attending public or non-public schools are not required to have student health examination and immunization records on file at the child care facility as such records are on file at the school where the child is enrolled (Rule(s) 65C-22.006(2), 65C.20.011 (1) and 64D-3.011, FAC, and ss. 1002.81(1)(e), 1002.81(1)(f) and 1002.88, F.S.).

b. Procedures to conduct outreach to homeless families to improve access to child care services

LEAs assist with disseminating information to homeless families about child care services and how to access them. Additionally, each early learning coalition collaborates with the Homelessness-designated lead agency in its service area through a memorandum of agreement to provide school readiness services to homeless families in the community. The designated homeless agencies, through their continuum of care plans, collaborate with various agencies, including local school districts that inform families about the School Readiness Program and may refer families to the local early learning coalition for school readiness services.

Because families experiencing homelessness are categorically eligible for Head Start, Early Head Start and Migrant and Seasonal Head Start services, early learning coalitions may refer homeless families to Head Start programs, thus freeing up CCDF funds to serve other families.

The definition of an "at-risk child" was also amended to include a child in the custody of a parent who is a victim of domestic violence, residing in a certified domestic violence center (s. 1002.81(1)(e), F.S.). Each early learning coalition collaborates with the certified domestic violence centers in its service area through a memorandum of agreement to provide school readiness services in the community to families that may become homeless as a result of domestic violence.

c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services

Immunization records are not collected by the ELC/RCMA as a condition of initial eligibility for child care. Child care providers are responsible for obtaining and keeping on
file a record of the child's immunizations, physical development and other health requirements. Parents have a 30-day grace period to submit immunization records to the child care provider. School-aged children attending public or non-public schools are not required to have student health examination and immunization records on file at the child care facility, as such records are on file at the school where the child is enrolled (Rule(s) 65C-22.006(2), 65C.20.011(1) and 64D-3.011, FAC, and s. 1002.88, F.S.).

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
3.3 Protection for Working Parents

3.3.1 Twelve Month Eligibility

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

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

In addition, this change means the State may not terminate assistance prior to the end of the 12 month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. For example, if a working parent is temporarily absent from employment due to extended medical leave, changes in seasonal work schedule, or a parent enrolled in training or educational program is temporarily not attending class between semesters, the state should not terminate assistance.

Describe the status of the State's establishment of a 12-month eligibility re-determination period for CCDF families.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination

- List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination

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

Overall Target Completion Date (no later than September 30, 2016) 03/31/2017

Overall Status - Describe the State/Territory's status toward complete implementation for
any requirement(s) (not yet started, partially implemented, substantially implemented,
other)  Not yet started

Implemented requirement(s) - Identify any requirement(s) implemented to date if
applicable

Unmet requirement - Identify the requirement(s) to be implemented  A minimum 12-
month eligibility and redetermination period for CCDF families.

Tasks/Activities -What specific steps will you take to implement the unmet
requirement (e.g., legislative or rule changes, modify agreements with coordinating
agencies, etc.)

Legislative and rule changes are needed to implement the 12 month eligibility.
Estimated timeline below:
March 11, 2016 - Legislative session ends
July 1, 2016 - New legislation becomes effective
July 15, 2016 - Internal rule development expected completion
July 28, 2016 - Last day to hold rule workshop.
August 11, 2016 - Rule approval by Joint Administrative Procedures Committee
expected completion.
September 23, 2016 - Rule reviewed by Florida State Board of Education expected
completion.
October 21, 2016 - Rule approval by Florida Department of State expected
completion.
Training and Implementation of policy will run concurrently with rule approval steps
above and through March of 2017.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 03/31/2017
Agency - Who is responsible for complete implementation of this activity OEL.
3.3.2 State and Territory option to terminate assistance prior to 12 months

The CCDBG Act of 2014 provides States and Territories the option - but does not require them - to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible.

Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and re-determination period if families are eligible at the end of their job search, training or education attendance period.

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

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

☑ Yes, the State/Territory terminates assistance prior to 12 months due to parent's loss of work or cessation of attendance at a job training or education program ONLY.

List the Lead Agency's policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs

The statutory reference in the new legislation is section 1002.87(5) and (6), Florida Statutes (2016). The circumstances considered to be non-temporary job, education or training loss include loss of job with the intent to regain employment; breaks between college semesters; and seasonal employment (e.g., agricultural workers). The duration allowed for job search or resuming education/training activities is 90 days.
No, the State/Territory does not allow this option.

### 3.3.3 Prevent Disruption of Work

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

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

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

List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment

The School Readiness Program maintains an online Family Portal, which enables families to electronically complete the application, upload documents and validate information for redetermination. The link to the Family Portal is [https://familyservices.floridaearlylearning.com/Account/Login](https://familyservices.floridaearlylearning.com/Account/Login).

Additionally, coalitions provide extended hours of service to accommodate those parents unable to access services during normal business operating hours (s.1002.82(2)(n), F.S.).

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide...
3.4 Family Contribution to Payment

The statute requires Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care that is not a barrier to families receiving CCDF. (658E(c)(5) In addition to income and size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. The sliding fee scale is subject to review by ACF as part of ongoing monitoring efforts to CCDBG compliance.
3.4.1 Provide the CCDF copayments in the chart below according to family size.

Note - If the sliding fee scale is not statewide, check here and describe how many jurisdictions set their own sliding fee scale
The 30 Early Learning Coalitions and RCMA.

Fill in the chart based on the most populous area of the State.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a) Lowest &quot;Entry&quot; Income Level Where Copayment First Applied</th>
<th>(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?</th>
<th>(c) What is the percent of income for (b)?</th>
<th>(d) Maximum Highest &quot;Entry&quot; Income Level Before No Longer Eligible</th>
<th>(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?</th>
<th>(f) What is the percent of income for (e)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1471.25</td>
<td>104</td>
<td>7%</td>
<td>1961.67</td>
<td>242.67</td>
<td>12%</td>
</tr>
<tr>
<td>2</td>
<td>1991.25</td>
<td>104</td>
<td>5%</td>
<td>2655.00</td>
<td>242.67</td>
<td>9%</td>
</tr>
<tr>
<td>3</td>
<td>2511.25</td>
<td>104</td>
<td>4%</td>
<td>3348.33</td>
<td>242.67</td>
<td>7%</td>
</tr>
<tr>
<td>4</td>
<td>3031.25</td>
<td>104</td>
<td>3%</td>
<td>4041.67</td>
<td>242.67</td>
<td>6%</td>
</tr>
<tr>
<td>5</td>
<td>3551.25</td>
<td>104</td>
<td>3%</td>
<td>4735.00</td>
<td>242.67</td>
<td>5%</td>
</tr>
</tbody>
</table>

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

b) Provide the link to the sliding fee scale
http://www.elcmdm.org/our_services/schoolreadiness/2015SlidingFeeELC%20MDM.pdf

3.4.2 How will the family's contribution be calculated and to whom will it be applied?
Check all that the Lead Agency has chosen to use.

- Fee as dollar amount and
  - Fee is per child with the same fee for each child
  - Fee is per child and discounted fee for two or more children
  - Fee is per child up to a maximum per family
  - No additional fee charged after certain number of children
☐ Fee is per family
☐ Fee as percent of income and
  ☐ Fee is per child with the same percentage applied for each child
  ☐ Fee is per child and discounted percentage applied for two or more children
  ☐ Fee is per child up to a maximum per family
  ☐ No additional percentage applied charged after certain number of children
  ☐ Fee is per family
☑ Contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:
The OEL requires ELCs and RCMA to develop sliding fee scales based on the most current release of the Federal Poverty Guidelines. This information is provided in each coalition's School Readiness (SR) Plan or the RCMA contract and subject to OEL approval. Most, but not all ELCs allow for a discounted fee for two or more children.

☐ Other.
Describe:

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

☑ Yes, and describe those additional factors using the checkboxes below.
  ☑ Number of hours the child is in care
  ☐ Lower copayments for higher quality of care as defined by the State/Territory
  ☐ Other.
Describe other factors.

☐ No.

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

Will the Lead Agency waive family contributions/co-payments?
Yes, the Lead Agency waives family contributions/co-payments for families with income at or below the poverty level for families of the same size.

The poverty level used by the Lead Agency for a family size of 3 is $20,090 (2015).

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

### 3.4.5 How will the Lead Agency ensure the family contribution/co-payment, based on a sliding fee scale, is affordable?

Check all that apply:

- ☐ Limits the maximum co-payment per family.
  Describe:

- ☑ Limits combined amount of copayment for all children to a percentage of family income. List the percentage of the copayment limit.
  Describe:
  Copayment in excess of 10 percent must include a justification. Rule 6M-4.400(4), FAC, states sliding fee scale. A coalition's sliding fee scale must be set at a level that provides economically disadvantaged families equal access to the care available to families whose income is high enough not to qualify for financial assistance for school readiness services. A coalition must submit its proposed sliding fee scale to OEL for approval. The OEL shall review the sliding fee scale to determine that the scale is reflective of the annually released federal poverty level, has an effective date no later than July 1 of that year and that parent copayments do not exceed 10 percent of the family's income, regardless of the number of children in care. The OEL shall perform a sampling of different income levels and family size to confirm that the proposed parent copayments do not exceed the 10 percent level. If the coalition's proposed sliding fee scale does exceed 10 percent of family income, the coalition must provide justification of how the sliding fee scale meets the federal requirement that the copayment be affordable, prior to approval of the proposed sliding fee scale by OEL.

- ☐ Minimizes the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5.
4 Ensure Equal Access to High Quality Child Care for Low-Income Children

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

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

To provide stability of funding and encourage more child care providers to participate in the subsidy program, the State/Territory’s payment practices for CCDF child care providers must reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory, such as paying for supplies, field trips, registration fees. In addition, to the extent practicable, the State/Territory must implement enrollment and eligibility policies that support

Describe:

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

Describe:

☐ Covers all fees (such as registration, supplies, field trips) to minimize the additional fees charged to the families by the provider.

Describe:

☐ Other.

Describe:
the fixed costs of providing child care services by delinking provider payments from a child’s occasional absence due to holidays or unforeseen circumstances such as illness or closures due to emergency.

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

4.1 Parental Choice In Relation to Certificates, Grants or Contracts

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

4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2))

Child Care Resource and Referral (CCR&R) serves all parents seeking early learning services in Florida free of charge. Trained staff provide consumer education on quality indicators for early learning to inform families on how to recognize quality early learning programs. CCR&R specialists also provide referrals to early learning programs, and information and referrals to other local community resources. The CCR&R State Network serves two fundamental purposes: (1) to help parents identify and select quality early learning programs that best meet their children's needs and (2) to provide technical assistance that addresses and improves the quality, availability and affordability of child care. This is accomplished through the provision of information and resources about quality early learning options and work/family solutions to families, child care professionals and government entities. Each CCR&R program maintains a database of all legally operating child care providers in its service area. The CCR&R database contains licensed, license-
exempt, faith-based, registered family child care homes, including Head Start, Early Head
Start and Migrant and Seasonal Head Start programs, and non-traditional child care
providers, which includes summer camps, afterschool programs and Boys and Girls Clubs.
This database is the data source for families searching for child care arrangements, and the
data also support local businesses by serving as advertisement for child care services.
Additionally, each family who contacts CCR&R for information is provided a non-biased
listing of child care providers that meets that family's individual need, suggestions on how the
family can proceed with its search for a child care provider, website information for the state
licensing database and an invitation to call back if further assistance is needed. Parents are
also provided with electronic or printed items created by OEL to assist in their search for
quality care. To reinforce parental choice, parents who want their children to attend a
program that does not have a contract to serve CCDF families can ask the provider to apply
for a contract with their local coalition to serve these families.

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

☐ Certificate form provides information about the choice of providers, including high
quality providers
✓ Certificate is not linked to a specific provider so parents can choose provider of
choice
✓ Consumer education materials on choosing child care
✓ Referral to child care resource and referral agencies
✓ Co-located resource and referral in eligibility offices
✓ Verbal communication at the time of application
✓ Community outreach, workshops or other in-person activities
✓ Other.
Describe
Certificates may identify the provider if the parent has selected a provider at the time the
certificate is issued.
4.1.3 Child Care Services Available through Grants or Contracts

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

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

- [ ] No. If no, skip to 4.1.4.

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

- [ ] Increase the supply of specific types of care with grants or contracts for:
  - Programs to serve children with disabilities
  - Programs to serve infants and toddlers
  - Programs to serve school-age children
☐ Programs to serve children needing non-traditional hour care
☐ Programs to serve homeless children
☐ Programs to serve children in underserved areas
☐ Programs that serve children with diverse linguistic or cultural backgrounds
☐ Programs that serve specific geographic areas
   ☐ Urban
   ☐ Rural
   ☐ Other.
Describe:

☐ Improve the quality of child care programs with grants or contracts for:
   ☐ Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs
   ☐ Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-K programs that meet higher quality standards
   ☐ Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased education requirements to higher compensation
   ☐ Programs to serve children with disabilities or special needs
   ☐ Programs to serve infants and toddlers
   ☐ Programs to serve school-age children
   ☐ Programs to serve children needing non-traditional hour care
   ☐ Programs to serve homeless children
   ☐ Programs to serve children in underserved areas
   ☐ Programs that serve children with diverse linguistic or cultural backgrounds
   ☐ Programs that serve specific geographic areas
      ☐ Urban
      ☐ Rural
      ☐ Other.
Describe:
4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds.

(658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access:

Describe the policies and procedures for unlimited access
Custodial parent or guardian access to children while in the care of any legally operating provider, whether receiving or not receiving financial assistance through the Child Care and Development Fund, is an enforceable requirement of ss. 402.305, 402.313, and 402.3131, F.S.; Chapters 65C-20 and 65C-22 F.A.C.; and the Statewide School Readiness Provider Contract.

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. Will the Lead Agency limit the use of in-home care in any way?

☐ Yes. If checked, what limits will the Lead Agency set on the use of in-home care?
Check all that apply.
☐ Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act
Describe:

☐ Restricted based on provider meeting a minimum age requirement
Describe:

☐ Restricted based on hours of care (certain number of hours, non-traditional work hours)
Describe:

☐ Restricted to care by relatives
Informal child care providers are restricted to providing care to eligible children from only one family who are, by marriage, blood relationship, or court decree, the grandchild, great grandchild, sibling (if such provider lives in a separate residence), niece, or nephew of such provider, and complies with any applicable requirements that govern child care provided by the relative involved. Early learning coalitions ensure a Level 1 Screening and a Child Abuse and Neglect Screening are completed for these providers. Informal child care rates are established at no more than one-half the appropriate legally operating family child care home rate per child. Informal providers must complete an annual health and safety checklist annually, which must be posted on premises in a conspicuous location and submitted to the early learning coalition. Informal providers are also required to have either liability insurance or maintain a homeowner's insurance policy that provides a minimum of $100,000 of coverage per occurrence and a minimum of $300,000 general aggregate coverage.

For children who are under the custody of DCF, license exempt child care, including informal child care providers may only be authorized by waiver/variance when no licensed child care homes or facilities are available within close proximity to work or home.

☐ No.
4.2 Assessing Market Rates and Child Care Costs

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

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

The State must consult with the State Advisory Council, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the MRS or alternative methodology, including by posting the results on the Internet.

The State must set CCDF subsidy payment rates in accordance with the results of the current MRS or alternative methodology. When setting payment rates, the State must take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered reimbursement or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number served as of November 2014. In taking the cost of providing quality into consideration, it is important to consider such key factors as what it takes to support increased stability and reduced provider turnover when setting payment rates.
4.2.1 Developing and Conducting a Market Rate Survey (MRS) and/or an Alternative Methodology. Did the State/Territory conduct a statistically and valid and reliable MRS, alternative methodology or both between July 1, 2013 and March 1, 2016?

☑ MRS
☐ Alternative Methodology.
Describe:
☐ Both.
Describe:
☐ Other.
Describe:

4.2.2 Describe how the State consulted with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities which could include worker organizations prior to developing and conducting the MRS or alternative methodology.

Describe:
The OEL consults and works with the Association of Early Learning Coalitions along with their local child care resource and referral agencies in conducting the MRS. Additionally, requirements for the market rate schedule are included in s. 1002.895, F.S.

4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable.

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

Describe:
The OEL requires each early learning coalition to annually update information on all providers in the Child Care Resource & Referral system. The early learning coalitions survey all providers in their communities to collect provider business profile, services offered and rate information. This information is updated in the state's information system. OEL provides three reports for coalitions to use to verify the information. One is a list of providers that have yet to be updated in the system. Another is a summary-level status report, which displays the number and percent of providers that have completed the survey. The last report displays the number and percent of providers that have reported out-of-bound rates. OEL also follows-up routinely with coalition staff on the status of their provider survey update results. After the coalition has verified the information, OEL creates a data subset of all providers that have responded to include in the market rate calculation based on provider type groups and rate categories.

The market rate is reported as a full-time and part-time weekly rate. Annual, monthly, daily, and hourly rates are converted to full-time weekly rates for inclusion in the calculation. Part-time rates are reported as part-time weekly rates. A rate is excluded from the calculation if it is less than $50 for full time, $25 for part time or more than $300 for full or part-time weekly care.

The OEL calculates the 75th percentile using the market rate data subset described above. The market rate report includes rate information by the coalition, county, age group, and provider type. The Market Rate Survey is distributed to the early learning coalitions to analyze current provider payment rates and determine if payment rates should be updated. The response rate for the 2015 Market Rate Survey was 99.87%, which included 13,213 of the 13,230 active providers in the CCR&R system.

**Provider Update Response Rate 2015**
Total Number of Active Providers in CCR&R 13,230
Total Number of Updated Providers 13,213

**Provider Update Completion Rate 99.87%**

**Provider Types Used in Market Rate Calculation 2013**
Total Number of Provider Types Included in Market Rate Calculation 12,853
Total Number of Providers with an Included Rate Type 12,436

**Percent of Providers in Rate Calculation 96.76%**
4.2.4 Describe how the market rate survey reflects variations in the price of child care services by:

a) Geographic area (e.g., statewide or local markets):
The market rate is based on the rates provided by providers per county. There are a total of 67 counties in Florida.

b) Type of provider:
Rates are calculated based on the following provider types: private center, family child care home, large family child care home, public school, non-public school, after school program and faith-based exempt center.

c) Age of child:
Rates are displayed for the following care levels: infant (0 to <12 months), toddler (12 months to <48 months), preschool-age (48 months to school age) and school age (school entry to < 13 years).

d) Describe any other key variations examined by the market rate survey, such as quality level
Rates are calculated based on full-time and part time weekly rates and if the provider is Gold Seal or a non-gold provider.

4.2.5 Describe the process used by the State to make the results of the market rate survey widely available to the public.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016)
   06/17/2015

b) Date report containing results were made widely available, no less than 30 days after the completion of the report
   08/31/2015

c) How the report containing results was made widely available and provide the link where the report is posted if available
   The report was posted both on OEL's SharePoint site for use by coalitions and OEL's website at http://www.floridaearlylearning.com/providers/provider_menu/market_rate.aspx.
4.3 Setting Payment Rates

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

☑ Note - If the payment rates are not set by the State/Territory, check here
Describe how many jurisdictions set their own payment rates
The30 ELCs and RCMA.

a) Infant (6 months), full-time licensed center care in most populous geographic region
   
   Rate $ 122.85 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   Percentile: 25%

b) Infant (6 months), full-time licensed FCC care in most populous geographic region
   
   Rate $ 106.05 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   Percentile: 13%

c) Toddler (18 months), full-time licensed center care in most populous geographic region
   
   Rate $ 107.10 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   Percentile: 27%

d) Toddler (18 months), full-time licensed FCC care in most populous geographic region
   
   Rate $ 99.23 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   Percentile: 17%

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region
   
   Rate $ 96.72 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   Percentile: 27%
f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region

    Rate $ 91.52 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
    Percentile: 25%

g) School-age child (6 years), full-time licensed center care in the most populous geographic region

    Rate $ 85.49 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
    Percentile: 26%

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region

    Rate $ 80.34 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
    Percentile: 55%

i) Describe the calculation/definition of full-time care:

    Full-time care is defined as daily care which is between 6 and 11 hours of care.

j) Provide the effective date of the payment rates : February 1, 2016

k) Provide the link to the payment rates :

    http://www.elcmdm.org/our_services/SchoolReadiness.html

4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care.

In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

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

Tiered rate/rate add-on for children with special needs as defined by the State/Territory.
Describe:
The amount of subsidy shall be consistent with the rates for special needs child care established by DCF. A special needs rate may be negotiated up to 20 percent above the licensed center infant payment rate. However, the special needs rates may not exceed the private pay rate for licensed center infant care receiving the same services. This rate differential is locally determined and helps ensure that providers who accept children with special needs are able to make the appropriate modifications necessary to meet each child's unique circumstances.

Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on).
Describe:
Early learning coalitions and RCMA assure quality of care for infants and toddlers based on the needs of their local communities, including the payment of a Gold Seal rate differential (see additional information on this program below) for infants and toddlers. Early Head Start programs that are receiving subsidy are also eligible for Gold Seal rate.

Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory.
Describe:
In 1996, the Florida Legislature established the Gold Seal Quality Care program to acknowledge child care facilities and family day care homes that are accredited by nationally-recognized agencies based on the applicable accrediting standards of the National Association for the Education of Young Children (NAEYC), the National Association of Family Child Care and the National Early Childhood Program Accreditation Commission. Head Start, Early Head Start and Migrant and Seasonal Head Start programs that receive subsidy rates and are accredited are also eligible for the Gold Seal program. In addition, the legislature has provided in its General Appropriations Act that early learning coalitions may negotiate the payment of a rate differential or stipend, which may not exceed more than 20 percent of an early learning coalition's reimbursement rate, to school readiness providers who have achieved a Florida Gold...
Seal Quality Care designation through accreditation.

☐ Tiered rate/rate add-on for programs serving homeless children.
   Describe:

☐ Other tiered rate/rate add-on beyond the base rate.
   Describe:

☐ None.

4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology

Describe:

The market rate schedule shall be considered by an early learning coalition in the adoption of a payment schedule. (s. 1002.895(3) and (4), F.S.).

Each Early Learning Coalition Board shall consider the following when evaluating and establishing the payment rate schedule:
- Parental choice and equal access,
- Current wait list data
- Average market rate
- Projected number of children to be served
- Fiscal impact

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014.

For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary.
Describe:
In 2014, in an effort to address concerns over the current payment rates and the cost of providing higher quality child care services, the Florida Legislature approved a special project, the Early Learning Performance Funding Pilot Project (ELPFPP), to see whether specific training and teaching approaches improve how well providers implement quality care and education that can subsequently lead to how well children do in the School Readiness Program. This project required eligible providers to participate in training/education and other quality activities such as administering child assessments and participating in technical assistance visits. The ELPFPP features tiered participation rates and bonuses that correlate with the amount of quality activities in which a provider has participated. As a provider completes the required quality activities for one tier, they can progress into the next and receive a higher participation rate, as well as become eligible for a higher bonus. The project continues to grow and the payment structure evolves to allow the state to reach a sustainable performance funding structure.

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

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

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

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

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

- Rates based on data on the cost to the provider of providing care meeting certain standards
Describe:

☑ Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile.

Describe:

The OEL provides the coalitions with a market rate report which includes rate information on the market rate average, minimum, maximum, median, most frequent, and 75th percentile. The average school readiness reimbursement rate and the percentage of the average and 75th percentile of the private pay rate is also included. These statistics are reported at the county and state level and further subdivided by full or part time and Gold Seal status for each provider type (Private Centers, Large Family Child Care Homes, Family Child Care Homes, Public Schools, Private Schools, Faith-Based Exempt, and After School) and Care Level (Infant, Toddler, Preschool, and School age). OEL continually monitors and updates a data file of ELC payment rates and analyzes trends comparing reimbursements for providers to the 75th percentile, average payment rates as well as the average school readiness payment rate. The size of the difference varies widely throughout the state. Consideration is also given to the "Most Frequent" pay rates, for example the 75th percentile maybe $130, but the most frequent is $100, when this is compared to the payment rate of $96 the difference is not that significant.

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

Describe:

Child care providers holding a Gold Seal Quality Care designation under s. 402.281 may be awarded an additional rate increase of up to 20 percent. Nearly a quarter of school readiness providers, including Gold Seal providers, are accredited and they serve 38% of the school readiness children.

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

Describe:

Children served in the School Readiness Program have access to all legally operating providers in the state of Florida that are eligible to provide school readiness services. The range of providers include Private Centers, Large Family Child Care Homes, Family Child Care Homes, Public Schools, Private Schools, Faith-Based Exempt, and After School.

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

☑ Feedback from parents, including parent survey or parent complaints.
  
  Describe:
  
  There is no data or complaints showing that families are unable to access child care.

☐ Other.
  
  Describe:

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

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

☑ Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access by March 1, 2016.

Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access

Sufficient payment rates and equal access are evident throughout the state based upon the large participation rate of various provider types in the School Readiness Program. Currently, 89 percent of the total licensed child care centers and over 80 percent of the total family child care home providers in the state are also contracted to provide school readiness services to eligible children. Additionally, there are a total of 1,324 license-exempt providers, to include religious-exempt, public and non-public schools, and informal providers, which are contracted as providers of the School Readiness Program.

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

  Overall Target Completion Date (no later than September 30, 2016)
Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

4.5 Payment Practices and Timeliness of Payments

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

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

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 4.5.2 through 4.5.3 below.
Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

The Lead Agency
☐ Pays prospectively prior to the delivery of services.
   Describe:

☐ Pays within no more than 21 days of billing for services.
   Describe:

☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance.
   Describe including the State/Territory's definition of occasional absences

☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe
   Specify percent and describe

☑ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month.
   Specify the number of absence days allowed and paid for and describe
   The state currently supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences and providing full payment if a child is absent for up to a certain number of days in a month. In accordance with Rule 6M-4.500(4), FAC, reimbursement shall be authorized for no more than three absences per calendar month per child except in the event of extraordinary circumstances. In these cases the coalition or its designee shall provide written approval for payment based on written documentation provided by the parent justifying the excessive absence for up to an additional seven days.

☑ Pays on a full-time or part-time basis (rather than smaller increments such as hourly)
   Describe:
   Reimbursement for child care is full-time or part-time.

☐ Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.)
   Describe:
☑ Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment

Describe:

The state provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment through the ELCs. ELCs provide prompt notification to providers and parents of any eligibility status changes.

☑ Has a timely appeal and resolution process for payment inaccuracies and disputes.

Describe:

The state also has a timely appeal and resolution process for payment inaccuracies and disputes, as provided in the Statewide School Readiness Provider Contract (contract). If a provider disputes any action taken by the coalition pursuant to the terms of the contract, the provider may request a review hearing. The coalition and provider will decide upon a date and time for the review hearing within 45 days of the request for the review hearing. At that point a Review Hearing Committee will assess the claims of the provider. The coalition will be provided a reasonable opportunity to submit rebuttal evidence. Following the completion of the presentations the Review Hearing Committee will vote on each of the provider's claims.

☐ Other.

Describe:

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

Paying prospectively for services rendered is not a standard practice with state contracts. Generally, deliverables must be provided and accepted prior to payment. The current reimbursement procedures and state provider contract do not support payment within 21 days and the current practice is within the state prompt payment act requirements. Services provided are for child care only as specified in state Florida statute. Therefore payment for additional fees is not a current practice.

There are three items listed for delinking payments from absences, the state does one of the three, doing all three would be implementation of multiple policies on the same process.
4.5.3 Check and describe the strategies the State/Territory will use to ensure the timeliness of payments.

☐ Policy on length of time for making payments.
   Describe length of time:

☐ Track and monitor the payment process
   Describe:

☐ Use of electronic tools (e.g., automated billing, direct deposit, etc.)
   Describe:
   Currently the state utilizes electronic tools as a specific strategy to ensure timeliness of payments. The contract requires providers to submit information necessary to facilitate direct deposit for payments; however, the provider may choose to opt out of this requirement if they prefer to receive written checks for payment.

☐ Other.
   Describe:

4.6 Supply Building Strategies to Meet the Needs of Certain Populations

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

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

☐ Yes.
   Describe data sources
   The OEL contracts with the University of Florida Partnership to update the Early Care and Education Needs Assessment Web Portal. Using data from national and state
sources, the partnership updates over 44 childhood indicators allowing for customization of data by geographic areas such as zip code, county, coalition area and statewide. This web portal was last updated in July 2015. The initial Needs Assessment Report (2013), which estimated need for child care capacity by county and coalition area was published and is available at [http://voicesforflorida.org/wp-content/uploads/NeedsAssessment_FINAL.pdf](http://voicesforflorida.org/wp-content/uploads/NeedsAssessment_FINAL.pdf). The report indicated that capacity far exceeds estimated need in the majority of counties throughout Florida. The next reporting period to estimate the need for child care capacity is planned for 2016 - 2017.

☐ No.

If no, how does the State/Territory determine most critical supply needs?

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

a) Infants and toddlers (check all that apply)
- ☐ Grants and contracts (as discussed in 4.1.3)
- ✔ Family child care networks
- ☐ Start-up funding
- ☑ Technical assistance support
- ☐ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other.

Describe

b) Children with disabilities (check all that apply)
- ☐ Grants and contracts (as discussed in 4.1.3)
- ✔ Family child care networks
- ☐ Start-up funding
- ☑ Technical assistance support
- ☐ Recruitment of providers
- ☑ Tiered payment rates (as discussed in 4.4.1)
c) Children who receive care during non-traditional hours (check all that apply)

☐ Grants and contracts (as discussed in 4.1.3)
☐ Family child care networks
☐ Start-up funding
☐ Technical assistance support
☐ Recruitment of providers
☐ Tiered payment rates (as discussed in 4.4.1)
☐ Other.

Describe


d) Homeless children (check all that apply)

☐ Grants and contracts (as discussed in 4.1.3)
☐ Family child care networks
☐ Start-up funding
☐ Technical assistance support
☐ Recruitment of providers
☐ Tiered payment rates (as discussed in 4.4.1)
☐ Other.

Describe

With eligibility in Head Start/Early Head Start and School Readiness Priority Group 2, families experiencing homelessness have access to all providers and services incorporated in these programs.

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

Describe the status of State/Territory's process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.

☑ Fully implemented and meeting all Federal requirements outlined above.

Describe

OEL works closely with Head Start, Early Head Start, Migrant and Seasonal Head Start and Early Head Start - Child Care Partnerships grantees to coordinate services and to assure families in targeted low-income areas have more access to quality child care settings. For example, families are referred by CCR&R to other programs and OEL is working to have applications for multiple programs linked on one website. ELPFPP providers located in high poverty tract areas are given a higher rate for participation in order to help increase access to high quality providers in those areas of the state.

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

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

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings

The CCDBG Act of 2014 makes child care safer by defining minimum health and safety requirements for child care providers. This includes both the standards that must be established and the pre-service/orientation and ongoing minimum training required. States and Territories must also explain why exemptions to any of the licensing standards do not endanger the health and safety of CCDF children in license-exempt care. States and Territories are required to have standards for CCDF providers regarding group size limits and appropriate child-to-provider ratios based on the age of children in child care.

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

5.1 Licensing Requirements and Standards

Each State is required to certify it has in effect licensing requirements applicable to all child care services provided within the State (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(I)(i))
5.1.1 The State/Territory certifies that it has licensing requirements applicable to child care services provided within the State.

(658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care.

List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care.

**CENTER-BASED CHILD CARE**

**Child Care Facilities** (s. 402.302(2), F.S.) - any child care center or child care arrangement which provides care for more than five (5) children unrelated to the operator and which receives a payment, fee, or grant for any of the children receiving care, wherever operated, and whether or not operated for profit.

**Religious Exempt Child Care Facility** (s. 402.316, F.S.) - a child care facility which is an integral part of church or parochial schools conducting regularly scheduled classes, courses of study, or educational programs accredited by, or by a member of, an organization which publishes and requires compliance with its standards for health, safety, and sanitation.

**FAMILY CHILD CARE**

**Family Day Care Homes** (s. 402.302(8), F.S.) - an occupied residence in which child care is regularly provided for children from at least two unrelated families and which receives a payment, fee, or grant for any of the children receiving care, whether or not operated for profit.

*Note: Family child care homes can be licensed or registered. Family child care homes shall be licensed if existing county licensing ordinance or if the board of county commissioners passes a resolution that the family day care homes must be licensed. Other family day care homes may choose to be licensed. Currently, there are 15 counties in Florida that require family child care homes to be licensed.*

**Large Family Child Care Homes** (s. 402.302(11), F.S.) - an occupied residence in which child care is regularly provided for children from at least two unrelated families, which receives a payment, fee, or grant for any of the children receiving care, whether or not operated for profit, and which has at least two full-time child care personnel on the premises during the hours of operation. In order to become a [licensed] large family child care home, a
provider must first have operated as a licensed family day care home for two years.  
*Note: The state's definition of Large Family Child Care Homes is in line with the CCDF definition of Large Group Child Care Home.*

**PUBLIC AND NONPUBLIC SCHOOLS**

(s. 402.3025, F.S.) For the purposes of ss. 402.301-402.319, F.S., the following shall apply:  

**PUBLIC SCHOOLS** - the following programs for children shall be deemed to be childcare and shall be subject to the provisions of ss. 402.301-402.319, F.S.:

1. Programs for children who are under 5 years of age when the programs are not operated and staffed directly by the schools.
2. Programs for children under 3 years of age who are not eligible for participation in the programs under existing or successor provisions of Pub. L. No. 94-142 or Pub. L. No. 99-457.

**NONPUBLIC SCHOOLS** - (a) Programs for children under 3 years of age shall be deemed to be child care and subject to the provisions of ss. 402.301-402.319, F.S.. (c) ….A nonpublic school may designate certain programs as child care, in which case these programs shall be subject to the provisions of ss. 402.301-402.319, F.S.

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

☑ Yes.

Describe which types of providers that can receive CCDF are exempt from licensing and how such exemptions do not endanger children who receive CCDF services from license-exempt providers

School-based centers meeting certain criteria, centers operated by religious organizations, and summer camps are exempt from license requirements. In addition, informal and registered family day care home providers are not subject to licensure. Non-public schools, informal providers and other license-exempt providers are required to self-certify compliance with health and safety standards by annually completing a health and safety checklist and posting on their premises. Additionally, religious exempt child care facilities exempt from licensure must meet personnel screening requirements pursuant to ss. 402.305 and 402.3055, F.S., must be accredited by or a member of an organization which publishes and requires compliance with standards for health, safety and sanitation, and must also meet minimum requirements of any applicable local governing body as to health, sanitation and safety.
Pursuant to s. 402.3025(2), F.S., nonpublic school programs for children between the ages of 3 and 5 who are not licensed must substantially comply with minimum child care standards promulgated by rule.

**Registered Family Day Care Homes (s. 402.313, F.S.)** - If not subject to licensure, family day care homes must register annually with DCF. Family day care home means an occupied residence in which child care is regularly provided for children from at least two unrelated families and which receives a payment, fee, or grant for any of the children receiving care, whether or not operated for profit.

**Summer Camp (s. 409.175(2)(l)(m) and (3)(d), F.S.)** - Recreational, educational, and other enrichment programs operated during summer vacations for children who are 5 years of age on or before September 1 and older.

**Summer 24-hour Camp (s. 409.175 (3)(d), F.S)** - Recreational, educational, and other enrichment programs operated on a 24-hour basis during summer vacation for children who are 5 years of age on or before September 1 and older, that are not exclusively educational.

**Informal Providers** - Persons who provide care for eligible children from only one family who are, by marriage, blood relationship, or court decree, the grandchild, great grandchild, sibling (if such provider lives in a separate residence), niece, or nephew of such provider, and complies with any applicable requirements that govern child care provided by the relative involved.

**Religious Exempt Child Care Facility (s. 402.316, F.S.)** - A child care facility, which is an integral part of church or parochial schools conducting regularly scheduled classes, courses of study, or educational programs accredited by, or by a member of, an organization which publishes and requires compliance with its standards for health, safety, and sanitation.

*(Ref: ss. 402.316, 402.302, and 402.3025, F.S.)*

☐ No.

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

☐ Fully implemented and meeting all Federal requirements outlined above. Describe using 5.1.4 and 5.1.5 below.
Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 03/31/2017

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Child ratios are in place for all regulated child care providers.

Unmet requirement - Identify the requirement(s) to be implemented child care standards for providers receiving CCDF that address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative changes and rule promulgation are needed for the creation of standards for license-exempt providers, including standards for group size and staff-to-child ratios, and group size standards for licensed providers. Estimated timeline below:

March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected completion.
September 30, 2016 - Rule approval by Florida Department of State expected
Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.

Projected start date for each activity: 03/11/2016  
Projected end date for each activity: 03/31/2017  
Agency - Who is responsible for complete implementation of this activity: OEL.  
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DCF.

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

a) Licensed Center-Based Care

1. Infant  
   - State/Territory age definition:

   Children from birth to 1 year of age.  
   - Ratio:

   1:4  
   - Group Size:

   None.

2. Toddler  
   - State/Territory age definition:

   Children from 1 year to 2 years of age.  
   - Ratio:

   1:6
3. Preschool:
   - State/Territory age definition:
     3 years or older, under 4 years.
   - Ratio:
     1:15
   - Group Size:
     None.

4. School-Age
   - State/Territory age definition:
     5 years or older.
   - Ratio:
     1:25
   - Group Size:
     None.

5. If any of the responses above are different for exempt child care centers, describe:
   License-exempt providers are not required to meet the state's staff-to-child ratio standards for regulated providers. However, religious-exempt providers are required to be accredited by, or members of, an organization that publishes and requires compliance with its standards for health, safety and sanitation. These requirements typically include minimum requirements for staff-to-child ratios.

6. Describe, if applicable, ratios and group sizes for centers with mixed age groups.
   **Ratios, Mixed Age Groups**
   When children 2 years of age and older are in care, the staff-to-children ratio is based on the age group with the largest number of children within the group. (s. 402.305(4)(a)7.)
F.S.)
Where children under one year of age are included, one staff member shall be responsible for no more than four children of any age group, at all times. Where children one year of age but under two years of age are included, one staff member shall be responsible for no more than six children of any age group, at all times.
(Rule 65C-22.001(4)(b), FAC)

b) Licensed Group Child Care Homes:

1. Infant
   - State/Territory age definition:

   Children from birth to 1 year of age.
   - Ratio:

   1:4
   - Group Size:

   A maximum of eight children from birth to 24 months of age.

2. Toddler
   - State/Territory age definition:

   Children from 1 year to 2 years of age.
   - Ratio:

   1:4
   - Group Size:

   A maximum of eight children birth to 24 months of age.

3. Preschool:
   - State/Territory age definition:

   3 years or older, under 4 years.
   - Ratio:
1:6
- Group Size:

A maximum of 12 children, with no more than 4 children under 24 months of age.

4. School-Age
   - State/Territory age definition:

   5 years or older.
   - Ratio:

   1:6
   - Group Size:

   A maximum of 12 children, with no more than 4 children under 24 months of age.

5. Describe the maximum number of children that are allowed in the home at any one
time, if the State/Territory requires related children to be included in the child-to-provider
ratio or group size, or the limits on infants and toddlers or additional school-age children
that are allowed for part of the day

The maximum number of children allowed in the home at any one time is 12, and
household children under 13 years of age, when on the premises of the large family child
care home, shall be included in the overall capacity of the licensed home.

6. If any of the responses above are different for exempt group child care homes,
describe

Not applicable. All large family child care homes in the state are required to be licensed.

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

c) Licensed Family Child Care:

1. Describe the ratios, group size, the threshold for when licensing is required, maximum
number of children that are allowed in the home at any one time, if the State/Territory
requires related children to be included in the Child-to-Provider ratio or group size, or the
limits on infants and toddlers or additional school-age children that are allowed for part of
the day.

Describe the ratios:
A maximum of four children birth through 12 months of age.
A maximum of three children birth to 12 months of age and other children for a maximum total of six children.
A maximum of six preschool children if they are all older than 12 months of age.
A maximum of 10 children if no more than five are preschool age and of those five no more than two are under 12 months.

Describe the group size:
None.

Describe the threshold for when licensing is required:
Registration or licensure is required when caring for children from two unrelated families in the operator’s occupied residence.

Describe the maximum number of children that are allowed in the home at any one time:
Family child care homes are allowed a maximum of 10 children, depending on the age of the children in care.

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:
Yes, household children under 13 years of age, when on premises of the family child care home, shall be included in the overall capacity of the licensed home.

Describe the limits on infants and toddlers or additional school-age children that are allowed for part of the day:
Yes, if caring for infants only, the maximum number of children allowed is four. If caring for school-aged children only, the maximum number of children in care can be 10.

2. If any of the responses above are different for exempt family child care home providers, describe
Not applicable.

d) Any other eligible CCDF provider categories:
Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.
Describe the ratios:

**Registered Family Day Care Providers:**
A maximum of four children birth through 12 months of age.
A maximum of three children birth to 12 months of age and other children for a maximum total of six children.
A maximum of six preschool children if they are all older than 12 months of age.
A maximum of 10 children if no more than five are preschool age and of those five no more than two are under 12 months.

Describe group size:

**Registered Family Day Care Providers:** None.

Describe the threshold for when licensing is required:

**Registered Family Day Care Providers:** Registration or licensure is required when caring for children from two unrelated families in the operator's occupied residence.

Describe maximum number of children that are allowed in the home at any one time:

**Registered Family Day Care Providers:** Registered family day care homes are allowed a maximum of 10 children, depending on the age of the children in care.

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:

**Registered Family Day Care Providers:** Yes, household children under 13 years of age, when on premises of the family child care home, shall be included in the overall capacity of the licensed home.

Describe the limits on infants and toddlers or additional school-age children that are allowed for part of the day:

**Registered Family Day Care Providers:** Yes, if caring for infants only, the maximum number of children allowed is four. If caring for school-aged children only, the maximum number of children in care can be 10.

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

   a) Licensed Center-Based Care:
1. Infant lead teacher

**Minimum Age:** Minimum child care personnel requirements established in s. 402.305(2)(c), F.S., prohibit a person under the age of 21 from being the operator of a child care facility and a person under the age of 16 from being employed at such facility unless such person is under direct supervision and is not counted for the purposes of computing the personnel-to-child ratio.

**Minimum Education Level:** No minimum education requirements for child care personnel.

**Minimum Training:** Pursuant to Chapter 65C-22.003(2), FAC: All child care personnel in licensed centers must successfully complete DCF’s 40-hour Introductory Child Care Training, which is divided into two parts. Part I is comprised of 30 hours of training and covers child care facility rules and regulations, health, safety and nutrition, identifying and reporting child abuse and neglect, child growth and development and behavioral observation and screening. Part II is comprised of 10 hours of training and consists of a selection of specialized training courses. All licensed center child care personnel must also complete a single course of training in early literacy and language development of children ages birth through 5 years of age that is a minimum of five-clock-hours.

and assistant teacher qualifications:

**Minimum Age:** Minimum child care personnel requirements established in s. 402.305(2)(c), F.S., prohibit a person under the age of 21 from being the operator of a child care facility and a person under the age of 16 from being employed at such facility unless such person is under direct supervision and is not counted for the purposes of computing the personnel-to-child ratio.

**Minimum Education Level:** No minimum education requirements for child care personnel.

**Minimum Training:** Pursuant to Chapter 65C-22.003(2), FAC: All child care personnel in licensed centers must successfully complete DCF’s 40-hour Introductory Child Care Training, which is divided into two parts. Part I is comprised of 30 hours of training and covers child care facility rules and regulations, health, safety and nutrition, identifying and reporting child abuse and neglect, child growth and development and behavioral observation and screening. Part II is comprised of 10 hours of training and consists of a selection of specialized training courses. All licensed center child care personnel must also complete a single course of training in early literacy and language development of children ages birth through 5 years of age that is a minimum of five-clock-hours.
2. Toddler lead teacher

**Minimum Age:** Minimum child care personnel requirements established in s. 402.305(2)(c), F.S., prohibit a person under the age of 21 from being the operator of a child care facility and a person under the age of 16 from being employed at such facility unless such person is under direct supervision and is not counted for the purposes of computing the personnel-to-child ratio.

**Minimum Education Level:** No minimum education requirements for child care personnel.

**Minimum Training:** Pursuant to Chapter 65C-22.003(2), FAC: All child care personnel in licensed centers must successfully complete DCF’s 40-hour Introductory Child Care Training, which is divided into two parts. Part I is comprised of 30 hours of training and covers child care facility rules and regulations, health, safety and nutrition, identifying and reporting child abuse and neglect, child growth and development and behavioral observation and screening. Part II is comprised of 10 hours of training and consists of a selection of specialized training courses. All licensed center child care personnel must also complete a single course of training in early literacy and language development of children ages birth through 5 years of age that is a minimum of five-clock-hours.
3. Preschool lead teacher

**Minimum Age:** Minimum child care personnel requirements established in s. 402.305(2)(c), F.S., prohibit a person under the age of 21 from being the operator of a child care facility and a person under the age of 16 from being employed at such facility unless such person is under direct supervision and is not counted for the purposes of computing the personnel-to-child ratio.

**Minimum Education Level:** No minimum education requirements for child care personnel.

**Minimum Training:** Pursuant to Chapter 65C-22.003(2), FAC: All child care personnel in licensed centers must successfully complete DCF’s 40-hour Introductory Child Care Training, which is divided into two parts. Part I is comprised of 30 hours of training and covers child care facility rules and regulations, health, safety and nutrition, identifying and reporting child abuse and neglect, child growth and development and behavioral observation and screening. Part II is comprised of 10 hours of training and consists of a selection of specialized training courses. All licensed center child care personnel must also complete a single course of training in early literacy and language development of children ages birth through 5 years of age that is a minimum of five-clock-hours.

and assistant teacher qualifications:

**Minimum Age:** Minimum child care personnel requirements established in s. 402.305(2)(c), F.S., prohibit a person under the age of 21 from being the operator of a child care facility and a person under the age of 16 from being employed at such facility unless such person is under direct supervision and is not counted for the purposes of computing the personnel-to-child ratio.

**Minimum Education Level:** No minimum education requirements for child care personnel.

**Minimum Training:** Pursuant to Chapter 65C-22.003(2), FAC: All child care personnel in licensed centers must successfully complete DCF’s 40-hour Introductory Child Care Training, which is divided into two parts. Part I is comprised of 30 hours of training and covers child care facility rules and regulations, health, safety and nutrition, identifying and reporting child abuse and neglect, child growth and development and behavioral observation and screening. Part II is comprised of 10 hours of training and consists of a selection of specialized training courses. All licensed center child care personnel must also complete a single course of training in early literacy and language development of children ages birth through 5 years of age that is a minimum of five-clock-hours.
4. School-Age lead teacher

Minimum Age: Minimum child care personnel requirements established in s. 402.305(2)(c), F.S., prohibit a person under the age of 21 from being the operator of a child care facility and a person under the age of 16 from being employed at such facility unless such person is under direct supervision and is not counted for the purposes of computing the personnel-to-child ratio.

Minimum Education Level: No minimum education requirements for child care personnel.

Minimum Training: Pursuant to Chapter 65C-22.003(2), FAC: All child care personnel in licensed centers must successfully complete DCF's 40-hour Introductory Child Care Training, which is divided into two parts. Part I is comprised of 30 hours of training and covers child care facility rules and regulations, health, safety and nutrition, identifying and reporting child abuse and neglect, child growth and development and behavioral observation and screening. Part II is comprised of 10 hours of training and consists of a selection of specialized training courses. All licensed center child care personnel must also complete a single course of training in early literacy and language development of children ages birth through 5 years of age that is a minimum of five-clock-hours.

and assistant teacher qualifications:

Minimum Age: Minimum child care personnel requirements established in s. 402.305(2)(c), F.S., prohibit a person under the age of 21 from being the operator of a child care facility and a person under the age of 16 from being employed at such facility unless such person is under direct supervision and is not counted for the purposes of computing the personnel-to-child ratio.

Minimum Education Level: No minimum education requirements for child care personnel.

Minimum Training: Pursuant to Chapter 65C-22.003(2), FAC: All child care personnel in licensed centers must successfully complete DCF’s 40-hour Introductory Child Care Training, which is divided into two parts. Part I is comprised of 30 hours of training and covers child care facility rules and regulations, health, safety and nutrition, identifying and reporting child abuse and neglect, child growth and development and behavioral observation and screening. Part II is comprised of 10 hours of training and consists of a selection of specialized training courses. All licensed center child care personnel must also complete a single course of training in early literacy and language development of children ages birth through 5 years of age that is a minimum of five-clock-hours.
5. Director qualifications:

Pursuant to s. 402.305(2), F.S., every licensed child care facility must have a credentialed director, staff credential, 30-clock hour introductory course in child care, which covers state and local rules and regulations governing child care, health, safety and nutrition, identifying and reporting child abuse and neglect; child development; developmental behaviors; early literacy and language development of children from birth to 5 years of age; and developmental disabilities.

b) Licensed Group Child Care Homes:

1. Infant lead teacher

**Minimum age requirements:** Rule 65C-20.012(2), FAC, specifies that the operator of a large family child care home must be at least 21 years of age. The additional full-time employee must be at least 18 years of age, and the substitute must be at least 18 years of age.

**Minimum Education Requirements:** None

**Minimum Training Requirements:** A large family child care home must first have operated as a licensed family day care home for 2 years, with an operator who has had a child development associate credential or its equivalent for one year. Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF’s 30-clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five-clock-hours of training in early literacy and language development of children ages birth through 5 years. In-service training requirements include a minimum of 10-clock-hours of annual in-service training concentrating on children ages birth through 12 and in one of 22 designated training topic areas. s. 402.313, F.S. & 65C-20.009(3), FAC. Additionally, within six months of licensure the operator of a large family child care home must complete 10-clock-hours of specialized training.

and assistant qualifications:

**Minimum age requirements:** The additional full-time employee must be at least 18 years of age, and the substitute must be at least 18 years of age.

**Minimum Education Requirements:** None

**Minimum Training Requirements:** Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF’s 30-
clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five-clock-hours of training in early literacy and language development of children ages birth through 5 years. In-service training requirements include a minimum of 10-clock-hours of annual in-service training concentrating on children ages birth through 12 and in one of 22 designated training topic areas. s. 402.313, F.S. & 65C-20.009(3), FAC.

2. Toddler lead teacher

**Minimum age requirements:** Rule 65C-20.012(2), FAC, specifies that the operator of a large family child care home must be at least 21 years of age. The additional full-time employee must be at least 18 years of age, and the substitute must be at least 18 years of age.

**Minimum Education Requirements:** None

**Minimum Training Requirements:** A large family child care home must first have operated as a licensed family day care home for 2 years, with an operator who has had a child development associate credential or its equivalent for one year. Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF’s 30-clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five-clock-hours of training in early literacy and language development of children ages birth through 5 years. In-service training requirements include a minimum of 10-clock-hours of annual in-service training concentrating on children ages birth through 12 and in one of 22 designated training topic areas. s. 402.313, F.S. & 65C-20.009(3), FAC. Additionally, within six months of licensure the operator of a large family child care home must complete 10-clock-hours of specialized training.

**and assistant qualifications:**

**Minimum age requirements:** The additional full-time employee must be at least 18 years of age, and the substitute must be at least 18 years of age.

**Minimum Education Requirements:** None

**Minimum Training Requirements:** Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF’s 30-clock-hour Family Child Care Home training, covering state and local rules and
regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five-clock-hours of training in early literacy and language development of children ages birth through 5 years. In-service training requirements include a minimum of 10-clock-hours of annual in-service training concentrating on children ages birth through 12 and in one of 22 designated training topic areas. s. 402.313, F.S. & 65C-20.009(3), FAC.

3. Preschool lead teacher

**Minimum age requirements:** Rule 65C-20.012(2), FAC, specifies that the operator of a large family child care home must be at least 21 years of age. The additional full-time employee must be at least 18 years of age, and the substitute must be at least 18 years of age.

**Minimum Education Requirements:** None

**Minimum Training Requirements:** A large family child care home must first have operated as a licensed family day care home for 2 years, with an operator who has had a child development associate credential or its equivalent for one year. Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF’s 30-clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five-clock-hours of training in early literacy and language development of children ages birth through 5 years. In-service training requirements include a minimum of 10-clock-hours of annual in-service training concentrating on children ages birth through 12 and in one of 22 designated training topic areas. s. 402.313, F.S. & 65C-20.009(3), FAC. Additionally, within six months of licensure the operator of a large family child care home must complete 10-clock hours of specialized training.

and assistant qualifications:

**Minimum age requirements:** The additional full-time employee must be at least 18 years of age, and the substitute must be at least 18 years of age.

**Minimum Education Requirements:** None

**Minimum Training Requirements:** Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF’s 30-clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting
child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five-clock-hours of training in early literacy and language development of children ages birth through 5 years. In-service training requirements include a minimum of 10-clock-hours of annual in-service training concentrating on children ages birth through 12 and in one of 22 designated training topic areas. s. 402.313, F.S. & 65C-20.009(3), FAC.

4. School-Age lead teacher

**Minimum age requirements:** Rule 65C-20.012(2), FAC, specifies that the operator of a large family child care home must be at least 21 years of age. The additional full-time employee must be at least 18 years of age, and the substitute must be at least 18 years of age.

**Minimum Education Requirements:** None

**Minimum Training Requirements:** A large family child care home must first have operated as a licensed family day care home for 2 years, with an operator who has had a child development associate credential or its equivalent for one year. Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF’s 30-clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five clock hours of training in early literacy and language development of children ages birth through 5 years. In-service training requirements include a minimum of 10-clock-hours of annual in-service training concentrating on children ages birth through 12 and in one of 22 designated training topic areas. s. 402.313, F.S. & 65C-20.009(3), FAC. Additionally, within six months of licensure the operator of a large family child care home must complete 10-clock hours of specialized training.

and assistant qualifications:

**Minimum age requirements:**
The additional full-time employee must be at least 18 years of age, and the substitute must be at least 18 years of age.

**Minimum Education Requirements:** None

**Minimum Training Requirements:** Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF’s 30-clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting
child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five clock-hours of training in early literacy and language development of children ages birth through 5 years. In-service training requirements include a minimum of 10-clock-hours of annual in-service training concentrating on children ages birth through 12 and in one of 22 designated training topic areas. s. 402.313, F.S. & 65C-20.009(3), FAC.

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

c) Licensed Family Child Care home provider qualifications

**Minimum age requirements:** Rule 65C-20.009(2)(a) and (b), FAC, specifies that the operator of a licensed family day care home must be at least 18 years of age and a resident of the family home and that a substitute in a family day care home must also be at least 18 years of age.

No minimum age standards for registered family day care homes.

**Minimum Education Requirements:** None

**Minimum Training Requirements:** Prior to licensure and prior to caring for children, the operator of a family child care home and all substitutes who work 40 hours or more per month on average must show evidence of completion of DCF's 30-clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five clock hours of training in early literacy and language development of children ages birth through 5 years. In-service training requirements include a minimum of 10-clock-hours of annual in-service training concentrating on children ages birth through 12 and in one of 22 designated training topic areas. s. 402.313, F.S. & 65C-20.009(3), FAC.

d) Other eligible providers qualifications:

**Registered Family Day Care Providers -**

Minimum Age Requirements: The operator of a family day care home must be at least 18 years of age and a resident of the family home. A substitute in a family day care home must also be at least 18 years of age.

Minimum Education Requirements: None.

Minimum Training Requirements: Prior to registration, all registered family day care home operators must successfully complete DCF's 30-clock-hour Family Child Care Home Training covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development;
developmental behaviors. In addition, operators must complete a minimum of five-clock-hours of training in early literacy and language development of children ages birth through 5 years. In-service training requirements include a minimum of 10-clock-hours of annual in-service training concentrating on children ages birth through 12 and in one of 22 designated training topic areas. Substitutes in registered family day care homes are not required to complete the 30-clock-hour training, not are they required to complete literacy training.

5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics.

(658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

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

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

☑ Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas as of March 1, 2016.

Provide a citation and a link if available

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

Overall Target Completion Date (no later than September 30, 2016) 03/31/2017

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Currently, licensed registered providers are required to adhere to minimum health and safety standards established by DCF found in Chapters 65C-22 and 65C-20, FAC. These standards cover all topic areas required by CCDF. However, these standards do not currently extend to license-exempt providers. Pending legislative approval, OEL will have the authority to establish minimum health and safety standards that will apply to all providers receiving CCDF funds.

Unmet requirement - Identify the requirement(s) to be implemented Prevention and control of infectious diseases (including immunization)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative change and rule promulgation required to establish health and safety standards covering each of therequired health and safety topic areas for license-
exempt providers. Estimated timeline below:
March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected completion.
September 30, 2016 - Rule approval by Florida Department of State expected completion.
Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 03/31/2017
Agency - Who is responsible for complete implementation of this activity OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity DCF.

Unmet requirement - Identify the requirement(s) to be implemented First aid and cardiopulmonary resuscitation (CPR) certification

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Legislative change and rule promulgation required to establish health and safety standards covering each of the required health and safety topic areas for license-exempt providers. Estimated timeline below:
March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected completion.
September 30, 2016 - Rule approval by Florida Department of State expected completion.
Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 03/31/2017
Agency - Who is responsible for complete implementation of this activity OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity DCF.

Unmet requirement - Identify the requirement(s) to be implemented Prevention of sudden infant death syndrome and use of safe sleeping practices

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Legislative change and rule promulgation required to establish health and safety standards covering each of the required health and safety topic areas for license-exempt providers. Estimated timeline below:
March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected completion.
September 30, 2016 - Rule approval by Florida Department of State expected completion.
Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.
Unmet requirement - Identify the requirement(s) to be implemented. **Administration of medication, consistent with standards for parental consent**

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative change and rule promulgation required to establish health and safety standards covering each of the required health and safety topic areas for license-exempt providers. Estimated timeline below:

- **March 11, 2016** - Legislative session ends.
- **May 6, 2016** - Internal rule development expected completion.
- **June 29, 2016** - Last day to hold rule workshop.
- **July 1, 2016** - New legislation becomes effective.
- **August 10, 2016** - Rule approval by Joint Administrative Procedures Committee expected completion.
- **August 31, 2016** - Rule reviewed by Florida State Board of Education expected completion.
- **September 30, 2016** - Rule approval by Florida Department of State expected completion.

Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.
response to emergencies due to food and allergic reactions

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative change and rule promulgation required to establish health and safety standards covering each of the required health and safety topic areas for license-exempt providers. Estimated timeline below:
March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected completion.
September 30, 2016 - Rule approval by Florida Department of State expected completion.
Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 03/31/2017
Agency - Who is responsible for complete implementation of this activity: OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DCF.

Unmet requirement - Identify the requirement(s) to be implemented: Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative change and rule promulgation required to establish health and safety standards.
standards covering each of therequired health and safety topic areas for license-exempt providers. Estimated timeline below:
March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected completion.
September 30, 2016 - Rule approval by Florida Department of State expected completion.
Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 03/31/2017
Agency - Who is responsible for complete implementation of this activity OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity DCF.

Unmet requirement - Identify the requirement(s) to be implemented Prevention of shaken baby syndrome and abusive head trauma

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Legislative change and rule promulgation required to establish health and safety standards covering each of therequired health and safety topic areas for license-exempt providers. Estimated timeline below:
March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected completion.
September 30, 2016 - Rule approval by Florida Department of State expected completion.
Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 03/31/2017
Agency - Who is responsible for complete implementation of this activity: OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DCF.

Unmet requirement - Identify the requirement(s) to be implemented:
Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Legislative change and rule promulgation required to establish health and safety standards covering each of the required health and safety topic areas for license-exempt providers. Estimated timeline below:
March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected completion.
September 30, 2016 - Rule approval by Florida Department of State expected completion.
Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.

Projected start date for each activity: 03/11/2016  
Projected end date for each activity: 03/31/2017  
Agency - Who is responsible for complete implementation of this activity  
OEL.  
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity  
DCF

Unmet requirement - Identify the requirement(s) to be implemented. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative change and rule promulgation required to establish health and safety standards covering each of the required health and safety topic areas for license-exempt providers. Estimated timeline below:

March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected completion.
September 30, 2016 - Rule approval by Florida Department of State expected completion.

Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.

Projected start date for each activity: 03/11/2016  
Projected end date for each activity: 03/31/2017  
Agency - Who is responsible for complete implementation of this activity  
OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DCF.

Unmet requirement - Identify the requirement(s) to be implemented Precautions in transporting children (if applicable)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative change and rule promulgation required to establish health and safety standards covering each of the required health and safety topic areas for license-exempt providers. Estimated timeline below:

March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected completion.
September 30, 2016 - Rule approval by Florida Department of State expected completion.

Training and Implementation of policy will run concurrently with rule approval steps above and through March of 2017.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 03/31/2017

Agency - Who is responsible for complete implementation of this activity OEL

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DCF

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

Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above as of March 1, 2016.

Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements

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

Overall Target Completion Date (no later than September 30, 2016) 03/31/2017

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Current mandated training (45 hours for child care and 35 hours for family day care and 10 hours of annual inservice training) for licensed and/or registered child care providers covers all topic areas with the exception of safe sleeping practices, emergency preparedness, transportation (if applicable), and first aid and cardiopulmonary resuscitation.

The state currently requires that personnel must begin mandated training to meet requirements within 90 days after employment and have one year from the date training began to complete requirements.

Current ongoing training requirements include one continuing education unit (CEU) of
approved in-service training or 10 hours of equivalent training, as well as 0.5 CEU or 5
clock hours of equivalent training in early literacy and language development.

Unmet requirement - Identify the requirement(s) to be implemented pre-service (prior
to initial service) or orientation (period from when service started) appropriate to the
provider setting that address each of the requirements relating to the required topic
areas

Tasks/Activities - What specific steps will you take to implement the unmet
requirement (e.g., legislative or rule changes, modify agreements with coordinating
agencies, etc.)
Legislative changes and rule revision are required to expand current training
requirements for licensed providers to include the missing health and safety topic
areas, and then these training requirements will be extended to all CCDF providers.
Additionally, the training timeframes for licensed providers will need to be amended
both legislatively and through rule revision to match the preservice training time
period established for all CCDF providers. Estimated timeline below:
March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee
expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected
completion.
September 30, 2016 - Rule approval by Florida Department of State expected
completion.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead
agency to complete implementation of this activity N/A

Unmet requirement - Identify the requirement(s) to be implemented ongoing training
requirements appropriate to the provider setting that address each of the requirements
relating to the required topic areas

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative changes and rule promulgation are needed to extend the current requirement for licensed providers of 10 hours of annual inservice training to all CCDF providers, including license exempt. Estimated timeline below:

March 11, 2016 - Legislative session ends.
May 6, 2016 - Internal rule development expected completion.
June 29, 2016 - Last day to hold rule workshop.
July 1, 2016 - New legislation becomes effective.
August 10, 2016 - Rule approval by Joint Administrative Procedures Committee expected completion.
August 31, 2016 - Rule reviewed by Florida State Board of Education expected completion.
September 30, 2016 - Rule approval by Florida Department of State expected completion.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity DCF.

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

- Nutrition (including age appropriate feeding).

  Describe:

  Section 402.305(8), F.S. - Minimum standards shall include requirements for the provision of meals or snacks of a quality and quantity to ensure that the nutritional needs of the child are met. (Rule 65C-22.005, FAC - Food and Nutrition)
Access to physical activity.
Describe:
Chapters 65C-22.001(7)(a)4., and 65C-20.0013(9), FAC, require licensed child care facilities and large family child care homes to have written and followed plan of scheduled daily activities that include active play, both indoors and outdoors.

Screen time.
Describe:
Chapter 65C-22.001(7)(a)1.,2.,3., FAC, limits electronic media to no more than one to two hours daily and cannot be used with children younger than 2 years of age.

Caring for children with special needs.
Describe:
Supervision requires that child care personnel are responsible for responding to and meeting the needs of each child in their care. Special provisions/training must be in place when transporting children with chronic medical conditions. (Rule 65C-22, FAC.)

Recognition and reporting of child abuse and neglect.
Describe:
Pursuant to s. 39.201, F.S., any person in the state of Florida is required to report knowledge or suspicions of child abuse and neglect. Currently all licensed providers annually complete an attestation acknowledging requirement.

Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety.
Describe:
Plan of Activities - Minimum standards shall ensure that each child care facility has and implements a written plan for the daily provision of varied activities and active and quiet play opportunities appropriate to the age of the child. The written plan must include a program, to be implemented periodically for children of an appropriate age, which will assist the children in preventing and avoiding physical and mental abuse. (s. 402.305(13), F.S.)

5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from these CCDF health and safety
requirements.

Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics?

☐ Yes, all relatives are exempt from all health and safety training requirements. If the State/Territory exempts all relatives from the CCDF health and safety training requirements, describe how the State ensures the health and safety of children in relative care.

☑ Yes, some relatives are exempt from health and safety training requirements. If the State/Territory exempts some relatives from the CCDF health and safety training requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.

Currently, relative providers are subject to certain health and safety requirements. The requirements are to provide basic health and safety of its premises and comply with requirements for age-appropriate immunizations of children enrolled in the School Readiness Program (s. 1002.88(1)(c), F.S.). Pending legislative approval, all providers who receive CCDF funds will be subject to minimum health and safety training requirements.

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

5.2 Monitoring and Enforcement Policies and Practices

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

☐ Yes.

The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities as of March 1, 2016. List the policy citation
No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 03/31/2017

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

In progress - The state utilizes inspections of licensed child care facilities and family child care homes to ensure compliance with health and safety requirements. Procedures are in place for licensing staff to address violations found during inspections, including procedures for plans of corrective action, verification of correction of violations, and providence of technical assistance regarding how to comply with regulations. Note: Only for licensed providers - the state does not currently have authority to perform inspections for license exempt providers; pending legislative change.

Unmet requirement - Identify the requirement(s) to be implemented policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Pending legislative changes and rule promulgation to grant OEL authority to establish and monitor health and safety standards for all CCDF providers, including license exempt child care facilities, which will include an annual inspection for health and safety requirements and fire standards. Estimated timeline below:

March 11, 2016 - Legislative session ends.
July 1, 2016 - New legislation becomes effective.
October 14, 2016 - Memorandum of Understanding (MOU) with DCF approved expected completion.
5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives). While the law does not specify strategies to meet these requirements, States and Territories could consider implementing a differential monitoring approach as long as the full complement of licensing and CCDF health and safety standards was representative and the frequency was at least annually.

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

Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State’s licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the
All personnel assigned responsibility for the inspection and licensing of child care facilities and family day care homes are classified as "Family Services Counselors" (Class Code: 5990) within the Florida Department of Management Services' job classification system. Minimum qualifications for this position category include a bachelor's degree from an accredited college or university. All Family Services Counselors are required to complete: - Introduction to Child Care Licensing, Desk Reference Guide (Part 1 and 2), Guide to the Inspection; - Systems Training. Along with online Department training that includes the following:

- Child Care Pre-Service Training
- Family Day Care Homes Licensing course
- Guidance and Discipline
- 4 hours - Child Abuse and Neglect
- 6 hours - Child Growth and Development
- 3 hours - Guide to Record Keeping
- 4 hours - Fire Safety & Emergency Preparedness
- 4 hours - Playground Safety
- 2 hours - Transportation Safety
- 5 hours - Supporting Children with Developmental Disabilities
- 4 hours - Serving Safe Food in Child Care
- FDA Food Inspector training

Along with instructor-led and online training, licensing staff must complete 14 additional supplemental activities, which are documented as completed by the supervisor within 12 months of hire.

DCF's current standard practice for hiring of inspectors is requiring a minimum educational level of a bachelor degree, in addition to completing preservice training for all newly-hired licensing counselors. However, a policy is in development that would make the above standard practice mandatory. Upon adoption, position descriptions will be revised to include the educational component.

Training requirements for licensing inspectors with the LLAs meet or exceed the above-listed DCF requirements.

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

Overall Target Completion Date (no later than November 19, 2016)
Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

☑ Yes.

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

**s. 402.311. F.S. - Inspection.**

"A licensed child care facility shall accord to the department or the local licensing agency, whichever is applicable, the privilege of inspection, including access to facilities and personnel and to those records required in s. 402.305, F.S., at reasonable times during regular business hours, to ensure compliance with the provisions of ss. 402.301-402.319, F.S. The right of entry and inspection shall also extend to any premises that the department..."
or local licensing agency has reason to believe are being operated or maintained as a child care facility without a license. No such entry or inspection of any premises shall be made without the permission of the person in charge thereof unless a warrant is first obtained from the circuit court authorizing same. Any application for a license or renewal made pursuant to this act or the advertisement to the public for the provision of child care as defined in s. 402.302, F.S., shall constitute permission for any entry or inspection of the premises for which the license is sought in order to facilitate verification of the information submitted on or in connection with the application. In the event a licensed facility refuses permission for entry or inspection to the department or local licensing agency, a warrant shall be obtained from the circuit court authorizing same prior to such entry or inspection. The department or local licensing agency may institute disciplinary proceedings pursuant to s. 402.310, F.S., for such refusal."

**DCF-Pamphlet 175-2. Frequency of Inspections.**

**Licensed Facilities** - Licensed day care facilities are required to be inspected three times during the licensure year (or approximately every four months). Licensing counselors will conduct a renewal (or initial) inspection and two routine inspections. All three inspections must be full on-site inspections unless the provider qualifies for an abbreviated inspection, is inactive, or the program operates for less than 12 months of the year (see below for more information on inactive providers).

**Licensed Family Day Care Homes and Large Family Child Care Homes** - Licensed family day care homes and large family child care homes are required to be inspected twice during the licensure year (or approximately every six months). The licensing counselor will conduct an initial or renewal inspection and one routine inspection. Both inspections must be full on-site inspections unless the provider is inactive or the program operates for less than 12 months of the year.

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

**Overall Target Completion Date (no later than November 19, 2016)**

**Overall Status** - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

c) Inspections for License-Exempt CCDF Providers (except those serving relatives) -
It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))

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

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

Overall Target Completion Date (no later than November 19, 2016) 03/31/2017

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Not yet started
Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Unmet requirement - Identify the requirement(s) to be implemented policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B))).

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative changes and rule promulgation are required to establish health and safety standards for license exempt providers, as well as set inspection and monitoring requirements for license exempt providers. Estimated timeline below:

- March 11, 2016 - Legislative session ends.
- July 1, 2016 - New legislation becomes effective.
- July 15, 2016 - Contract rule development expected completion.
- July 28, 2016 - Last day to hold rule workshop.
- August 31, 2016 - Contract Rule approval by Joint Administrative Procedures Committee expected completion.
- September 23, 2016 - Convert Rule approval by Florida State Board of Education expected completion.
- October 23, 2016 - Contract Rule approval by Florida Department of State expected completion.

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 03/31/2017

Agency - Who is responsible for complete implementation of this activity: OEL.

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DCF and local licensing agencies.

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

☑ Yes.

The State/Territory certifies that it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory ratio of licensing inspectors:

In 2011, the National Association for Regulatory Administration (NARA) issued a policy paper entitled "Strong Licensing: The Foundation for a Quality Early Care and Education System." It included the following workload recommendation, which has also been disseminated by the U.S. Department of Health and Human Services, Administration for Children and Families as an appropriate national standard.

Florida's Child Care Program Office utilizes the NARA recommended maximum workload standard of 60:1 for all types of providers. At current staffing levels, the caseload average is between 50 and 60.

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

Overall Target Completion Date (no later than November 19, 2016)

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

☑ Yes.

Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s):
Section 39.201, F.S.

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

Overall Target Completion Date (no later than November 19, 2016)

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from inspection requirements.

Note this exception only applies if the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?

☐ Yes, all relatives are exempt from all inspection requirements.

If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care.

☐ Yes, some relatives are exempt from inspection requirements.

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

☑ No, relatives are not exempt from inspection requirements.

5.3 Criminal Background Checks

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

The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care
staff members at least once every 5 years. A criminal background check must include a search of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification; and National Sex Offender Registry. Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.

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

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

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

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

Privacy considerations - Lead Agency may not publicly release the results of individual background checks.

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

☐ Fully implemented and meeting all Federal requirements outlined above.

List the policy citation within the Lead Agency's rules and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.

☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion.
Overall Target Completion Date (no later than September 30, 2017) 09/30/2017

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Currently, the state requires Level II background screening of all child care personnel. Level II background screening includes, at a minimum: fingerprinting for Federal Bureau of Investigation (FBI), Florida Department of Law Enforcement (FDLE) which includes a National Crime Information Center check. A state child abuse and neglect registry check and state sex offender database search is completed for all owners, operator and directors of licensed child care settings.

The DCF does not charge fees for background screening checks. The charges for the processing of the criminal history results are outlined in Florida Statutes. Live Scans vendors throughout Florida fingerprint, submit and collect payment for criminal history checks.

Implemented requirements - Fingerprinting for both state and national level criminal history check; check of central abuse hotline for owners, directors and operators; sexual offender search for address of home and facility for licensed providers.

Unmet requirement - Identify the requirement(s) to be implemented.  State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years,

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative change is needed to include the additional background screening check requirements for all child care personnel. These include national and state sex offender registries check (in Florida if arrested as sexual predator or offender the arrest will be present on the rap sheet as part of the FDLE criminal check); state child abuse and neglect registry (currently completed for all; criminal, sex offender
and child abuse and neglect checks for all states where staff member has resided over past five years).

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity DCF.

Unmet requirement - Identify the requirement(s) to be implemented. State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years;

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Legislative change is needed to include the additional background screening check requirements for all child care personnel. These include national and state sex offender registries check (in Florida if arrested as sexual predator or offender the arrest will be present on the rap sheet as part of the FDLE criminal check); state child abuse and neglect registry (currently completed for all; criminal, sex offender and child abuse and neglect checks for all states where staff member has resided over past five years).

Projected start date for each activity: 03/11/2016
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity OEL.
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity DCF.

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

Describe:
The Department issues determinations of eligibility based on criminal history results within 5-7 business days with complete disposition information for criminal charges. The performance of fingerprinting by a third party does not include the viewing of criminal history records. The 3rd party is only responsible for taking fingerprints and submitting electronically to the Florida Department of Law Enforcement (FDLE) for processing. The Florida Department of Law Enforcement transmits fingerprints to the FBI and receives results. The FBI and the state criminal history check conducted by FDLE is then shared with the Department of Children and Families for review.

After eligibility to request an exemption from disqualification is determined, the Department considers the following information when granting or denying an exemption request:
- The circumstances surrounding the disqualifying criminal incident for which an exemption is sought;
- The time period that has elapsed since the incident;
- The nature of the harm caused to the victim;
- The criminal history of the employee
- A history of the employee since the incident
- Employment history;
- Educational history;
- Any treatment or rehabilitation and
- Any other evidence of circumstances indicating that the individual is leading a positive lifestyle

Applicants may appeal a decision of disqualification from employment based upon proof of mistaken identity.

5.3.3 Describe how the State/Territory is assisting other States process background checks, including which agency/entity is responsible for working with other states

Describe:
It will vary depending on the element requested in the background screening process. For state criminal history checks, the Florida Department of Law Enforcement is the responsible entity. The point of contact will be shared with the state requesting information via the Department's background screening webpage. For the sexual predator/offender registry search, the state may use the link: http://offender.fdle.state.fl.us/offender/Search.jsp, which can be accessed on the Department's background screening web page or on the FDLE's webpage. For the child abuse and neglect registry checks, the state will be directed to the Department's background screening unit. The information on how other states can request
these checks will be located on the Department's background screening webpage.

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

☑ Yes.

Describe:
Exemptions from disqualification are outlined in s. 435.07, F.S. Individuals must meet eligibility requirements to qualify for an exemption review and if eligible must provide clear and convincing evidence to support a reasonable belief that they are of good moral character and pose no danger to the health and safety of children, persons with disabilities or vulnerable adults. The decision made by DCF may be contested through a hearing under the provisions of Ch. 120, F.S.

After eligibility to request an exemption from disqualification is determined, the Department considers the following information when granting or denying an exemption request:

- The circumstances surrounding the disqualifying criminal incident for which an exemption is sought;
- The time period that has elapsed since the incident;
- The nature of the harm caused to the victim;
- The criminal history of the employee
- A history of the employee since the incident
- Employment history;
- Educational history;
- Any treatment or rehabilitation and
- Any other evidence of circumstances indicating that the individual is leading a positive lifestyle

Applicants may appeal a decision of disqualification from employment based upon proof of mistaken identity.

☐ No.

5.3.5 Does the Lead Agency disqualify child care staff members based on their conviction for other crimes not specifically listed above?

☑ Yes.

Describe:
Section 435.04, Florida Statutes outlines a list of offenses that if a person has been
arrested for, plead nolo contendere, or plead guilty to regardless of adjudication that disqualifies the individual for eligibility to work in child care. The link to the Affidavit of Good Moral Character contains the listings of disqualifying offenses. http://ccrain.fl-dcf.org/documents/6/78.pdf#page=1

☐ No.

5.3.6 Does your State State/Territory exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from background checks?

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

☐ Yes, some relatives are exempt from the background check requirements. If the State/Territory exempts some relatives from background check requirements, describe which relatives are exempt from which requirements (some or all).

Describe.

☐ No, relatives are not exempt from background checks.

5.3.7 Describe how fees charged for completing the background checks do not exceed the actual cost of processing and administration, including how the State State/Territory ensures that 3rd party vendors or contractors do not charge fees that exceed the actual cost of processing and administration, if applicable.

Lead Agencies can report that no fees are charged if applicable:

Describe.

Use of the Statewide Clearinghouse provides numerous benefits to providers including reduced costs and more up to date information. It also allows for the result of criminal history results to be shared among specified state agencies, reducing duplicative screenings. No fees are charged by the lead agency or the Department for completing background screening. Fingerprinting and the submission of the fingerprints to FDLE and the FBI are submitted by a private live scan service provider. The Lead Agency nor the Department can regulate the administrative costs charged by the live scan provider. If an individual has been previously screened through the Clearinghouse database and requires a new screening due to a break in service or 5 year rescreening the individual does not have to be re-fingerprinted requiring paying of any administrative costs as the previous
submission is retained and the provider (employer) just has to resubmit for review of the federal criminal history. The Clearinghouse database provides retention of fingerprints and notification of new arrests in the state of Florida nightly.

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue:

Describe.

Policies and procedures for background checks, including who is required to be screened and information regarding the background screening clearinghouse, are provided on the licensing agency's website at http://www.myflfamilies.com/childcare (click on background screening link). The OEL maintains links on its webpage to the licensing agency's information.

5.3.9 Does the Lead Agency release aggregated data by crime?

☐ Yes.

List types of crime included in the aggregated data:

☐ No.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key components of high quality child care. These require a competent, skilled, and stable workforce. Research has shown that specialized training and education, positive and well-organized work environments and adequate compensation promote teacher recruitment, stability, diversity of the early childhood workforce, and effectiveness with young children in child care. In addition, professional development strategies that emphasize on-site mentoring and coaching of teachers have emerged as promising to change practices with children and families. Professional development, whether training, on-site coaching and mentoring, registered apprenticeship, or higher education coursework, should reflect the research and best practices of child development in all domains and cultural competence.
The CCDBG Act of 2014 requires States and Territories to establish professional development and training requirements in key areas such as health and safety, early learning guidelines, responding to challenging behavior and engaging families. States and Territories are required to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. (658E(c)(2)(G)) An example of how a State/Territory might address this is to establish a system or framework of professional development that includes professional standards, a "career ladder" that allows an individual to build knowledge and skills in a cumulative manner from introductory training to advance level education, including obtaining credentials and post-secondary degrees. Professional development should be designed in a manner that aligns to competencies and qualifications that reflect working with children of different ages, English language learners, children with disabilities and the differentiated roles in all settings, such as teachers, teacher assistants, and directors. Training and education supporting professional development is also one of the options States and Territories have for investing their CCDF quality funds. (658G(b)(1)) ACF encourages States and Territories to collaborate and coordinate with other early childhood educator professional development resources, such as Race to the Top Early Learning Challenge grants, quality funds available through the Preschool Development grants, and funds available through Head Start and Early Head Start, to the extent practicable. Responsive, well-qualified adult caregivers are one of the most important factors in children's development and learning in child care settings. ACF strongly encourages States and Territories to link CCDF health and safety trainings (see Section 5) and child development trainings and education to this broader professional development framework as the foundation for building a knowledgeable early childhood education workforce. Questions related to requirements for recruiting and retaining a qualified and effective child care workforce have been consolidated into Section 6.

6.1 Training and Professional Development Requirements

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

The State/Territory also must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))
For purposes of this section, the term professional development is inclusive of credit bearing coursework, postsecondary degree programs, and technical assistance (targeted assistance such as mentoring, coaching or consultation) activities. Health and safety topics that require renewal of a credential or certification should be considered continuing education unit trainings.

6.1.1 Describe the status of the State's training and professional development requirements to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce.

a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and mid-level training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the child care program).

b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.)

c) Incorporate knowledge and application of the State/Territory's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)

d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF

e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

☐ Fully implemented and meeting all Federal requirements outlined above. Describe using 6.1.2 through 6.1.6 below.
Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 03/31/2017

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Substantially implemented - Florida has identified and adopted core competencies for early education and care professionals. As the foundation of professional development, the core competencies identify what every practitioner should know and be able to do. These research-based competencies are grouped into specific content areas with further delineation of knowledge and skill competencies. Core knowledge aligns with Florida’s Early Learning and Developmental Standards: Birth to 5, descriptors of what children should know and be able to do. Florida has the following sets of competencies and associated trainings:
- Core Competencies for Practitioners.
- Core Competencies for Directors.
- Core Competencies for Trainers.
- Core Competencies for Technical Assistance Specialists.
- Core Competencies for School Age Practitioners.
- Targeted Competencies for Specialists Supporting Inclusion.

Substantially implemented - Florida also has community-based training approved by a state regulatory body to meet licensing or regulatory requirements. These trainings can be found at http://www.myflfamilies.com/service-programs/child-care/training

Substantially Implemented - Florida established its Professional Development Initiative Steering Committee (PDI) in 2007. Professional Development Initiative members include professionals from provider associations, higher education institutions, early learning coalitions, training organizations, Head Start, state departments that invest in and work on professional development issues, and non-profit organizations. The PDI is identified as a key group to support the professional development work in Florida. The PDI is a stakeholder group that represents the full diversity of early
childhood professional development interests in the state of Florida, particularly one that includes providers from a variety of settings and informs the development of an early childhood professional development system. Whether the PDI remains in its current form, the primary state advisory committee on issues related to professional development, or is reconstituted in either its mission or its participants, it will have a strategic, diverse, well-facilitated stakeholder group for the credibility and effectiveness of any professional development directions or strategies.

Substantially Implemented - OEL and DCF have a library of state approved trainings; however more are in the process of being adopted to include in the state's advanced early education and care credential.

Unmet requirement - Identify the requirement(s) to be implemented (provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities);

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Not fully implemented - OEL is in progress working with the Florida Early Care and Education Professional Development Initiative Steering Committee on the development of a career lattice that allows an individual to move from introductory training to advance level education, including obtaining a credential. OEL will work with DCF to implement a fully-integrated system. Estimated timeline below:

May 2, 2016 - Professional Development System Request for Proposal submitted expected completion.

July 2, 2016 - Professional Development System contract awarded expected completion.

September 30, 2016 - Professional Development System Go-Live expected completion.

March 31, 2017 - Training for ELC's and Providers expected completion.

Projected start date for each activity: 09/01/2015
Projected end date for each activity: 03/31/2017
Agency - Who is responsible for complete implementation of this activity **OEL.**

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

**Florida Department of Education - Division of Career and Adult Education, DCF and the Children's Forum.**

Unmet requirement - Identify the requirement(s) to be implemented **Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory**

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

**Not fully implemented - Florida currently has a basic training management system through DCF, which captures professional training information required for licensing. The OEL is also in the process of development of a more extensive early learning workforce registry to capture workforce data, automatically record training from a variety of approved professional development providers, and allow early childhood professionals to document training required for licensing as well as detailed training records and progress toward achievement of credentials, certificates and degrees. The OEL will work with DCF to implement a fully-integrated system.**

**Estimated timeline below:**

- **May 2, 2016 - Professional Development System Request for Proposal submitted expected completion.**
- **July 2, 2016 - Professional Development System contract awarded expected completion.**
- **September 30, 2016 - Professional Development System Go-Live expected completion.**
- **March 31, 2017 - Training for ELC's and Providers expected completion.**

**Projected start date for each activity:** 10/31/2015  
**Projected end date for each activity:** 03/31/2017  

Agency - Who is responsible for complete implementation of this activity **OEL.**

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

**Florida Department of Education - Division of Career and Adult Education, DCF**
6.1.2 Describe how the State provides ongoing training and professional development, provides for a progression of professional development (such as allows an individual to build on entry- and mid-level training and education both in terms of the skills and knowledge they attain but also in terms of credit that leads toward a higher level credential or certification, including articulation agreements) reflecting research and best practice to meet the developmental needs of participating children and improve the quality and stability of the child care workforce:

☐ State/Territory professional standards and competencies.
  Describe.
  Florida has identified and adopted core competencies for early education and care professionals. The foundation of professional development, identifies what every practitioner should know and be able to do. These research-based standards are grouped into specific content areas with further delineation of knowledge and skill competencies. Core knowledge aligns with Florida’s Early Learning and Developmental Standards: Birth to 5, descriptors of what children should know and be able to do. Florida has the following sets of competencies and associated trainings:
  - Core Competencies for Practitioners.
  - Core Competencies for Directors.
  - Core Competencies for Trainers.
  - Core Competencies for Technical Assistance Specialists.
  - Core Competencies for School Age Practitioners.
  - Targeted Competencies for Specialists Supporting Inclusion.

☐ Career ladder or lattice.
  Describe.

☐ Articulation agreements between two- and four-year postsecondary early childhood education or degree programs.
  Describe.
  The Florida Children’s Forum, in conjunction with OEL and other stakeholders, has been meeting for the past three years as a committee to work on issues of articulation. The goal is to create a seamless pathway from high school diplomas to credentials and ultimately degrees in the field of early childhood education. Honoring credits between institutions of higher education and transferability are important considerations for the...
field. Progress has been made. However we continue to work on the transferring of Associates degree(s)/credit(s) to Bachelors degrees between institutions. This goal is particularly important as we work with practitioners who are also T.E.A.C.H. (see section 6.1.7) participants to ensure that resources are maximized.

- Community-based training approved by a state regulatory body to meet licensing or regulatory requirements.
  
  Describe.
  
  Florida has community-based training approved by a state regulatory body to meet licensing or regulatory requirements. These trainings can be found at http://www.myflfamilies.com/service-programs/child-care/training.

- Workforce data, including recruitment, retention, registries or other documentation, and compensation information.
  
  Describe.

- Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework.
  
  Describe.
  
  Florida established its Professional Development Initiative Steering Committee (PDI) in 2007. Professional Development Initiative members include professionals from provider associations, higher education institutions, early learning coalitions, training organizations, Head Start, state departments that invest in and work on professional development issues, and non-profit organizations. The PDI is identified as a key stakeholder group to support the professional development work in Florida, and represents the full diversity of early childhood professional development interests in the state. Particularly, it includes providers from a variety of settings and informs the development of an early childhood professional development system.

- Continuing education unit trainings and credit-bearing professional development.
  
  Describe.
  
  All OEL and DCF state approved trainings included on DCF’s Training Management System receive continuing education units upon successful completion. All course work and/or degrees recognized are from institutions (public and non-public) that are accredited by a regional or national accrediting agency recognized by the United States Department of Education. If degrees or course work are issued from another country, participants must submit their transcripts to a third party evaluator to determine equity.
State-approved trainings.

Describe.

The OEL and DCF have a library of state approved trainings; however more are in the process of being adopted to include in the state's advanced early education and care credential.

Inclusion in state and/or regional workforce and economic development plans.

Describe.

Other.

Describe.

6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC

Describe.

Professional Development Initiative Steering Committee members as described in 6.1.1 met multiple times, worked through subcommittees, reviewed best practices and revised state policies and practices.

6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory’s health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements

Describe.

Each regulated provider is required to take introductory training which includes: child growth and development; health, safety and nutrition; rules and regulations; identifying and reporting child abuse and neglect behavioral observation and screening; developmentally appropriate practices; and early and/or emergency literacy. Pending legislative approval, OEL will require
all providers receiving CCDF funds to complete the above training as preservice training, as well as additional training in the areas of safe sleep practices, early learning developmental standards, social/emotional development of young children, emergency preparedness, transportation safety (if applicable) and first aid/CPR.

6.1.5 Describe how the State’s training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable)

Describe.
We are currently in contact with the Miccosukee Tribe in our state. Through this connection we hope to create a communication plan in order to create information about and access to all of the quality initiatives currently existing within the state. By opening this line of communication, we hope to create a stronger partnership with this community.

6.1.6 Describe how the State/Territory’s training and professional development requirements are appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children), English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

Describe.
Introductory training for regulated/registered providers includes topic areas that cover diversity in areas such as age group, exceptionalities, and culture. These courses can be differentiated by age group served or provider type.

Through a partnership with the University of Florida (UF), OEL is funding access to Early Learning Florida, a highly engaging online and blended learning system that provides high quality professional development to thousands of early childhood professionals throughout Florida. Early Learning Florida includes extensive content on meeting the needs of dual language learners. Additional content on supporting the needs of children with special needs will be developed in the next 18 months.

UF is also in the early stages of building out micro-credentials, which will provide sequenced, incremental content that builds specific skills in early childhood professionals. Pending private funding (in process), micro-credentials of 50-60 hours of specialized training will be
created in the following areas: Infant-Toddler Learning and Development; Infant-Toddler Family Partnerships; Preschool Language and Literacy; Meeting the Needs of Dual Language Learners (preschool); Preschool STEAM (Science, Technology, Arts, Math), and Using Care to Inform Care and Instruction.

6.1.7 Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. Check all that apply and describe.

☑ Financial assistance for attaining credentials and post-secondary degrees.
Describe.

The T.E.A.C.H. Early Childhood® Scholarship Program is a successful three-way partnership between the employer, the teacher and the T.E.A.C.H. program addressing the problems of teacher education, turnover, and compensation in the child care and early learning field. The T.E.A.C.H. program first received statewide funding in 1998 to assist child care and early learning practitioners and has provided scholarships for over 24,000 scholars in Florida since that time for early childhood credentials and degree’s. The Program consistently produces data-driven, measurable outcomes that address the challenges of the field and provides access to a well-trained and qualified counselor through the T.E.A.C.H. office to help recipients navigate the often confusing landscape of professional development and higher education options.

Early Learning Florida is an initiative that allows providers access to training on many early childhood topics. These trainings are offered online and are able to be blended into a technical assistance or community of practice approach. OEL provides stipends to providers who achieve mastery for each course as well as funding for technical assistance coaches and community of practice facilitators. Coalitions receive an additional stipend for the recruitment of providers and registration duties.

☑ Financial incentives linked to education attainment and retention.
Describe.

Child Care WAGE$® was designed to provide preschool children more stable relationships with better-educated teachers by rewarding teacher education and continuity of care. WAGE$ awards education-based salary supplements to early educators to address the key issues of under-education, poor compensation and high turnover within the early childhood workforce. Supplement awards are based on education achieved and the continuity of care provided. Florida WAGE$ has been locally funded in a number of counties since 2004 and
has provided salary supplements to over 6,000 child care providers. Some early learning coalitions also offer financial incentives linked to education attainment.

- Registered apprenticeship programs. Describe.

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

- Policies for paid sick leave. Describe.

- Policies for paid annual leave. Describe.

- Policies for health care benefits. Describe.

- Policies for retirement benefits. Describe.

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

- Other. Describe.

6.1.8 Describe how the State/Territory will recruit providers for whom English is not their first language, or who will serve and be available for families for whom English is not their first language. Describe.

   All information is disseminated in English and available in Spanish. The OEL and coalitions
also have translators available upon request. The areas of the state which have high populations of families/providers for whom English is not their first language employ staff who speak the first language of those families/providers. Sixty hours of Early Learning Florida courses and a portal in Spanish is available for early childhood professionals through the University of Florida.

6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.

- Informational materials in non-English languages
- Training and technical assistance in non-English languages
- CCDF health and safety requirements in non-English languages
- Provider contracts or agreements in non-English languages
- Website in non-English languages
- Bilingual caseworkers or translators available
- Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce
- Other.

Describe.

Some ELC websites are in non-English languages.

- None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State has the ability to have translation/interpretation in all primary and secondary languages.

Primary language - English, Secondary language - Spanish.

6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory’s training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).
Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

☐ Yes.

The State certifies that no later than March 1, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families.

Describe that training and technical assistance for providers

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

N/A

Unmet requirement - Identify the requirement(s) to be implemented Use CCDF for activities to improve quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Training course on serving homeless populations - OEL will develop a three-hour, standardized training module to provide information to practitioners on identifying and serving homeless children and families. This module will be included as a mandatory course included in the state's advanced early education and care credential.
6.2 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

States and Territories may use the quality set-aside discussed in detail in section 7 to support the training and professional development of the child care workforce.

6.2.1 If checked yes to 7.1 in the next section, check which content is included training and professional development activities. Check all that apply.

☑ Yes, If yes,

a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

Currently, the number of trainings provided and staff completing OEL-approved training is tracked. All trainings listed are open to any participant in the state. There are 6 online and/or instructor-led courses: *Florida Early Learning and Developmental Standards: Birth to Five, Standards for Four-Year-Olds, Integrating the Standards: Phonological Awareness, English Language Learners in the VPK Classroom, Language and Vocabulary Development in the VPK Classroom, Emergent Literacy for VPK Instructors, and Mathematical Thinking for Early Learners.*

Early Learning Florida tracks knowledge gains from participants completing any of the available 10-hour courses (30,000 hours of training projected to be delivered by July 2016). Additionally, in the ELPFPP pre- and post-CLASS scores are completed to assess the impact of Early Learning Florida training.

T.E.A.C.H. provides scholarships for early childhood practitioners to work toward a Florida Staff Credential, a Florida Director Credential and an associate or bachelor degree in early childhood education. Employers and recipients pay a portion of the costs
and provide a small raise or bonus upon completion. In exchange for an employer's contribution, T.E.A.C.H. recipients agree to work for a period of one year after each contract period, providing stability in the workforce and a return on the investment from the employer. The 2014/2015 results included:

- Turnover in child care and early learning classrooms were reduced to approximately 6 percent (as compared to typical workforce turnover in child care between 30 percent-40 percent annually).
- Recipients maintained a 3.28 GPA and were provided an average wage increase of 9 percent. Adult learners demonstrated their capacity and interest in becoming better teachers.
- 147 directors earned their Director's Credential, 796 teachers earned their staff credential, 180 renewed their credentials, and 405 associate degree contracts were completed with 55 associate degrees earned.

b) Indicate which funds will be used for this activity (check all that apply)

- CCDF funds.
- Quality set-aside.
- Other funds.

Describe:

- State funds (VPK).

c) Check which content is included in training and professional development activities. Check all that apply.

- Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c.

Describe:

The OEL has a three-hour instructor led training and a five-hour online training that addresses the different elements and developmental domains of the Florida Early Learning and Developmental Standards: Birth to Five. The training provides a brief overview of how the Standards can be used to support implementing developmentally appropriate practices for practitioners and directors. The Standards contain age-appropriate information and reflections about how young children explore, create, and think. The Standards are grounded in Florida's conviction that children's early experiences are directly related to later success in school, in the workforce, and in life.
Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2).

Describe:

The Center on the Social and Emotional Foundations for Early Learning (CSEFEL) is a national resource center for disseminating research and evidence-based practices to early childhood programs across the country. CSEFEL is focused on promoting the social emotional development and school readiness of young children birth to age 5. CSEFEL developed a conceptual model of evidence-based practices for promoting young children's social emotional competence and preventing and addressing challenging behavior. The OEL's network of lead trainers within the coalitions provide 38 hours of this training to practitioners free of charge.

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:

Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards.

Describe:

On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development.

Describe:

Using data to guide program evaluation to ensure continuous improvement.

Describe:

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

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

Describe:

Supporting positive development of school-age children.

Describe:

Other.

Describe:

The T.E.A.C.H. Early Childhood® Scholarship Program is a successful, comprehensive scholarship program that provides the early learning workforce with access to educational opportunities and credentials to work in early learning. The program is based on three major goals: 1) Increase education, 2) Increase compensation, and 3) Increase retention of the early childhood workforce. By promoting higher education and credentials, the program is helping to establish a well-qualified, fairly-compensated and stable workforce for Florida's children. T.E.A.C.H. links training, compensation and commitment to improving the quality of early childhood care and education experiences for young children and their families by providing scholarships for early childhood caregivers and center directors to work toward earning associate and bachelor degrees in early childhood education, as well as Florida Staff and Director Credentials and renewals. The T.E.A.C.H. program is a successful three-way partnership between the employer, the teacher and the T.E.A.C.H. program. The Program consistently produces data-driven, measurable outcomes that address the challenges of the field and provides access to a well-trained and qualified counselor through the T.E.A.C.H. office to help scholars navigate the often confusing landscape of professional development and higher education options.

Early Learning Florida is an initiative that allows providers access to training on many early childhood topics. These trainings are offered online and are able to be blended into a technical assistance or community of practice approach. The OEL provides stipends to providers who achieve mastery for each course as well as funding for technical assistance coaches and community of practice facilitators. Coalitions receive an additional stipend for the recruitment of providers and registration duties.
d) Check how the State/Territory connects child care providers with available Federal and State/Territory financial aid, or other resources for pursuing postsecondary education relevant for the early childhood and school-age workforce. Check all that apply.

- Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling
- State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities
- Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education

☐ Other.

Describe:

☐ No.

6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular content areas?

States and Territories are encouraged to consult with Caring for our Children for best practices and recommended time needed to address training hour requirements.

☐ Yes. If yes, describe:

a) Licensed Center-Based Care

1) Number of pre-service or orientation hours and any required areas/content

45-hours, which includes courses in the following areas:
- Child Care Facility Rules and Regulations;
- Health, Safety, and Nutrition;
- Identifying and Reporting Child Abuse and Neglect;
- Child Growth and Development;
- Behavioral Observation and Screening;
- Developmentally appropriate practices;
- Basic Guidance and Discipline; and
- Early and/or Emergent Literacy.

*Note: Currently, child care personnel for licensed centers must begin training within 90 days of employment and must complete training within 12 months from the date training begins. Per the implementation plan outlined in section 5.1.6, legislation is pending which would provide OEL authority to set standards for pre-service/orientation*
and in-service training for all providers receiving CCDF funds. Upon adoption, OEL will amend training timelines to provide for a 90-day completion period and set standards to ensure required training covers all health and safety topic areas outlined in section 5.1.6.

2) Number of on-going hours and any required areas/content
10-hours, concentrating on children age birth through 12, must be completed annually from topic areas listed in 65C-22.004(6)(b), FAC.

b) Licensed Group Child Care Homes
1) Number of pre-service or orientation hours and any required areas/content
45-hours, which includes courses in the following areas:
- Family Child Care Home Rules and Regulations.
- Health, Safety and Nutrition.
- Identifying and Reporting Child Abuse and Neglect.
- Child Growth and Development.
- Behavioral Observation and Screening.
- Developmentally appropriate practices.
- Basic Guidance and Discipline.
- Early literacy and language development of children ages birth through five years.

2) Number of on-going hours and any required areas/content
10-hours, concentrating on children age birth through 12, must be completed annually from topic areas listed in 65C-20.009(4)(b), FAC.

c) Licensed Family Child Care Provider
1) Number of pre-service or orientation hours and any required areas/content
35-hours, which includes courses in the following areas:
- Family Child Care Home Rules and Regulations.
- Health, Safety and Nutrition.
- Identifying and Reporting Child Abuse and Neglect.
- Child Growth and Development.
- Behavioral Observation and Screening.
- Early literacy and language development of children ages birth through five years.

2) Number of on-going hours and any required areas/content
10-hours, concentrating on children age birth through 12, must be completed annually from topic areas listed in 65C-20.009(4)(b), FAC.
d) Any other eligible CCDF provider

1) Number of pre-service or orientation hours and any required areas/content

**Registered Family Day Care Provider** - 35 hours, which includes courses in the following areas:

- Family Child Care Home Rules and Regulations.
- Health, Safety and Nutrition.
- Identifying and Reporting Child Abuse and Neglect.
- Child Growth and Development.
- Behavioral Observation and Screening.
- Early literacy and language development of children ages birth through five years.

2) Number of on-going hours and any required areas/content

**Registered Family Day Care Provider** - Ten hours, concentrating on children age birth through 12, must be completed annually from topic areas listed in 65C-20.009(4)(b), FAC.

No

6.2.3 Describe the status of the State/Territory's policies and practices to strengthen provider's business practices.

☑ Fully implemented - as of March 1, 2016.

Describe the State strategies including training, education, and technical assistance to strengthen provider's business practices. This may include, but is not limited to, such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance

Florida requires directors of licensed child care facilities to have a director credential. The DCF developed a comprehensive, renewable director credential consisting of educational and experiential requirements. Every child care facility is required to have a credentialed director, except during evening hours. A director may only supervise one child care facility, except that in certain circumstances, a director may supervise multiple before and after-school sites for a single organization (Rule 65C-22.008(4)(i), FAC). The director is the on-site administrator/ supervisor who must be present in the facility a majority of the time that the
facility is in operation, except during evening hours of operation. Every applicant for a license to operate a child care facility or a license for a change of ownership of a child care facility must document that the facility director has a Director Credential prior to issuance of the license. In order to receive a Director Credential, the "Overview of Child Care Management" course must be approved by DCF. The "Overview of Child Care Management" course provides instruction on such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications.

Several coalitions are implementing the Early Childhood Program Administrators Institute, a three-course program offered for college credit or CEUs, which results in an advanced Director Credential. The coursework addresses:
- Enhancing management and leadership skills.
- Fiscal administration of an early childhood program.
- Recruiting, selecting, and orienting staff.
- Implementing shared decision making and participative management.
- Understanding, conducting, and evaluating effectiveness of meetings.

There are also Early Childhood Leadership Institutes in multiple areas that offer resources, courses and technical assistance options for program administrators. The UF also plans to develop up to 30 hours of Early Learning Florida courses for directors before 2017.

Several coalitions have offered trainings on the Program Administration Scale, a valid and reliable instrument designed to measure the leadership and management practices in early childhood programs, while others provide individual business mentoring opportunities for directors based on specific needs.

Several coalitions conduct contract orientations that include information on best business practices. Many coalitions provide annual conferences for early learning providers which include a business or administration track, and some coalitions offer a business administration course several times each year.

The OEL also has standardized training modules for early care and education directors. This training provides an overview of the Florida Core Competencies for Early Care and Education Directors. These competencies address business practices to promote effective administration of early care and education programs.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.
6.3.1 Describe the status of the State's early learning and development guidelines appropriate for children from birth to kindergarten entry.

- The State assures that the early learning and development guidelines are:
  - Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
  - Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
  - Updated as determined by the State. List the date or frequency

- Reviewed every five years.

- Fully implemented and meeting all Federal requirements outlined above - as of March 1, 2016. List the Lead Agency’s policy citation(s) and describe using 6.3.2 through 6.3.4 below

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

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

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

- Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

- Projected start date for each activity:
- Projected end date for each activity:
- Agency - Who is responsible for complete implementation of this activity
- Partners - Who is responsible agency partnering with to complete implement
this activity

6.3.2 Check for which age group(s) the State has established early learning and development guidelines:

- [ ] Birth-to-three
  Provide a link:

- [ ] Three-to-Five
  Provide a link:

- [x] Birth-to-Five
  Provide a link:

- [ ] Five and older (check if State/Territory has standards for five and older that complement academic but cover child development areas not covered by k-12 academic standards).
  Describe and provide a link:

- [ ] Other.
  Describe:

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children's cognitive, physical, social and emotional development and support children's overall well-being?

- [x] Yes, the State/Territory has a system of technical assistance operating State/Territory-wide

- [ ] Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities

- [ ] No, but the State/Territory is in the development phase

- [ ] No, the State/Territory has no plans for development
a) If yes, check all that apply to the technical assistance and describe.

☑ Child care providers are supported in developing and implementing curriculum/learning activities based on the State's/Territory's early learning and development guidelines.

Describe:
Section 1002.82(2)(l), F.S., requires OEL to "Adopt a list of approved curricula that meet the performance standards for the School Readiness Program and establish a process for the review and approval of a provider's curriculum that meets the performance standards." Early learning programs receiving school readiness funds are required to select and implement a curriculum from the approved list. All Early Learning Florida courses are also aligned to the *Florida Early Learning and Development Standards: Birth to 5.*

☐ The technical assistance is linked to the State's/Territory's quality rating and improvement system.

Describe:

☑ Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines.

Describe:
The OEL hosts an Infant/Toddler Network. The Network is hosted by an OEL Network Coordinator and consists of specialists from each of the 30 Early Learning Coalitions (ELC) statewide. The Infant/Toddler Network is designed to support staff who manage local infant/toddler initiatives or who work in a direct support role to providers serving children birth to age 3. Technical assistance and training opportunities for the network focus on developing and implementing learning activities based on the *Florida Early Learning and Developmental Standards: Birth to Five,* strategies for enhancing the competencies of infant and toddler caregivers and for improving the quality of infant and toddler care settings.

Early childhood professionals have access to over 100 hours of training that is infant and toddler specific, and many professionals are taking blended courses that combines the online learning with individualized coaching through a certified early childhood coach. See section 6.2.3 for more information on the certified early childhood coach training and statewide capacity.
The University of Florida Lastinger Center for Learning has developed a certified early learning coach training. This eight-day training, consisting of a three-day training followed by five, one-day follow-up sessions, culminates in participants submitting a video of their coaching practice, which is rigorously evaluated against an evidence-based rubric that reflects the Florida Core Competencies for Technical Assistance Specialists and best practices from research on effective coaching and mentoring. Participants who demonstrate competence in each of the areas of the coaching mastery are certified as early learning coaches through UF; those who need additional support receive individualized training and mentoring to refine their coaching skills. Through OEL funding, 207 professionals from around the state have been certified and another over 50 are in the process of completing the training. Participants continue be connected through an online learning community and regular follow-ups so they can share their successes and challenges. This training and certification process has significantly improved coaching and mentoring throughout the state, bringing more consistency, rigor and focus on the practice of coaching in centers, family child care homes, Head Start/Early Head Start and school-based programs.

Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

Early childhood professionals have access to over 100 hours of training that is preschool specific, and many professionals are taking blended courses that combine the online learning with individualized coaching through a certified early childhood coach. See Section 6.2.3 for more information on the certified early childhood coach training and statewide capacity.

The University of Florida Lastinger Center for Learning has developed a certified early learning coach training. This eight-day training, consisting of a three-day training followed by five, one-day follow-up sessions, culminates in participants submitting a video of their coaching practice, which is rigorously evaluated against an evidence-based rubric that reflects the Florida Core Competencies for Technical Assistance Specialists and best practices from research on effective coaching and mentoring. Participants who demonstrate competence in each of the areas of the
coaching mastery are certified as early learning coaches through UF; those who need additional support receive individualized training and mentoring to refine their coaching skills. Through OEL funding, 207 professionals from around the state have been certified and another over 50 are in the process of completing the training. Participants continue be connected through an online learning community and regular follow-ups so they can share their successes and challenges. This training and certification process has significantly improved coaching and mentoring throughout the state, bringing more consistency, rigor and focus on the practice of coaching in centers, family child care homes, Head Start/Early Head Start and school-based programs.

☐ Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

b) Indicate which funds are used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

Quality set-aside, infant-toddler set-aside.

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

6.3.4 Check here to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used to deny children eligibility to participate in the CCDF program
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program
7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

1) Supporting the training and professional development of the child care workforce (as described in Section 6)

2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)

3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services

4) Improving the supply and quality of child care programs and services for infants and toddlers

5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)
6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)

7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children

8) Supporting providers in the voluntary pursuit of accreditation

9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development

10) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible.

Throughout this Plan, States and Territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

7.1 Activities to Improve the Quality of Child Care Services

7.1.1 What are your overarching goals for quality improvement?

Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services.

The state initiated the Early Learning Performance Pilot Project (ELPFPP) in 2014 to enhance quality in School Readiness Programs throughout the state, with priority incentive to providers located in areas of high poverty. Through the pilot project, the state has been collecting program (CLASS) and child assessment data to establish a threshold for continuing participation, which will incentivize quality improvement for current as well as potential provider participants. The overarching goal of the ELPFPP is to continually increase the threshold in upcoming project years in order to promote continuous improvement in program quality as well as child learning gains. Additionally, screening data is evaluated to
identify specific child developmental gains that may have been achieved through the project. Due to the success of the pilot, the project has shed the "pilot" label and is now called the Early Learning Performance Funding Project. This project timeline is from August 1-June 30 of each fiscal year.

7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:

- [ ] Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2. Indicate which funds will be used for this activity (check all that apply)
  - [ ] CCDF funds.
    - Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
    - Quality set-aside and Infant-toddler set-aside.
  - [ ] Other funds.
    - Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
    - Local funds.

- [ ] Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3. Indicate which funds will be used for this activity (check all that apply)
  - [ ] CCDF funds.
    - Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
    - Quality set-aside and Infant-toddler set-aside.
  - [ ] Other funds.
    - Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
    - Local funds.

- [ ] Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4. Indicate which funds will be used for this activity (check all that apply)
  - [ ] CCDF funds.
    - Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
    - Quality set-aside.
☑ Other funds.
   Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
   State and local funds.

☑ Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5. Indicate which funds will be used for this activity (check all that apply)
   CCDF funds.
      Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
      Quality set-aside.
   Other funds.
      Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
      State and local funds.

☑ Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6. Indicate which funds will be used for this activity (check all that apply)
   CCDF funds.
      Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
      Quality set-aside and infant-toddler set aside.
   Other funds.
      Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☑ Supporting accreditation. If checked, respond to 7.7. Indicate which funds will be used for this activity (check all that apply)
   CCDF funds.
      Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
      Quality set-aside.
   Other funds.
      Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
      Local 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 7.8. Indicate which funds will be used for this activity (check all that apply)

- CCDF funds.
  - Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
    - Quality set-aside and infant-toddler set-aside.

- Other funds.
  - Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9. Indicate which funds will be used for this activity (check all that apply)

- CCDF funds.
  - Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

- Other funds.
  - Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
    - State funds.

7.2 Quality Rating and Improvement System

7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?:

- Yes, the State/Territory has a QRIS operating State/Territory-wide.
  Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available

- Yes, the State/Territory has a QRIS operating as a pilot, in a few localities, or only a few levels
Provide a link, if available

2. ELC of Escambia County, Quality Rating Improvement System: http://www.elcescambia.org/ImportantUpdates.aspx
3. ELC of Flagler and Volusia Counties, Quality Rating Improvement System: https://www.elcfv.org/providers/qris/
5. ELC of Hillsborough County, Quality Counts: https://www.elchc.org/programs_services/quality-counts-for-kids-2/
6. ELC of Lake County, Colorful S.T.E.P.S to School Readiness: http://elclc.org/service-providers/#tab2
7. ELC of Manatee County, Quality Rating Systems: http://www.elcmanatee.org/providers/detail/quality-rating-improvement-system-qriskris
8. ELC of Miami-Dade/Monroe, Quality Counts: http://www.elcmdm.org/QualityCounts/index.htm
9. ELC of Orange County, Quality Stars: http://elcoorangecounty.org/quality-stars/
10. ELC of Palm Beach County, Strong Minds: http://www.providers.cscpbc.org/bequality
11. ELC of Pasco Hernando, Sunshine Stars: http://www.phelc.org/QRIS.php
12. ELC of Pinellas Early Learning Coalition, Levels of Excellence and Accreditation for Pinellas (LEAP): http://www.elcpinellas.net/qris.php
14. ELC of Sarasota County, Look for the Stars: http://www.earlylearningcoalitionsarasota.org/look_for_the_stars.htm
15. ELC of Southwest Florida Stars: http://www.elcofswfl.org/provider-qriskris.php

☐ No, but the State/Territory is in the development phase
☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to your QRIS.

☐ Participation is voluntary
☐ Participation is mandatory for providers serving children receiving subsidy.

If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.)
Participation is required for all providers

- Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels
- Supports and assesses the quality of child care providers in the State/Territory
- Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers
- Embeds licensing into the QRIS.

Describe:

- Designed to improve the quality of different types of child care providers and services
- Describes the safety of child care facilities
- Addresses the business practices of programs
- Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood system and the ratings of the programs in which the child is enrolled
- Provides, to the maximum extent practicable, financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services.

If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality

- Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating

b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.

- Licensed child care centers
- Licensed family child care homes
- License-exempt providers
- Early Head Start programs
- Head Start programs
- State pre-kindergarten or preschool program
- Local district supported pre-kindergarten programs
7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory.

Describe:

Each QRIS in the state has its own standards, which are similar but not consistent, statewide. To create more consistency, the local communities implementing QRIS have agreed to shared standards and are moving toward implementation of these consistent standards. The collaborative recommends three focused standards:

1. **Program Assessment**: Evaluation of adult-child interactions measured by the CLASS or the Family Child Care Environment Rating Scale, if applicable.

2. **Curriculum-Based Child Assessment**: Implementing observations of children to inform individualized care and instruction to best meet the individual developmental needs of each child, using one of the three OEL-approved curriculum-based child assessment tools (Teaching Strategies (GOLD), Assessment Technologies Institute (Galileo), and High Scope (COR)).

3. **Staff Qualifications and Professional Development**: Professional development is a critical foundational element for addressing child and family needs. Based on lessons learned and best practices, all staff/providers will create a professional development plan focused on individual and program needs aligned to the standards. The focus will be on annual completion of evidenced based training for CEUs or college credit to ensure meaningful content focused on improving practice, with recommendations for credentials/degree equivalencies as appropriate.

A central element of QRIS is the improvement supports offered. As noted in the proposed standards, professional development is a key element of improvement supports. Other local strategies such as coaching/technical assistance, resources to support child assessment and curriculum, scholarships to complete credentials or degrees, and wage stipends based on higher levels of education are also extremely beneficial for improving program quality. Given the diversity of resources across the state, communities are encouraged to invest in supports for improvement to meet their local quality goals.
7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers?

Check all that apply and describe.

☐ Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families.

Describe:

Florida

☐ Establishing or expanding the operation of community or neighborhood-based family child care networks.

Describe:

The early learning coalitions support the expansion of community or neighborhood-based family child care networks with a variety of initiatives, such as:

- Participating in state family child care home professional organization events.
- Offering scholarships for training and professional development to family child care providers.
- Hosting family child care network group meetings.
- Offering free technical assistance and training to family child care providers.
- QRIS systems to expand high-quality care to children of all ages, including infants and toddlers.
Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers.

Describe:

Infant and toddler classrooms are included in Tier 2 of the ELPFPP. These classrooms will be receiving program assessment observations, early learning online courses and trainings, professional development on a curriculum assessment based tool, and four technical assistance sessions with early learning professionals from the early learning coalitions based on program assessment scores.

The Infant/Toddler network supports early learning providers and specialists from the early learning coalitions. These supports include sharing of information about how to foster brain development in infants and toddlers; how to provide an environment that is rich meaningful learning experiences.

- The early learning coalitions and OEL program staff offer training to providers serving infants and toddlers on topics such as preventing biting, developmentally appropriate practices, safe sleep practices and sensory play.
- Early learning coalitions host conferences targeted at meeting the training needs of providers that serve infants and toddlers.
- Parent trainings are hosted by early learning coalitions with specific training toward infant and toddler development.
- Program assessment is available using the Infant and Toddler CLASS Tool. This data is used for targeted technical assistance.
- Early learning coalitions offer scholarships for professional development progression to teachers of infant and toddler classrooms.

Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care.

Describe:

- Early learning coalitions provide startup mini-grants to providers in order to extend their care to infants and toddlers. These funds are given to help with expenses such as curriculum, staffing increases, and developmentally appropriate materials.
- Developmentally appropriate materials for providers who serve infants and toddlers are supplied by coalitions.
- Financial incentives are provided for site renovations in order to promote health and safe environments for children of all ages, including infants and toddlers.
- Subscriptions to online assessment tools were provided at no cost to providers.
- Several early learning coalitions fund the cost of accreditation for providers who participate in and complete all requirements of the local QRIS.
- Infant and toddler classrooms are participating in the ELPFPP, which offers...
extra funding in the form of classroom bonuses and higher reimbursement rates for improved program assessment scores.

Providing coaching and/or technical assistance on this age group's unique needs from Statewide networks of qualified infant-toddler specialists.

Describe:

Infant/Toddler Specialists are located at each coalition to provide coaching and technical assistance regarding care and education of infants and toddlers to early learning providers. As noted in 6.2.3, Florida has built significant capacity to provide high quality coaching and mentoring to early childhood professionals in centers and family child care homes through the certified early childhood coaches. While this capacity was built as a part of Early Learning Florida, coalitions and their partners report using the certified coaching capacity widely throughout their other quality improvement initiatives, including their work to improve infant and toddler care.

- Coalitions use program assessment scores to offer targeted technical assistance using tools such as the Infant and Toddler CLASS tools.
- Blended models of training are offered through the Early Learning Florida program, which offers online training blended with technical assistance and/or communities of practice.
- Each early learning coalition is staffed with an Infant/Toddler Specialist who serves as a coach for providers serving infants and toddlers.
- Some early learning coalitions offer quality mentors who provide technical assistance to the teachers involved in the Early Head Start - Child Care Partnership grant on a bi-weekly basis.

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:

- Initial developmental screening is required for all children in the School Readiness Program within the first 45 days of receiving services. Screening is required at least annually after the initial screening. OEL provides the screening data capture system at no cost to providers or coalitions. The results of these screenings will determine if a referral to an early interventionist is required.
- Upon determination that referral to early intervention services is warranted, coalitions work with the Early Steps (Part C) program to coordinate service delivery.
- The OEL works with Expanding Opportunities, an inter-agency committee made up of the Department of Health, the Department of Education, the Florida Developmental Disabilities Council, and the Florida Inclusion Network
to ensure all infant/toddler initiative have inclusive practices.
- The OEL, in collaboration with other agencies, is developing a self-assessment tool to measure inclusive practices, which can be used by all provider types.
- The early learning coalitions collaborate with various agencies, such as the homeless coalition and community based care organizations, to facilitate quick and appropriate referrals, to meet the needs of children and families.
- Early coalitions participate on local committees, councils and boards to collaboratively facilitate the process for referrals and transitions.
- Each early learning coalition, as well as OEL, has an Inclusion Specialist on staff who provides Inclusion Warm Line services including parent phone and in person consultation, onsite observation, and technical assistance. Inclusion Specialists also provide training and technical assistance to providers as requested. These specialists connect parents with the necessary resources to meet the needs of the family.

☐ Developing infant and toddler components within the State's/Territory's QRIS.

Describe:

☐ Developing infant and toddler components within the State's/Territory's child care licensing regulations.

Describe:

Gold Seal Quality Care Program Rate Differential for Infants/Toddlers: Coalitions may negotiate the payment of a rate differential or stipend, which may not exceed more than 20 percent of an early learning coalition's reimbursement rate, to School Readiness providers who have achieved a Florida "Gold Seal Quality Care" designation through accreditation. Therefore increasing the availability of high quality infant/toddler providers.

☐ Developing infant and toddler components within the early learning and development guidelines.

Describe:

Florida's Early Learning Developmental Standards: Birth to Five include all components of infant and toddler development.

☐ Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care.

Describe:

As partners with the CCR&R State Network Office, ELCs utilize many methods to assist parents in easily accessing user-friendly consumer information. Some of these methods include:
- Website redesigns to enhance user friendliness.
- "Hash-Tags" sent to the parent's phone each Monday with simple and concise information related to parents as the child's first teacher, the critical importance of high quality care experiences, and simple "home works" that parents can use to support the care and development of their child's brain.
- Information given during parent enrollment.
- Provide trainings and activities for teen parents enrolled in High School.
- Child Care Resource and Referral staff attend various outreach events to inform the community of available services.
- Distribution of literature of various sorts to inform parents of appropriate choices for care.
- Vroom Family Engagement Initiative.
- Facebook, Twitter, Instagram and other forms of social media are utilized to disseminate information.
- Local billboards.
- Newsletter, various flyer distributed at monthly Market Day.
- Email distribution.

☐ Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being.

Describe:

☐ Other.

Describe:

7.3.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State's progress in improving the quality of child care programs and services in the State/Territory

Describe:

The OEL has awarded a contract for the Early Learning Classroom Support System to Web-based Early Learning Systems Foundation (WELS), LLC.

The contract supports this initiative by:

- Providing a web-based early learning classroom support system service to support Florida's providers, early learning coalitions and Head Start grantees with Classroom Assessment Scoring System (CLASS) implementation.
- Maintaining and supporting the data capture of voluntary CLASS observations and program assessment scores for early learning programs serving children birth through
age 5 in a centralized, statewide database.
- Generating classroom Quality Improvement Plans (QIP) to inform professional
development efforts and document quality investments made in early learning
programs. Upon completion of the QIP, a subsequent CLASS observation is
completed and scores recalculated to measure direct improvement.

Child assessment data is gathered at the coalition level in order to monitor the progress of
children of all ages. This also measures the growth of teachers receiving targeted technical
assistance in those areas.

Additionally, Early Learning Florida provides infant and toddler courses to providers and
track mastery of coursework.

Local QRIS efforts show the growth of providers as they progress to higher levels of quality.
This is tracked at the local level.

Additional measures include tracking and monitoring:
- The number of infants and toddlers enrolled in programs participating in initiatives.
- The increase in number of programs receiving accreditation as a direct result of
investment from initiative activities.
- The number of referrals provided by the warm line, as well as the technical assistance
visits to providers generated as a result of the referral.
- The number of providers serving infants and toddlers, by provider type.
- The number of technical assistance and follow up visits, which allow coalitions to
measure growth and monitor progress from initiatives.

7.4 Child Care Resource & Referral

7.4.1 Describe the status of the child care resource and referral system
State/Territory has a CCR&R system operating State/Territory-wide.
Describe how the CCR&R system is operated, including how many agencies and if there
is a statewide network and how the system is coordinated and if it is voluntary
The OEL houses the CCR&R State Network and contracts with 30 early learning
coalitions to provide CCR&R services locally in each of Florida's 67 counties. Local
CCR&R programs serve all individuals seeking early learning services in Florida free of
charge. Trained staff provide families with information regarding available early learning
options, child care licensing requirements, financial assistance programs, customized child care listings, and consumer education to help families recognize quality indicators of child care. Local CCR&R's also provide information and referrals to other community resources available within their local communities.

Additionally, the state provides funding for Help Me Grow, Florida which is a comprehensive, and integrated statewide system designed to address the need for early identification of developmental and/or behavioral concerns, and then link children and their families to community-based developmental and behavioral services and supports.

☐ State/Territory has a CCR&R system operating in a few localities but not fully operating State/Territory-wide

Describe:

☐ State/Territory is in the development phase

7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory

Describe:

The CCR&R State Network serves two fundamental purposes: (1) to help parents identify and select quality early learning programs that best meet their children's needs, and (2) to provide technical assistance that addresses and improves the quality, availability and affordability of child care. Another way this is accomplished is through the provision of information and resources about quality early learning options and work/family solutions to families, child care professionals, and government entities. Each CCR&R program maintains a database of all legally operating child care providers within its service area. The CCR&R database contains licensed, license-exempt, faith-based, registered family child care homes, Head Start, Early Head Start and Migrant and Seasonal Head Start, and other non-traditional child care providers, which includes summer camps, afterschool programs and membership organizations, such as Boys and Girls Clubs. This database is the primary data source for families searching for child care arrangements. The data also supports local businesses by serving as advertisement for child care service providers. Each family who contacts CCR&R for information is offered a listing of child care providers that meet that family's individual needs, suggestions on how the family can proceed with their search for a child care provider, access to state child care licensing information, as well as inspection reports, and an invitation to call back if further assistance is needed. Families are also provided with access
7.5 Facilitating Compliance with State Standards

7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards?

Describe:
The state funds child care licensing activities that ensure the health and safety of children in child care settings through a set of minimum health and safety standards, to include training for child care personnel in licensed child care settings.

7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:
The DCF, by policy, conducts at minimum three licensing inspections per year for facilities and two licensing inspections per year for homes. The licensing inspection template for facilities has a 63 item checklist which corresponds with the minimum standards established in s. 402.302-402.319, F.S., and Chapter 65C-22, Florida Administrative Code (FAC) and for homes there is a 38 - 51 item checklist which corresponds with the minimum standards established in s. 402.302-402.319, F.S., and Chapter 65C-20, FAC. During each inspection visit, licensing staff have one-on-one time with the provider and can answer questions, offer technical assistance, provide updates regarding rule or policy changes, identify violations and make suggestions on how to come back into compliance. Licensing staff are required to document all violations observed at the time of inspection on the report (even those items that are corrected at the time of the inspection visit). Each noncompliance item cited requires a due date to be entered and a follow-up re-inspection must be completed at another date when the violation has been corrected. If a provider corrects a violation at the time of the inspection, this is notated on the inspection report "corrected at time of inspection" in place of the due date and does not require a re-inspection. These violations of licensing standards
are still documented in the inspection report as being noncompliant. The DCF's data base system captures violations from inspection reports and generates a matrix for each provider. The DCF's progressive enforcement system dictates administrative action procedures for three classification levels of violation occurrences. This system is a gradual approach to disciplinary action -- beginning with Technical Support and Warning Notices and leading up to Administrative Fines and/or Suspension/Revocation of the provider's license. The system is ideal for ensuring consistent consequences and for encouraging providers to comply with minimum standard requirements. The above described inspection process is not applicable to license exempt facilities or registered family day care homes. The state is seeking legislative authority to establish and implement health and safety standards for license exempt providers and the ability to ensure compliance for protection of children in all child care arrangements that receive CCDF funding.

Additionally, CLASS observations and child assessment data allows the state to measure progress and effectiveness of training and technical assistance efforts to providers.

7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings.

Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children.

The different quality initiatives included in the Florida School Readiness Program are shaping the process by which early learning providers are increasing the quality of services offered Florida's children. These quality initiatives are the following:

**School Readiness Curriculum Approval**
- Legislation requires OEL to adopt a list of approved curricula that meet Florida's Early Learning Developmental Standards: Birth - 5 and to establish a process for reviewing and approving a provider's curriculum to assess whether it meets the standards.
- This process was implemented in 2013 and it impacts approximately 9,500 early learning providers.

**Voluntary Pre and Post Child Assessments**
- The OEL has created an approved list of pre-assessment and post-assessment tools...
that early learning providers can select from to implement in their programs. The list includes Teaching Strategies (GOLD), Assessment Technologies Institute (Galileo) and HighScope (COR). These tools are valid, reliable, and developmentally appropriate. They are designed to measure progress in the domains of the Florida Early Learning Developmental Standards: Birth to Five, provide appropriate accommodations for children with disabilities and English language learners, and are user friendly.

- This voluntary pre- and post-assessment system helps ensure quality early learning in Florida and impact more than 135,000 school readiness children, 10,000 school readiness providers and 15,000 school readiness teachers.
- It provides teachers, child care providers and parents a tool to guide instruction, document learning and development over time, and complements developmentally-appropriate curriculum.
- The assessments also aid in communication with families, provide stakeholders with a way to measure children's developmental gains, and document growth and development information about children in the School Readiness Program.
- Approximately 73 percent of early learning providers in Florida use standardized child assessment instruments.

Program Assessment

- Since July of 2012, OEL has been providing a voluntary statewide capacity-building Classroom Assessment Scoring System™ (CLASS™) Initiative offering CLASS trainings to early learning coalition staff, Head Start/Early Head Start staff, OEL staff, training partners and early education provider association representatives.
- More than 750 participants statewide have received this training, which includes these components-Pre-K Observer Training, Pre-K Observer Train-the-Trainer, Making the Most of Classroom Interactions Train-the-Trainer, Toddler Observer Training and Toddler Observer Train-the-Trainer.
- All 30 early learning coalitions participated in the training and can now offer these courses to local providers.
- Due to overwhelming positive feedback from Florida's early learning professionals and providers, OEL continues to provide additional CLASS™ training and support services to the 30 early learning coalitions. In fiscal year 2015-16, OEL is providing the following:
  - Provider Training Subscriptions.
  - 1,200 Intro to CLASS online subscriptions.
  - 10,000 CLASS Video Library subscriptions.
  - 300 Looking at CLASS room subscriptions.
  - Observer and Trainer Courses.
  - Infant Observer Training, 30 slots.
  - Toddler Trainer Training, 10 slots.
  - Pre-K Trainer Training, 10 slots.
  - Making the Most of CLASS room Interactions (MMCI) Trainer Training, 20 slots.
  - Feedback Training, 60 slots.
  - Instructional Support Services Training, 60 slots.
  - Support Services for certified observers and trainers.
- 600 Online Calibrations.
- 470 Observer Recertifications.
- 170 MMCI Renewals.
- 400 MMCI Provider Kits.

**Early Learning Performance Funding Pilot Project**

**Year 1**

- In 2014, the Florida Legislature approved the ELPFPP to see whether specific training and teaching approaches improve how well children do in school readiness. The project gave eligible child care providers selected to be part of a **pilot group** and their instructors an opportunity to earn additional compensation for improving School Readiness Program outcomes. Other eligible providers randomly assigned to a comparison group got quarterly incentives for participation. To be eligible to participate, providers had at least 30 percent of their birth-5 enrollment made up of children in the School Readiness Program and be located in a census poverty track where fifty percent of the children under age 6 in the area are below 150 percent of the poverty level and receive a higher differential.
- 1,933 instructors/directors actively participated in the **pilot group**.
- 723 instructors/directors actively participated in the **comparison group**.
- 1,211 teachers received training in the pilot group.

**Year 2**

The success of the initial year of the ELPFPP resulted in funding for a second year 2015-2016. The project gives eligible child care providers and their instructors an opportunity to earn additional compensation for improving School Readiness Program outcomes. To be eligible, providers must have at least 30 percent of their birth-5 enrollment made up of children in a school readiness program when applying and be located in a census poverty track where fifty percent of the children under age 6 in the area are below 150 percent of the poverty level and receive a higher differential.

The project tracks the results of special training and teacher-child interaction through the school year. Providers may not have any Class I or more than two Class II licensing violations within last two years and approximately 400 providers around the state are participating. The participants were divided into:

**Tier 1 providers:**
- Have to complete two-hour Introduction to CLASS® online module
- Have to complete 20 hours of Making the Most of CLASS room Interactions™ training
- Their classes will be observed with the CLASS® tool

**Tier 2 providers:**
- To participate in Tier 2, providers must have completed 20 hours of MMCI and the two hour online Introduction to CLASS module within the timeframe of Sept. 15, 2013, and Sept. 15, 2015, (or be able to attain course completion on or before Sept. 15, 2015)
- Complete professional development modules for an OEL approved child assessment tool and conduct a pre and post assessment of each child.
- Successfully complete 20 hours of Early Learning Florida training.
- Participate in four technical assistance visits with coalition staff members certified through the University of Florida early childhood coach training.

7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:
For years 2015-2018
- Pre and Post assessment: The State will form a small internal group to develop process to gather an annual sample of data from pre and post assessment scores and program assessment scores and compare them to the national norms.
- In the Performance Funding Pilot the CLASS observation measures the level of teacher-child interactions occurring in classrooms. The pre-CLASS and post-CLASS observations are analyzed at the end of the project to determine the amount of improvement.
- Pre-post assessment: The State will aggregate data from the early learning coalitions and do a needs assessment for targeting areas of improvement.
- Readiness rates: The State will analyze kindergarten readiness rates to determine quality regional support.

7.7 Accreditation Support

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

Yes, the State/Territory has supports operating State/Territory-wide. Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation The statewide professional organization, Florida Family Child Care Home Association (FFCCHA) awards approximately $10,000 annually in partial scholarships to family child care provider members for NAFCC (National Association for Family Child Care) accreditation (Self Study, New & Re-Accreditation, Annual Update) NAFCC accreditation
support (Observer, Observer Refresher, and Trainer). The Family Child Care provider members must apply and if qualified are awarded up to $300 annually. In addition to scholarships, FFCCHA also gives support and encouragement to FCC providers interested in accreditation by regularly offering a four hour in-service training "All About NAFCC Accreditation" taught by Certified NAFCC Trainers. FFCCHA has a Certified M.E.N.T.O.R. program in which providers can contact a mentor for guidance during the process. FFCCHA offered a Tour of FCC home environments, which included NAFCC Accredited homes at its last two annual conferences.

The Florida Association for the Education of Young Children (FLAEYC) provides information and support to child care centers interested in obtaining National Association for the Education of Young Children (NAEYC) Accreditation. This information and support is provided through our state office and our 15 local affiliates located throughout the state by members with years of experience in the field of early childhood.

☐ Yes, the State/Territory has supports operating as a pilot or in a few localities
   Describe:

☐ No, but the State/Territory is in the development phase
☐ No, the State/Territory has no plans for development

7.7.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory
   Describe:
   The number of providers that obtain accreditation as a result of receiving accreditation support from FFCCHA and FLAEYC.
7.8 Program Standards

7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development?

Please describe:

While there are agreed upon components of quality which have been created through stakeholder collaboration groups, there has been no formal adoption of quality standards in these areas. However through development of the Office of Early Learning's Health and Safety Standards to meet the requirements of the CCDBG Reauthorization these topic areas are being addressed. One component that is currently implemented and adopted through rule is developmental screening. Additionally coalitions have local initiatives supporting the development of high quality program components which address health, mental health, nutrition, physical activity, and physical development.

7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

Not available, however once standards are adopting into rule a monitoring process will show the providers level of implementation of these standards.

7.9 Other Quality Improvement Activities

7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten.
Florida law requires all private and public VPK providers to administer pre- and post-assessments to all children attending a VPK program (s. 1002.67(3), F.S.). The requirements for 2015-16 are new and include the use of VPK Assessment and Teaching Strategies GOLD®. All VPK providers are responsible for complying with administration and reporting results by specified deadlines. There are two rules that pertain to VPK pre- and post-assessments.

Rule 6A-1.09433, FAC, identifies the instruments to be used for pre- and post-assessment, who can administer the instruments and training assessors must have.

Rule 6M-8.620, FAC, outlines how to order materials, reporting results, deadlines, responsibilities of each early learning coalition and consequences for non-compliance.

8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory’s policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory’s own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.
8.1 Program Integrity

8.1.1 Describe how the State ensures that their definitions for violations have been modified, staff trained, and program integrity procedures revised to reflect new requirements.

Describe:

Each year OEL has a process in place to review all program guidance each year and update as required. This process extends to existing rules when any state or federal legislation is passed. Additionally, the grant agreement (between OEL and ELCs and contracts are reviewed each year and updates are made as needed. OEL also coordinates routinely each program year with DCF to ensure staff is aware of updates/revisions to federal/state grant program definitions. Both agencies also comply with rule workshop requirements, which encourage public participation and input from local providers. OEL staff routinely review CCDF-related correspondence from USDHHS/ACF.

OEL will revise processes to reflect new CCDF requirements. Program Integrity Activities will include (1) revision of standardized statewide provider contracts for informal, licensed and licensed-exempt providers, (2) revision of the standardized provider contract monitoring tool, and (3) revision of the rule for standardized coalition School Readiness plan requirements. These documents all work together to provide consistent and timely information to local early learning coalitions and program providers about definitions, mandatory annual monitoring processes and instructions for responding to parental complaints. The program guidance standards provided in these documents allow/require reporting of intentional and unintentional program violations.

8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements.

Check all that apply.

- Issue policy change notices
- Issue new policy manual
Regular check-ins to monitor implementation of the new policies.

Describe:
The OEL has created an implementation team for all policy and procedure changes reflecting the new CCDF requirements. The implementation team meets internally and with DCF on a bi-weekly basis. Updates and progress on meeting the new requirements are provided at monthly all-staff meetings and quarterly meetings with the coalitions and RCMA. Through supervision, management oversight and meetings, OEL will ensure all staff and subrecipients are informed of any updated policy and procedure. Existing monitoring protocols are being revised to reflect the policy and procedure changes and will serve to provide assurance of a successful implementation.

Other.
Describe:

8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF.

The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements.

Definition: "Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93). Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as "vendors"). The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing
contractors or grantees to ensure that eligible children are served and eligibility documentation is verified."

Describe:

**Quarterly Fiscal Desk Reviews**

Quarterly Fiscal Desk Reviews are also conducted by OEL's Financial Administration and Budget Services Unit on selected coalition expenditures to determine the allowability of reimbursed expenditures as a complement to the monthly invoice submission process and annual financial monitoring activities. These desk reviews select a limited number of sample items from administrative, quality and other non-direct service expenditures.

**Programmatic Monitoring**

OEL's Program Integrity Unit includes an Accountability section (AS) that conducts ongoing programmatic reviews for each early learning coalition and RCMA. This review process addresses compliance with the School Readiness Program. This is completed with a three-phase approach:

1. **Biennial Accountability Review** - AS staff conduct an onsite or desk review of each coalition which includes Governance, Operations, Educational Service Delivery, Child Care Resource and Referral, Data Security, and Data Accuracy (which includes data edit reports related to eligibility and standard billing group codes). When onsite, OEL staff also conduct a provider focus group forum to receive input from local providers and the community.

2. **Eligibility Review** - AS staff conduct these tests on a biennial basis for all ELCs and RCMA. Tests include a random sample of SR and VPK eligibility files and SR and VPK payment validation files.

3. **Quarterly Data Edit Report Review** - Office staff review edit reports related to eligibility and standard billing group codes. Potential errors are identified and shared with the affected coalitions so any needed corrections can be made.

**Internal Control Surveys**

Each early learning coalition and material OEL sub-recipient is responsible for completing an annual internal control questionnaire. The completed questionnaire is submitted to, reviewed by OEL Program Integrity staff and used as part of the annual financial monitoring process by OEL’s contracted monitors.

**Financial Monitoring**
OEL's Program Integrity Unit includes the Financial Management Systems Assurance Section (FMSAS), which is responsible for various financial monitoring tasks of OEL sub-recipients, including the early learning coalitions. OEL contracts for financial monitoring services with a qualified CPA firm licensed to practice within the State of Florida. The CPA firm conducts the annual financial compliance onsite monitoring visits under the direction of OEL staff.

Current financial monitoring tasks are detailed in OEL’s financial monitoring tools and include the following categories (as applicable) for OEL sub-recipients:
- Preventive/Correction Action Plan Implementation.
- Internal Control Environment.
- Cash and Revenue Management.
- OEL Statewide Information System Reporting and Reconciliation.
- Prepaid Program Items.
- Cost Allocation and Disbursement Testing.
- Travel.
- Purchasing.
- Contracting.
- Sub-recipient Monitoring.

8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency.

Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

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

- Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
- Run system reports that flag errors (include types)
Describe:
Gold Seal Edit Report
SR Duplicate Record
CCRR Standard Code Edit Report
CCMS Standard Code Edit Report
CRLV Care Level Standard Code Edit Report
OCA Standard Code Edit Report
Purpose for Care Report
Childs age => 13 excludes SN Teens
Active SR files with SSA/SSI income
Income Type Standard Code Edit Report
Care Level Too Low for Age
FTFT Childcare
Total Family Income Exceeds 200%
Provider Cleansing Report
Parent Cleansing Report
Over 20 - Payment Days Greater Than Total Work Days

- Review of enrollment documents, attendance or billing records
- Conduct supervisory staff reviews or quality assurance reviews
- Audit provider records
- Train staff on policy and/or audits
- Other.

Describe:

☐ None.

Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

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

- Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
Run system reports that flag errors (include types)

Describe:
Gold Seal Edit Report
SR Duplicate Record
CCRR Standard Code Edit Report
CCMS Standard Code Edit Report
CRLV Care Level Standard Code Edit Report
OCA Standard Code Edit Report
Purpose for Care Report
Childs age => 13 excludes SN Teens
Active SR files with SSA/SSI income
Income Type Standard Code Edit Report
Care Level Too Low for Age
FTFT Childcare
Total Family Income Exceeds 200%
Provider Cleansing Report
Parent Cleansing Report
Over 20 - Payment Days Greater Than Total Work Days

Review of enrollment documents, attendance or billing records
Conduct supervisory staff reviews or quality assurance reviews
Audit provider records
Train staff on policy and/or audits
Other.
Describe:

None.
Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

8.1.5 Which activities (or describe under "Other") the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory?
The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under "Other") the Lead Agency will use for unintentional program violations?

- Require recovery after a minimum dollar amount in improper payment.

  Identify the minimum dollar amount:

- Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)

- Recover through repayment plans

- Reduce payments in subsequent months

- Recover through State/Territory tax intercepts

- Recover through other means

- Establish a unit to investigate and collect improper payments.

  Describe:

  OEL established the Office of Inspector General, which consists of the Inspector General and Investigator.

- Other.

  Describe:

  Recovery of improper payments that are caused by UPVs or administrative errors is typically done at the local early learning coalition level in accordance with OEL Program Guidance 240.01 and Rule 6M-4.400 (6)(7), FAC, which instructs the coalitions how to manage funding when addressing audit and monitoring disallowances, refunds and court ordered restitution. Improper payments are then forwarded to OEL, if applicable.

- None.

  Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines

b) Check which activities the Lead Agency will use for intentional program violations or fraud?
☑ Require recovery after a minimum dollar amount in improper payment.

Identify the minimum dollar amount: $1.00

☑ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)

☑ Recover through repayment plans

☑ Reduce payments in subsequent months

☐ Recover through State/Territory tax intercepts

☐ Recover through other means

☑ Establish a unit to investigate and collect improper payments.

Describe composition of unit below

OEL established the Office of Inspector General, which consists of the Inspector General and Investigator.

☑ Other.

Describe:

For IPVs, s. 1002.84(17), F.S., requires OEL to implement an anti-fraud plan to address the detection, reporting and prevention of overpayment, abuse and fraud relating to the provision of and payment for the School Readiness Programs. Section 1002.91(8), F.S., also requires the local early learning coalitions to adopt an anti-fraud plan, to be approved by OEL, which addresses the items previously mentioned above. Rule 6M-9.400, FAC, further delineates the responsibilities of coalitions when implementing their anti-fraud plans. The anti-fraud plan must be approved by the coalition board prior to submission to OEL’s Office of Inspector General no later than June 30 of each year. OEL will process the plan no later than September 1 of each year and shall notify the coalition in writing of approval or disapproval and the reasons for disapproval. If disapproved, a corrected plan shall be submitted no later than November 1 of each year.

☐ None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, include action steps and completion timelines:

c) Check which activities the Lead Agency will use for administrative error?
Require recovery after a minimum dollar amount in improper payment.

Identify the minimum dollar amount:

- Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- Recover through repayment plans
- Reduce payments in subsequent months
- Recover through State/Territory tax intercepts
- Recover through other means
- Establish a unit to investigate and collect improper payments.

Describe composition of unit below:

The OEL established the Office of Inspector General, which consists of the Inspector General and Investigator.

Other.

Describe:

Recovery of improper payments that are caused by UPVs or administrative errors is typically done at the local early learning coalition level in accordance with OEL Program Guidance 240.01 and Rule 6M-4.400 (6)(7), FAC, which instructs the coalitions how to manage funding when addressing audit and monitoring disallowances, refunds and court ordered restitution. Improper payments are then forwarded to OEL, if applicable.

For disallowances, overpayments, improper payments, or refunds (excluding court ordered restitution) involving **current year** grant funds, the coalition must:

- Reduce or "offset" the next monthly Reimbursement Request Invoice with the amount of repayment due from the coalition.
- Enter the amount of disallowance or refund as a reduction to the OCA originally impacted by the expenditure.
- Include a written explanation indicating that the Reimbursement Request Invoice reflects a reduction because of a disallowance or refund referenced in the supporting documents provided.

For disallowances, overpayments, improper payments, or refunds involving prior year grant funds and for refunds resulting from court-ordered restitution payments involving either current year or prior year grant funds, the following procedure must be followed:

- Remit a check, made payable to the Office of Early Learning, for the refunded amount with the Reimbursement Request Invoice(s).
- Indicate which fiscal year (prior or current year) the refund is to be credited to on the Reimbursement Request Invoice.
- Submit documents that explain the reason for the refund and the OCA originally impacted along with the Reimbursement Request Invoice.
None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

☐ Disqualify client.

If checked, please describe, including a description of the appeal process for clients who are disqualified:

Rule 6M-9.400, FAC, requires the coalition to provide written advance notice of the intended action to suspend or terminate benefits to the recipient to be affected and it must clearly advise of the allegations, the basis of the allegations, the intended action and the date the action is to be imposed. The coalition shall send the written advance notice at least 14 calendar days before the intended action. The length of time for which the recipient's benefits are suspended or the date of the termination of benefits shall be proportionate to the alleged offense committed, consistent with suspensions or terminations issued to other recipients who allegedly committed comparable offenses, and may also consider prior offenses, as appropriate. A suspension or termination shall not be applied against recipients with a valid at-risk referral. If the recipient believes that the issue was not resolved by the coalition, the recipient may file a formal written appeal for review by the executive director of the coalition that must be postmarked or emailed before the date of the intended action, whichever is later. If the recipient files a timely appeal, he or she will not be suspended or terminated from the program until the written decision of the executive director or the original date of the intended action, whichever is later.

The executive director of the coalition or other executive staff person designated by the coalition board must respond to the recipient, in writing, within 30 days of receiving the appeal with a decision as to whether the suspension or termination will be upheld or
modified. The recipient who wishes to appeal the decision of the executive director of the coalition or other executive staff person designated by the coalition board may request further review by an appeals committee with 10 calendar days of the date of the executive director or other executive staff person designated by the coalition board's written response to the recipient's formal written appeal. The appeals committee shall be convened within 45 calendar days of receipt of the recipient's request for an appeal. The appellant shall be notified in writing of the appeals committee's determination within 10 days of the date of the meeting. The determination of the appeals committee shall be final.

☑ Disqualify provider.

If checked, please describe, including a description of the appeal process for providers who are disqualified:

In accordance with s. 1002.91 (4), F.S., the coalition may suspend or terminate the provider from participating in the School Readiness Program when it has reasonable cause to believe that the provider has committed fraud. If suspended, the provider shall remain suspended until the completion of any investigation by OEL, the Department of Financial Services (DFS), or any other state or federal agency, and subsequent prosecution or other legal proceeding. The provider may request in writing a review of the determination made by the coalition within five business days of receipt of notice of the determination, which the provider believes to be incorrect. If the coalition receives a request for a review hearing from the provider, the coalition must address the request by assigning a review hearing committee within three days of the request and send a written response to the provider within five days of the request. The hearing must convene within 45 days of the request. Within five business days of receipt of the response to a request for a review hearing, the provider must inform the coalition of preferred date and time of the hearing and whether the provider will meet in person or via a method of telecommunication. Following completion of the presentation by the provider and the coalition, the review hearing committee will vote regarding each of the provider's claims. A written notice of the review hearing conclusion is given to the provider that states the outcome of each of the provider's claims and reasons supporting the committee's decision. The decision of the Review Hearing Committee is final.

☑ Prosecute criminally

☑ Other.
Describe:

Parents and providers suspected of fraudulent activities are referred to the Office of Inspector General for staff to validate the referral within 48 hours of entry into the fraud referral system. If warranted, the referral is then submitted to DFS for further investigation. If there is enough evidence to support legal action then restitution and or criminal penalties could be imposed which may include removal from the School Readiness Program.