

Nevada 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 Nevada 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 Nevada 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 Nevada CCDF Plan - The Plan describes the CCDF program to be administered by Nevada 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 Nevada 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.*



ADMINISTRATION FOR
CHILDREN & FAMILIES

330 C Street, S.W., Washington DC 20201 | www.acf.hhs.gov

June 13, 2016

Richard Whitley, Director
Nevada Department of Health and Human
4126 Technology Way, Suite 100
Carson City, Nevada 89706-2009

Dear Richard Whitley, Director:

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 Nevada 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 Nevada 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 Equal Access (4.4.2) has 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. Nevada 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 Nevada 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 Gwendolyn Jones, Acting Child Care Program Manager, Office of Child Care at (214)767-3849 or gwendolyn.jones@acf.hhs.gov. Thank you for all you do each day for children and families.

Sincerely,

Rachel Schumacher
Director
Office of Child Care

cc: Jack Zenteno, Chief, Child Care and Development Program
Gwendolyn Jones, Acting Regional Program Manager, Office of Child Care
Region IX

Child Care and Development Fund (CCDF) Plan For Nevada 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: [Nevada Department of Health and Human Services](#)

Address of Lead Agency: [4126 Technology Way, Suite 100, Carson City, Nevada 89706-2009](#)

Name and Title of the Lead Agency Official: [Richard Whitley, Director](#)

Phone Number: [775-684-4000](#)

E-Mail Address: nvdhhs@dhhs.nv.gov

Web Address for Lead Agency (if any): <http://www.dhhs.nv.gov>

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: [Jack Zenteno](#)

Title of CCDF Administrator: [Chief, Child Care and Development Program](#)

Address of CCDF Administrator: [1470 College Parkway, Carson City, Nevada 89706](#)

Phone Number: [775-684-0630](tel:775-684-0630)

E-Mail Address: jzenteno@dwss.nv.gov

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

Name of CCDF Co-Administrator:

Title of CCDF Co-Administrator:

Phone Number:

E-Mail Address:

Description of the role of the Co-Administrator:

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any): [775-684-0500](tel:775-684-0500)

Web Address for CCDF program (for the public) (if any): dwss.nv.gov

Web Address for CCDF program policy manual (if any):
<https://dwss.nv.gov/pdf/ChildCareManual.pdf>

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

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 Health and Human Services, Division of Welfare and Supportive Services, Child Care and Development Program](#)

Name of Lead Contact [Jack Zenteno](#)

Subsidy/Financial Assistance (section 3 and section 4)

Agency/Department/Entity [Department of Health and Human Services, Division of Welfare and Supportive Services, Child Care and Development Program](#)

Name of Lead Contact [Jack Zenteno](#)

Licensing/Monitoring (section 5)

Agency/Department/Entity [Department of Health and Human Services, Division of Public and Behavioral Health, Child Care Licensing](#)

Name of Lead Contact [Latisha Brown](#)

Child Care Workforce (section 6)

Agency/Department/Entity [Department of Education](#)

Name of Lead Contact [Patti Oya](#)

Quality Improvement (section 7)

Agency/Department/Entity [Department of Education](#)

Name of Lead Contact [Patti Oya](#)

Grantee Accountability/Program Integrity (section 8)

Agency/Department/Entity [Department of Health and Human Services, Division of Welfare and Supportive Services](#)

Name of Lead Contact [Jack Zenteno](#)

[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

Other.

Describe:

Payment rates are set by the:

State/Territory

County.

If checked, describe the type of payment rate policies the county can set

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

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

Other.

Describe:

Other.

List and describe (e.g., quality improvement systems, payment practices):

1.2.2 How is the CCDF program operated in your State/Territory?

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

a) Who determines eligibility?

CCDF Lead Agency

TANF agency

Describe.

Other State/Territory agency.

Describe.

Local government agencies such as county welfare or social services departments

Describe.

Child care resource and referral agencies

Describe.

Community-based organizations

Describe.

Eligibility rules are set by the lead agency and eligibility determination and case management is provided by the Children's Cabinet in northern and rural Nevada and the Las Vegas Urban League in southern Nevada.

Other.

Describe.

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

CCDF Lead Agency

TANF agency

Describe.

Other State/Territory agency.

Describe.

Local government agencies such as county welfare or social services departments

Describe.

Child care resource and referral agencies

Describe.

Community-based organizations

Describe.

The Lead Agency subgrants these services In northern and rural Nevada to the Children's Cabinet and in southern Nevada they are subgranted to the Las Vegas Urban League. All contractors are required to adhere to the program policies reflected in the Nevada Child Care Policy Manual and oversight is accomplished through a variety of auditing processes including Management Evaluations to review contractor cases and ensure the policy manual is adhered to, and Quality Control reviews, conducted by Quality Control staff, to ensure adherence to Federal policy.

Other.

Describe.

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.

In northern and rural Nevada, these processes are subgranted to Children's Cabinet and in southern Nevada they are subgranted to the Las Vegas Urban League.

Other.

Describe.

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)(1)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

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

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

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

Describe:

CCDP staff and contractors have been working to draft the State Plan since the initial draft release in spring of 2015. State staff and contractors have worked through workgroups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. This includes county school district staff and other local government staff, and the information received from stakeholders was used in the drafting of the plan. The draft was then presented to the Southern Nevada

Early Childhood Advisory Committee, which includes staff from the Southern Nevada Health District, and other local government staff, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license exempt providers, professionals with county government and state government, tribal government staff, and a variety of for profit and non-profit organizations.

[REQUIRED IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act).

Describe:

CCDP staff and contractors have been working to draft the State Plan since the initial draft release in spring of 2015. State staff and contractors have worked through workgroups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. The information received from stakeholders was used to draft the plan, and the draft was then presented to the Southern Nevada Early Childhood Advisory Committee, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license exempt providers, professionals with county government and state government, tribal government staff, and a variety of for profit and non-profit organizations.

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

Yes,

No.

If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy

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

Describe, including which Tribe(s) you consulted with

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workgroups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. The information received from stakeholders was used to draft the plan, and the draft was then presented to the Southern Nevada Early Childhood Advisory Committee, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license exempt providers, professionals with county government and state government, tribal government staff including staff linked to the Inter-tribal Council of Nevada, and a variety of for profit and non-profit organizations. The CCDP in Nevada has worked closely with the intertribal council for many years and until 2014 had staff in offices adjacent to tribal areas, staff regularly attended tribal child care meetings, CCDP materials were shared with tribal programs, and the Nevada CCDF administrator worked with tribal CCDF staff. Recently this activity has decreased and CCDP program staff are planning to reach out again to tribal staff to coordinate activities more directly with tribes. By September 30 of 2016 CCDP staff are planning to host a meeting with tribal CCDF staff to present the Nevada State Plan and identify opportunities for further collaboration.

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

State/Territory agency responsible for public education.

Describe:

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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:

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workgroups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. The information received from stakeholders was used to draft the plan, and the draft was then presented to the Southern Nevada Early Childhood Advisory Committee, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license exempt providers, professionals with county government and state government including Nevada Early Intervention Services, tribal government staff, and a variety of for profit and non-profit organizations.

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

Describe:

CCDP staff and contractors have been working to draft the State Plan since the initial draft release in spring of 2015. State staff and contractors have worked through workgroups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. The information received from stakeholders was used to draft the plan, and the draft was then presented to the Southern Nevada Early Childhood Advisory Committee, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license exempt providers, professionals with county government and state government including staff from the University of Nevada, Reno, the University of Nevada, Las Vegas, Western Nevada College, Truckee Meadows Community College, and the College of Southern Nevada, tribal government staff, and a variety of for profit and non-profit organizations.

State/Territory agency responsible for child care licensing.

Describe:

CCDP staff and contractors have been working to draft the State Plan since the initial draft release in spring of 2015. State staff and contractors have worked through workgroups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. The information received from stakeholders was used to draft the plan, and the draft was then presented to the Southern Nevada Early Childhood Advisory Committee, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license exempt providers, professionals with county government and state government including the Nevada Division of Public and Behavioral Health Child Care Licensing staff, tribal government staff, and a variety of for profit and non-profit

organizations.

State/Territory office/director for Head Start State collaboration

Describe:

CCDP staff and contractors have been working to draft the State Plan since the initial draft release in spring of 2015. State staff and contractors have worked through workgroups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. The information received from stakeholders was used to draft the plan, and the draft was then presented to the Southern Nevada Early Childhood Advisory Committee, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license exempt providers, professionals with county government and state government including the Head Start State Collaboration Office, tribal government staff, and a variety of for profit and non-profit organizations.

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

Describe:

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

Describe:

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

Describe:

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draft release in spring of 2015. State staff and contractors have worked through workgroups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. The information received from stakeholders was used to draft the plan, and the draft was then presented to the Southern Nevada Early Childhood Advisory Committee, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license exempt providers, professionals with county government and state government including WIC staff, tribal government staff, and a variety of for profit and non-profit organizations.

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

Describe:

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

Describe:

CCDP staff and contractors have been working to draft the State Plan since the initial draft release in spring of 2015. State staff and contractors have worked through workgroups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. The information received from stakeholders was used to draft the plan, and the draft was then presented to the Southern Nevada Early Childhood Advisory Committee, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license exempt providers, professionals with county government and state government including Home Visitation staff, tribal government staff, and a variety of for profit and non-profit organizations.

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

Describe:

- McKinney-Vento State coordinators for Homeless Education.

Describe:

- State/Territory agency responsible for public health.

Describe:

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State/Territory agency responsible for mental health.

Describe:

CCDP staff and contractors have been working to draft the State Plan since the initial draft release in spring of 2015. State staff and contractors have worked through workgroups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. The information received from stakeholders was used to draft the plan, and the draft was then presented to the Southern Nevada Early Childhood Advisory Committee, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license exempt providers, professionals with county government and state government including the Nevada Division of Public and Behavioral Health, tribal government staff, and a variety of for profit and non-profit organizations.

State/Territory agency responsible for child welfare.

Describe:

CCDP staff and contractors have been working to draft the State Plan since the initial draft release in spring of 2015. State staff and contractors have worked through workgroups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. The information received from stakeholders was used to draft the plan, and the draft was then presented to the Southern Nevada Early Childhood Advisory Committee, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license exempt providers, professionals with county government and state government including the Nevada Division of Child and Family Services, tribal

government staff, and a variety of for profit and non-profit organizations.

State/Territory liaison for military child care programs.

Describe:

State/Territory agency responsible for employment services/workforce development.

Describe:

State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).

Describe:

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State/community agencies serving refugee or immigrant families.

Describe:

Child care resource and referral agencies.

Describe:

Child Care Resource and Referral activities are contracted through subsidy contractors. CCRR staff are involved in day-to-day program development for the CCDP, and were involved in all aspects of drafting and reviewing the CCDF Plan.

Provider groups or associations.

Describe:

Worker organizations.

Describe:

Parent groups or organizations.

Describe:

Other.

Describe:

1.3.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)).

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

a) Date(s) of notice of public hearing: [01/05/2016](#)

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

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

[Public hearing notification was posted at multiple sites throughout Nevada in accordance with Nevada Revised Statutes, including posting on the Division's website:](#)

<https://dwss.nv.gov/>

c) Date(s) of public hearing(s): [02/17/2016](#)

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 [Hearing sites were available in northern and southern Nevada.](#)

e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s) A template of the State Plan was available for viewing on the DWSS website and copies of the plan draft were provided to the public at the southern Nevada ECAC and statewide ECAC meetings, and emailed to interested parties as requested.

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? Information provided by the public was received at the southern Nevada ECAC and statewide ECAC meetings, the public hearing and through direct contact with program staff. This information was reviewed and integrated into the plan as appropriate.

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 Chief of the Nevada Child Care and Development Program sits on the Statewide Early Childhood Advisory Committee for Nevada and each local ECAC provides information to stakeholders through the Statewide and local ECACs.

Working with child care resource and referral agencies.

Describe:

CCR&R agencies in Nevada are The Children's Cabinet in northern Nevada and Las Vegas Urban League in southern Nevada. These two agencies are sub-grantee's of the Lead Agency and are made aware of all programmatic changes and are consulted when the State Plan is developed and implemented.

Providing translation in other languages.

Describe:

Making available on the Lead Agency website.

List the website:

The draft State Plan is posted on the Lead Agency website:

https://dwss.nv.gov/Care/Child_Care_-_Documents_and_Links/

and the Children's Cabinet website: <http://www.childrenscabinet.org/child-care-resources/for-the-community/public-policy/>

Sharing through social media (Twitter, Facebook, Instagram, email, etc.).

Describe:

Providing notification to stakeholders (e.g., provider groups, parent groups).

Describe:

Any major program changes are done through the State's Public Hearing process, which includes public notification of meetings.

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 CCDP in Nevada has contracts in place with the Nevada Department of Education, multiple Head Start and Early Head Start agencies, school-based before and after school programs, and a variety of public and private preschool programs. Interaction with these programs occurs through an ongoing dialog and opportunities to coordinate and improve the quality of services are addressed as identified. With the implementation of the CCDF Reauthorization, the Nevada CCDP is working with these agencies to expand continuity of care through link comprehensive systems to children and developing the quality of care for vulnerable populations.

In January 2015, Nevada received a Federal Pre-k Development Grant with the primary purpose to expand existings seats or add new full-day seats for 4 year olds whose families are below 200% fpl. Full-day services are made possible by braiding funding (i.e. State Pre-k, PDG, Special Ed, and CCDF.)

- [REQUIRED IF APPLICABLE] Tribal early childhood programs.

Describe, including which Tribes coordinating with:

The CCDP in Nevada links coordination through the Nevada Early Childhood Advisory Committee and local ECACs. Local ECACs and other advisory committess have tribal staff that link to the Inter Tribal Council in Nevada, which links to all Nevada tribes.

- 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 Nevada CCDP has contracts in place with Nevada Early Intervention services to expand child care services and increase the quality of services of services for infants and toddlers with disabilities.

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

Describe:

CCDP staff provide outreach to homeless services statewide. Families identified through outreach are provided presumptive eligibility for 90 days, and are provided services under a

self sufficiency purpose of care.

[REQUIRED] Early childhood programs serving children in foster care.

Describe:

The CCDP provides categorical eligibility to children in foster care and work with child welfare agencies to ensure services are high quality and meet the needs of children and foster families.

State/Territory agency responsible for child care licensing.

Describe:

The Nevada CCDP works closely with Child Care licensing to ensure quality services are provided to low-income families and identify opportunities to expand quality services. In Nevada, Licensing is considered the baseline for the QRIS and QRIS staff work with licensing to identify necessary changes within the licensing system.

State/Territory agency with Head Start State collaboration grant.

Describe:

The Nevada Head Start State Collaboration Office operates under the Office of Early Care Learning and Development, which is managed by staff paid for through CCDF funds. All CCDF quality activities in Nevada occur in collaboration with the Head Start Collaboration Office.

State Advisory Council authorized by the Head Start Act.

Describe:

The Nevada Early Child Advisory Council acts as the State Advisory Council for the Head Start act and as the central hub for quality improvement activities within the early childhood system in Nevada. All quality improvement activities are discussed and collaborated with the Council.

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

Describe:

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

Describe:

This partnership has just begun in Nevada. CCDP staff are planning to attend a meeting with

the State Coordinator and local coordinators in April to expand collaborative activities.

Child care resource and referral agencies.

Describe:

In Nevada CCR&R activities occur through the CCDP's major contractors -the Las Vegas Urban League, and the Children's Cabinet. All programmatic activities are done in collaboration with CCRR staff.

State/Territory agency responsible for public education.

Describe:

In 2013 quality activities under the CCDP in Nevada were moved to the Nevada Department of Education as an opportunity to link early childhood with the k-12 system. All activities that occur with the CCDP in Nevada are done in collaboration with the Nevada Department of Education.

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

Describe:

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

Describe:

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

Describe:

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

Describe:

State/Territory agency responsible for implementing the Maternal and 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 CCDP is currently working on a pilot project with the Nevada Division of Public and Behavioral Health to expand the quality of services provided to children served by non-licensed providers.

State/Territory agency responsible for mental health.

Describe:

State/Territory agency responsible for child welfare.

Describe:

State/Territory liaison for military child care programs.

Describe:

State/Territory agency responsible for employment services/workforce development.

Describe:

State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).

Describe:

State/Territory community agencies serving refugee or immigrant families

Describe:

Provider groups or associations.

Describe:

Worker organizations.

Describe:

Parent groups or organizations.

Describe:

Other.

Describe:

1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O))(ii) Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high quality care that meets the needs of children and families. For example, State/Territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a State/Territory may allow county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits (https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014), 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"

Funds are provided through contracts to Head Start/Early Head Start agencies to extend services to a full day for CCDF children.

Which funds will you combine

CCDF and Head Start funds.

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

Extending services to full day.

Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?)

Program level.

How are the funds tracked and method of oversight

Funds are provided through contracts, subgrants, memorandums of understanding, etc.

Contracts and eligibility and service provisions are reviewed through State audit processes.

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.

The Division of Child and Family Services works with licensed child care facilities to provide training and mental health consultants to support child care providers caring for children with potential social/emotional needs.

The Nevada Division of Public and Behavioral Health provides child care licensing to ensure basic health and safety of licensed child care providers. In addition, Nevada Early Intervention Services provides training and technical assistance to licensed child care facilities on the topic of inclusion for children with special needs.

In July of 2014 the Office of Early Care and Education was transferred from the Nevada Division of Welfare and Supportive Services (which houses the CCDP), to the Nevada Department of Education (NDE). This was done as an opportunity to promote, facilitate, and further the goals and objectives for improving early childhood learning and development in Nevada. NDE Staff oversee the State's CCDF quality activities in order to align activities with the State's P-12 education goals.

The Children's Cabinet provides professional development opportunities to both early childhood and out of school providers in an effort to improve the skills and knowledge of the workforce and develop a system of continual quality improvement. Community outreach efforts are provided in order to increase the general public's understanding and demand for high quality early learning opportunities for children. The Early Childhood Support Network provides modeling of high quality teacher interactions with children, and at the same time substitute teachers help licensed child care providers maintain ratios during teacher turnover and absences. Parent engagement supports and encourages parents to advocate for their children by giving them information and skills in supporting them as their children's first and most important teacher.

The Las Vegas urban League provides child care resource and referral consultations services to parents to find high quality child care. Family, Friend, and Neighbor case management and home visitation increase the quality of child care offered by non-licensed providers. Outreach is provided to newly licensed child care providers to increase the supply of providers registered on the subsidy programs.

Wraparound services are provided to a variety of before and after school programs to provide full day services and access to services for school age children.

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 Nevada CCDP subgrants with the Children's Cabinet in northern and rural Nevada and the Las Vegas Urban League in southern Nevada to provide CCRR services](#)

throughout the State. Services include staff and business sites to provide services; parent/family assistance related to child care options; providing information to Spanish speaking customers; coordinating services for children with disabilities; referring parents to child care services; updating child care provider information on a regular basis; developing and maintain referral guides for families; providing assistance to child care providers including training and counseling, outreach to providers, improving the quality of child care settings, assisting providers in developing and/or revising business plans, and recruiting providers to become subsidy providers including working with children with disabilities; providing technical assistance to family, friend, and neighbor providers; coordinating training for providers; assisting providers in maintaining licensing requirements; maintaining case files for providers; educating consumers related to child care resource and referral and quality child care; collecting, analyzing, and disseminating child care related data.

- 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) [09/30/16](#)

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 [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.)

[Statewide disaster planning for child care services began in October 2013. Nevada](#)

received technical assistance from ACF Region IX staff and activities and tasks were identified to further the process. This activity was delayed awaiting statewide processes to be developed that would allow the child care services disaster plan to be integrated into a larger State disaster plan. Because of the deadline, CCDP staff and stakeholders are developing a standalone plan that will be integrated into a statewide plan in the future.

Currently, Child Care staff are reviewing current plan information, expanding and revising information, and expect to have a full draft by July 31, 2016. Once complete, the draft will be distributed to child care centers around Nevada and stakeholder agencies for feedback. This information will be reviewed and integrated into a final plan by 09/30/2016.

Projected start date for each activity: 01/01/2016

Projected end date for each activity: 09/30/16

Agency - Who is responsible for complete implementation of this activity
Nevada Department of Education,

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Child Care Licensing, the Nevada Public Health Preparedness program, the Early Childhood Advisory Council, Child Care Resource and Referral agencies, Las Vegas Urban League, The Children's Cabinet, child care centers, emergency plan stakeholders.

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

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.)

Statewide disaster planning for child care services began in October 2013. Nevada received technical assistance from ACF Region IX staff and activities and tasks were identified to further the process. This activity was delayed awaiting statewide processes to be developed that would allow the child care services disaster plan to

be integrated into a larger State disaster plan. Because of the deadline, CCDP staff and stakeholders are developing a standalone plan that will be integrated into the statewide plan in the future.

Currently, Child Care staff are developing a plan to ensure continuity of services after a disaster. This includes ensuring data system continuity, identifying potential temporary child care sites, and temporary operating standards. A draft of these activities is expected by July 31, 2016. Once completed, this will be reviewed and discussed with child care centers and other stakeholders, with complete implementation expected by September 30, 2016.

Projected start date for each activity: 01/01/2016

Projected end date for each activity: 09/30/16

Agency - Who is responsible for complete implementation of this activity
Nevada Department of Education, CCDP.

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Child Care Licensing, the Nevada Public Health Preparedness program, the Early Childhood Advisory Council, Child Care Resource and Referral agencies, Las Vegas Urban League, The Children's Cabinet.

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.)

Statewide disaster planning for child care services began in October 2013. Nevada received technical assistance from ACF Region IX staff and activities and tasks were identified to further the process. This activity was delayed awaiting statewide processes to be developed that would allow the child care services disaster plan to be integrated into a larger State disaster plan. Because of the deadline, CCDP staff and stakeholders are developing a standalone plan that will be integrated into the statewide plan in the future, including emergency preparedness training and practice drills. Once details are outlined, CCDP Provider agreements will be

updated to reflect these requirements.

Currently, a draft plan is being developed that includes emergency preparedness training and practice drills. The draft plan is expected to be completed by July 31, 2016. Once completed, the draft plan will be sent to stakeholders for review. Input from stakeholders will be implemented into the document, and the document will be finalized by 09/30/2016.

Projected start date for each activity:

Projected end date for each activity: 09/30/16

Agency - Who is responsible for complete implementation of this activity

Nevada Department of Education

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Child Care Licensing, the Nevada Public Health Preparedness program, the Early Childhood Advisory Council, Child Care Resource and Referral agencies, the Las Vegas Urban League, The Children's Cabinet.

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. 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?)

Contractors in northern and southern Nevada have offices within areas of poverty throughout the State, work with stakeholders to identify populations with high needs, and provide outreach to potentially eligible populations statewide. In addition, CCDP staff have done GIS mapping of the state to identify areas of poverty and is planning to use this information to provide services in these areas.

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.

Information and applications for subsidy assistance is available at all Division of Welfare and Supportive Services offices, which serve individuals and families seeking Medicaid, Temporary Assistance for Needy Families, or Supplemental Nutrition Assistance Program benefits. DWSS offices are strategically located in areas with low-income populations or in proximity to these areas with public transportation available. Information is also made available through partner agencies such as the Division of Child and Family Services and Nevada Early Intervention Services. The Division of Welfare and Supportive Services offers information to the general public regarding applying for services and benefits offered. The Children's Cabinet and the Las Vegas Urban League also offer general information about child care subsidies through billboards, radio, newsletters, social media, community outreach events, and other public service announcement opportunities. The application for child care subsidy is also available in all Children's Cabinet and Las Vegas Urban League offices, as well as their websites.

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

Outreach is done through a variety of activities within communities including radio and television slots, website information, and informational brochures that are provided to families.

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

- Electronically via online application, mobile app or email.

Provide link <http://lvul.org/early-childhood-connection/> <https://dwss.nv.gov/http://www.childrencabinet.org/child-care-resources/for-parents/help-paying-for-child-care/>

- In-person interview or orientation.

Describe agencies where these may occur:

[DWSS district offices Statewide, Children's Cabinet and Las Vegas Urban League Offices.](#)

- 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:

- 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:

- 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:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with to complete implementation of this activity

2.2.2 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 Children's Cabinet and Las Vegas Urban League offer child care resource and referral consultation services in the family's native language by phone, in person, and through an online referral system. Child care licensing entities, Washoe County and the State of Nevada, offer lists of licensed child care providers. The State's Quality Rating and Improvement System website offers lists of licensed child care centers along with their participation and star rating. The Children's Cabinet and Las Vegas Urban League also offer general information about child care resource and referral services through billboards, radio, newsletters, social media, community outreach events, and other public service announcement opportunities.

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

Written materials, phone consultation, public service announcements, direct interaction with families.

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

Information is provided through agencies including the Division of Welfare and Supportive

Services, State Child Care Licensing and Washoe County Child Care Licensing, Child Care Resource and Referral Agencies, the Division of Child and Family Services, and Nevada Early Intervention Services.

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

Quality Rating and Improvement System star ratings are included on all child care resource and referral provider listings. The State's Quality Rating and Improvement System website offers lists of licensed centers, along with their participation and star rating. The Children's Cabinet and Las Vegas Urban League also offer general information about child care resource and referral services through billboards, radio, newsletters, social media, community outreach events, and other public service announcement opportunities. Child Care Licensing also provides information on high quality centers, and plans to provide links to this information when the consumer website is completed.

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

Information is provided in written materials, on website, through direct interaction with the public, as well as outreach through social media, and public service announcements.

c) Describe who you partner with to make information about child care quality available Agencies including the Nevada Department of Education, the Nevada Association for the Education of Young Children, State and local advisory committees, Nevada Early Intervention Services, the Children's Cabinet, and the Las Vegas Urban League, and State Child Care Licensing.

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)

The CCDP in Nevada is co-located with the State's TANF agency. Parents are informed of potential eligibility for other programs at the time of intake, redetermination, and as needs are identified. The Division of Welfare and Supportive Services website offers information about applying for a variety of programs. The Children's Cabinet and Las Vegas Urban League also offer information about these services through their individual websites and through direct interaction with families.

b) Head Start and Early Head Start Programs

The Nevada CCDP contracts with nearly all Head Start and Early Head Start programs in Nevada. Each of these agencies is provided education of the programs available and provides referral information as necessary.

c) Low Income Home Energy Assistance Program (LIHEAP)

The CCDP in Nevada is co-located with the State's LIHEAP program. Information about each available program is provided to all clients/applicants.

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

The CCDP in Nevada is co-located with the State's SNAP agency. Information about each available program is provided to all clients/applicants

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

In southern Nevada CCDP activities are contracted through the Las Vegas Urban League, which also provides WIC services. These agencies work together to provide necessary information and referrals.

f) Child and Adult Care Food Program(CACFP)

Child Care staff and Child Care Resource and Referral staff provide information and referrals to parents.

g) Medicaid

The CCDP in Nevada is co-located with the State's Medicaid eligibility agency. Information about each available program is provided to all clients/applicants

h) Children's Health Insurance Program (CHIP)

The CCDP in Nevada is co-located with the State's Medicaid eligibility agency. Information about each available program is provided to all clients/applicants

i) Individuals with Disabilities Education Act (IDEA)

Child Care staff and Child Care Resource and Referral staff provide information and referrals to parents.

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten)

Child Care Resource and Referral staff are aware of available programs statewide and refer families as appropriate.

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)

CCRR staff provide information and referrals to programs statewide.

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&Routreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc?

a) Temporary Assistance for Needy Families (TANF)

Information materials are provided to clients and providers upon enrollment and through phone consultation. Information is available on the Children's Cabinet and Las Vegas Urban League websites.

b) Head Start and Early Head Start Programs

Information materials are provided to clients and providers upon enrollment and through phone consultation. Information is available on the Children's Cabinet and Las Vegas Urban League websites.

c) Low Income Home Energy Assistance Program (LIHEAP)

Information materials are provided to clients and providers upon enrollment and through phone consultation. Information is available on the Children's Cabinet and Las Vegas Urban League websites.

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

Information materials are provided upon enrollment and through phone consultation with

providers. Information is available on the Children's Cabinet and Las Vegas Urban League websites.

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

Information materials are provided upon enrollment and through phone consultation with providers. Information is available on the Children's Cabinet and Las Vegas Urban League websites.

f) Child and Adult Care Food Program(CACFP)

Information materials are provided upon enrollment and through phone consultation with providers. Information is available on the Children's Cabinet and Las Vegas Urban League websites.

g) Medicaid

Information materials are provided upon enrollment and through phone consultation with providers. Information is available on the Children's Cabinet and Las Vegas Urban League websites.

h) Children's Health Insurance Program (CHIP)

Information materials are provided upon enrollment and through phone consultation with providers. Information is available on the Children's Cabinet and Las Vegas Urban League websites.

i) Individuals with Disabilities Education Act (IDEA)

Information materials are provided upon enrollment and through phone consultation with providers. Information is available on the Children's Cabinet and Las Vegas Urban League websites.

j) Other State/Federally Funded Child Care Programs (example-State Pre-K)

Information materials are provided upon enrollment and through phone consultation with providers. Information is available on the Children's Cabinet and Las Vegas Urban League websites.

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)

Information materials are provided upon enrollment and through phone consultation with providers. Information is available on the Children's Cabinet and Las Vegas Urban League websites.

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

The Children's Cabinet and the Las Vegas Urban League provide parents with the Ages and Stages questionnaire and the Ages and Stages Social Emotional questionnaire in order to allow parents to screen for developmental delays. Additionally, parents will be given Nevada's Milestone Moments booklet, developed by Nevada's Learn the Signs, Act Early program. These materials are available in English and Spanish.

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

Written materials, direct communication with families, website based resources.

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

Nevada Department of Education, licensed, non-licensed, and licensed exempt child care providers, Nevada Early Intervention Services, Nevada Home Visitation program, Child Care Resource and Referral agencies.

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

The Ages and Stages Social Emotional questionnaire is provided to parents upon request, and a consumer education "bundle" that includes this information is provided to all CCRR and subsidy clients.

Nevada PEP provides TACSEI information, training and materials to families from birth to early childhood programs to encourage families to partner with professionals that provide services to their children. Using the Backpack series and Positive Solutions for Families, we are helping parents and professionals recognize the value of teaching children social emotional skills. Helping parents form relationships with private and public schools provides a basis for stronger parent engagement practices that can sustain families involvement in their children's education.

ii. Providers

A Policy Statement on Pre-k Expulsion and suspension has been drafted and is available. The policy is going through a formal approval process with the Nevada Early Childhood Advisory Committee. It is expected that this information will be available to providers in Spring of 2016.

iii. General public

Child Care contractors provide information to the public through a variety of media and public information campaigns.

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

Nevada Department of Education, The Children's Cabinet, Las Vegas Urban League, and TACSEI Statewide Leadership team.

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

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

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

List the Lead Agency policy citation(s) and:

[These activities are not specifically outlined in CCDF policy.](#)

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

[The Nevada Learn the Signs Act Early \(NvLTSAE\) project, in conjunction with several](#)

agency partners including The Children's Cabinet, has customized the Centers for Disease Control's (CDC) Milestone Moments: Learn the Signs. Act Early. booklet. This booklet uses milestones as a basic screening with specific signs of developmental delays by age. The booklet has milestones and signs of developmental delays for children ages 2 months, 4 months, 6 months, 9 months, 1 year, 1.5 years, 2 years, 3 years, 4 years, and 5 years. Nevada has received approval from the CDC to include milestone moments for 6-years-olds. The expanded booklets is in the final stages for formatting and will be printed this year. The booklet is available in English and in Spanish.

Information is also on the Nevada Act Early website: <http://www.nevadaactearly.org/>
For each age period in the booklet, milestones are provided by developmental area in addition to activities parents and caregivers can do to support development and specific signs of developmental delay. The booklet prompts parents and caregivers to contact the child's doctor and/or contact early intervention if any of the signs are identified. The contact information for Nevada Early Intervention and Child Find by School District is provided in the back of the booklet. Additional resources are including programs such as EPSDT are also provided.

This booklet is handed out to all parents when they register for the Subsidy program. Additionally, information on ASQ and ASQ-SE screeners is provided to parents along with the screening tool for each child by age.

To assist with screening in early childhood settings, eight videos modules are being developed for child care providers in identifying common disabilities in young children. The Children's Cabinet participates on the team responsible for video development. Eventually all modules will be on the www.nevadaactearly.org website and all modules will be Nevada Registry Approved.

What is autism? available: <https://vimeo.com/93428598>

2 Modules: Developmental Screening: Ages & Stages, Milestone Booklet, M-CHAT, Milestone Booklet

Referral & diagnostic process

Strategies for inclusion

IFSP-IEP info and process

Review of other neurodevelopmental disabilities that might look like autism

Challenging behavior

Child Care Licensing requires (NRS 432A.077) licensed facilities to develop a written assessment plan. In addition to a plan, within 3 months after a child enrolls in the facility, assess the child by use of, without limitation, portfolios, observations, checklists, rating

scales and screening tools. Such an assessment must be repeated biannually thereafter to monitor and support the learning and development of each child enrolled in the facility.

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

This Milestones Moments booklet is handed out to all parents when they register for the Subsidy program. Additionally, information on ASQ and ASQ-SE screeners is provided to parents along with the screening tool for each child by age. Parents are encouraged to return the screener for scoring or can score the screener themselves. Upon redetermination, parents are given a new screener for their child's age.

Parents are also referred to other State resources including EPSDT, and can also access the milestones and early warning signs of several disabilities on the www.nevadaactearly.org website.

Nevada Early Intervention Services (NEIS) partners with licensed facilities to place infants and toddlers who are eligible for Part C IDEA services in child care for up to six hours a week. The purpose of the program is to be able to provide services in natural settings and increase the social-emotional development of children who may not be participating in other activities with children of the same age. As part of this partnership NEIS offers ASQ developmental screenings to all families at the facility. This program is funded with CCDF Quality Funds.

- 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 to complete implementation of this activity

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

Nevada has not formalized definition of substantiated parental complaint. In Nevada, substantiated complaints are based on completed investigations with evidentiary support that a violation has been committed.

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)

Per NRS432A.178 all facilities are mandated to keep copies of all complaints within their facility and make it available to parents upon request. Child Care Licensing investigates all complaints and keep all investigated complaints for 3 years.

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

All facilities are mandated to keep copies of all investigated complaints on file within their facility and make it available to parents upon request. The public is also able to contact child care licensing via phone, fax or email for complaint information. Child Care Licensing

provides verbal feedback and provides copies of the complaints as needed.

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

All allegations reported are assessed and prioritized through a scope of severity by Child Care Licensing supervisors and managers for any violation involving the safety, health or well-being of the children they serve.

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

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

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

- None

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

Most materials are provided in English and Spanish, which covers 93% of families in Nevada. Other interpretive services are available as needed through the Children's Cabinet

and the Las Vegas Urban League.

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

Information and applications for subsidy assistance is available at all Division of Welfare and Supportive Services offices, which serve individuals and families seeking Medicaid, Temporary Assistance for Needy Families, and Supplemental Nutrition Assistance Program benefits. DWSS offices are strategically located in areas with low-income populations or in proximity to areas with public transportation available. Information is also made available through partner agencies such as the Division of Child and Family Services and Nevada Early Intervention Services. The Division of Welfare and Supportive Services offers information to the general public regarding applying for services and benefits offered. The Children's Cabinet and the Las Vegas Urban League also offer general information about child care subsidies through billboards, radio, newsletters, social media, community outreach events, and other public service announcement opportunities. The application for child care subsidy is also available in all Children's Cabinet and Las Vegas Urban League offices, as well as their websites.

Outreach is also conducted through radio and television slots, website information, and information brochures that are provided to families. All program offices are accessible for persons with disabilities, and program staff provide assistance to all clients as necessary.

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) [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

[The Child Care Licensing program has begun development of a consumer education website. This includes electronic inspections and complaints for consumers and providers. Information on injuries, fatalities, and complaints is in process and information related to criminal background checks is in process. It is currently expected that by July 1, 2016 an administrative assistant will be hired and this position will have the responsibility to input this information into the website.](#)

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.)

[Nevada Child Care Licensing will be responsible for development and ongoing updates to the website that will provide this information. Child Care Licensing currently has a website that provides public information, and this will be expanded to include all required information. Child Care staff have modified agreements with Child Care Licensing to include additional administrative staff that will be responsible for website development and updates beginning July 1, 2016. Based on current information from Child Care Licensing, this site will be revised and updated with new requirements by 09/30/2016.](#)

Projected start date for each activity: [01/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity

[Nevada Child Care Licensing, CCDP](#)

Partners - Who is the responsible agency partnering with to complete implementation of this activity

[Washoe County Child Care Licensing](#)

Unmet requirement - Identify the requirement(s) to be implemented [A description of health and safety requirements and licensing or regulatory requirements for child care providers.](#)

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.)

[Nevada Child Care Licensing will be responsible for development and ongoing updates to the website that will provide this information. Child Care Licensing currently has a website that provides public information, and this will be expanded to include all required information. Child Care staff have modified agreements with Child Care Licensing to include additional administrative staff that will be responsible for website development and updates beginning July 1, 2016. Based on current information from Child Care Licensing, this site will be revised and updated with new requirements by 09/30/2016.](#)

Projected start date for each activity: [01/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity

[Nevada Child Care Licensing, CCDP](#)

Partners - Who is the responsible agency partnering with to complete implementation of this activity

[Washoe County Licensing](#)

Unmet requirement - Identify the requirement(s) to be implemented [A description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers.](#)

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.)

[Nevada Child Care Licensing will be responsible for development and ongoing](#)

updates to the website that will provide this information. Child Care Licensing currently has a website that provides public information, and this will be expanded to include all required information. Child Care staff have modified agreements with Child Care Licensing to include additional administrative staff that will be responsible for website development and updates beginning July 1, 2016. Based on current information from Child Care Licensing, this site will be revised and updated with new requirements by 09/30/2016.

Projected start date for each activity: 01/01/2016

Projected end date for each activity: 09/30/1016

Agency - Who is responsible for complete implementation of this activity
Nevada Child Care Licensing, CCDP

Partners - Who is the responsible agency partnering with to complete implementation of this activity

Washoe County Child Care Licensing

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.)

Nevada Child Care Licensing will be responsible for development and ongoing updates to the website that will provide this information. Child Care Licensing currently has a website that provides public information, and this will be expanded to include all required information. Child Care staff have modified agreements with Child Care Licensing to include additional administrative staff that will be responsible for website development and updates beginning July 1, 2016. Based on current information from Child Care Licensing, this site will be revised and updated with new requirements by 09/30/2016.

Projected start date for each activity: 01/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity
Nevada Child Care Licensing, CCDP

Partners - Who is the responsible agency partnering with to complete implementation of this activity

[Washoe County Child Care Licensing](#)

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.)

[Nevada Child Care Licensing will be responsible for development and ongoing updates to the website that will provide this information. Child Care Licensing currently has a website that provides public information, and this will be expanded to include all required information. Child Care staff have modified agreements with Child Care Licensing to include additional administrative staff that will be responsible for website development and updates beginning July 1, 2016. Based on current information from Child Care Licensing, this site will be revised and updated with new requirements by 09/30/2016.](#)

Projected start date for each activity: [01/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity
[Nevada Child Care Licensing, CCDP](#)

Partners - Who is the responsible agency partnering with to complete implementation of this activity

[Washoe County Child Care Licensing.](#)

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 0 (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 18 (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity: A physical or mental condition, which severely limits the child's ability to care for himself/herself, or an emotional condition that places the child or others at risk.



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 18 (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 custodial parent or guardian in the domicile of the custodial parent or guardian who provides primary care and support of the child.

b) in loco parentis -

Adult(s) standing in as parent(s) for children who are in need of supervision or protective services such as a blood relative with custody or a person with court ordered custody, and for families who are in transition.

3.1.3 Eligibility Criteria Based on Reason for Care

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

* working:

An activity in which the parent(s) receive monetary compensation for their services and there is no minimum number of hours required; or a participant in the State TANF NEON work program. There is no minimum hour requirement.

* attending job training

Parent(s) attending vocational school, GED preparation, or an employment preparation program.

* attending education

Parent(s) attending an accredited community college, college, or university program. Enrollment and attendance of six or more credit semester hours is required.

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 -

Services for children who have been abused or neglected or who are at risk of abuse or neglect as determined by a professional in the field, or by a court.

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 -

Any type of payment which is a gain or benefit to a household.

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

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

Describe how many jurisdictions set their own income eligibility limits

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

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	(c) (IF APPLICABLE) \$/month Maximum "Entry" Income Level if lower than 85% Current SMI	(d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI	(e) (IF APPLICABLE) \$/month Maximum "Exit" Income Level if lower than 85% Current SMI	(f) (IF APPLICABLE) % of SMI [Divide (e) by (a), multiply by 100] Income Level if lower than 85% Current SMI
1	2879.98	2447.98	1276.00	44%	2447.98	85%

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	(c) (IF APPLICABLE) \$/month Maximum "Entry" Income Level if lower than 85% Current SMI	(d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI	(e) (IF APPLICABLE) \$/month Maximum "Exit" Income Level if lower than 85% Current SMI	(f) (IF APPLICABLE) % of SMI [Divide (e) by (a), multiply by 100] Income Level if lower than 85% Current SMI
2	3766.12	3201.20	1726.00	46%	3201.20	85%
3	4652.27	3954.43	2177.00	47%	3954.43	85%
4	5538.41	4707.65	2628.00	47%	4707.65	85%
5	6424.57	5460.88	3078.00	47%	5460.88	85%

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](http://aspe.hhs.gov/poverty/index.cfm) are available at <http://aspe.hhs.gov/poverty/index.cfm>.

c) SMI Source and year 2015 <http://www.gpoaccess.gov/fr/search.html>

d) These eligibility limits in column (c) became or will become effective on: [10/01/2015](#)

e) Provide the link to the income eligibility limits
<https://dwss.nv.gov/pdf/ChildCareManual.pdf>

3.1.5 Graduated Phase-Out of Assistance

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

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

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

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

Clients are made eligible based on household size and countable income. As household income increases families can continue receiving assistance with a higher co-payment until they reach 85% of the State Median Income . Child Care Policy Manual section 540 (reapplications) states " If the new income projection reduces the household to a subsidy percentage that is not currently being served because of funding shortages, but remains under 85% of SMI, eligibility will continue for an additional 365 days at the new subsidy percentage."

- 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)

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:

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

3.1.6 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

Case managers process income based on the best available information. In instances when a monthly history does not provide a clear representation of the household's income a history of up to 365 days can be evaluated. Child Care Policy Manual 301 states:

When calculating a household's income, factors such as irregular and unpredictable income should be considered and a best estimate of the household's annual income should be used to determine eligibility. Using a 30 day history of actual income to determine a best estimate of future income is the most common budgeting method; however other methods should be used when they provide a better representation of the household's income.

- 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 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

3.1.7 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:

Verification of identification is required. Once identification has been verified, it no longer needs to be requested with subsequent applications. Possible sources of verification include (not all inclusive) birth certificate, driver's license, state ID card, Military ID, etc.

Applicant's relationship to the child.

Describe:

Relationship must be established for all members of the child care household to determine the appropriate household size and countable income. Verification of relationship of required household members is required. Once relationship has been verified, it no longer needs to be requested with subsequent applications, unless a change in relationship has been reported/discovered (i.e. marriage, divorce, adoption, etc.). Possible sources of verification are (not all inclusive) birth certificates, legal court documents, adoption records, hospital records, share/match data from other programs (e.g. TANF, SNAP, Medicaid), etc.

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

Describe:

Verification of child's age, citizenship, and immunizations is required. For age and citizenship, possible sources of verification include (not all inclusive) birth certificates, hospital or public health birth record, adoption papers, school records, share/match data from other programs (e.g. TANF, SNAP, Medicaid), etc.

Work.

Describe:

Current verification of purpose of care is required at application, reapplication, and any time a change in purpose of care occurs. Possible sources of verification include (not all inclusive) a letter from employer, NEON Child Care Referral, etc.

Job Training or Educational Program.

Describe:

Current verification of purpose of care is required at application and reapplication. Possible sources of verification include (not all inclusive) a letter from employer, NEON Child Care

Referral, etc.

Family Income.

Describe:

Current verification of countable income is required at initial application, reapplication, and when a change is reported .

Household composition.

Describe:

The applicant's statement of household composition is accepted unless the case manager has reason to question it, in which case verification would be requested. Possible sources of verification include (not all inclusive) a copy of lease with all household members listed, statement from non-relative listing all household members, share/match data from other program (e.g. TANF, Medicaid, SNAP), etc.

Applicant Residence.

Describe:

Rent/Mortgage receipt listing the client's name and current physical address; Current utility statements/receipts (electric, gas, telephone, cable, etc.) as long as the client's name and current physical address are listed on the document; Current statement from non-relative landlord not living in the home; Valid Nevada Driver's License or Department of Motor Vehicles ID Card with current physical address; Current employer's statement or records (e.g., client's physical address listed on pay stub or Employment Verification form); Valid foster parent license; Current CPS placement letter as long as the placed children are still in the home; NOMADS printout which lists the current physical address and verifies household members are currently receiving TANF, SNAP and/or Medicaid.

Other.

Describe:

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

educational standards which may include pre-k settings
(<http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01>).

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

Time limit for making eligibility determinations.

Describe length of time :

Policy requires an eligibility decision to be made within thirty (30) calendar days after a completed and signed application is received in the program office. The day after the date the application is received in the program office is the first day of the 30-day period.

Track and monitor the eligibility determination process

Other.

Describe:

Management Evaluations are completed by DWSS program staff to ensure adherence to timeliness policy. Subgrantees and DWSS Quality Control perform internal audits on individual case files.

None

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

Per CCDF regulations, Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization. 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:

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

"appropriate child care":

[Child care chosen by the parent that offers developmentally appropriate practices that meet the needs of that parent and child.](#)

"reasonable distance":

[A parent should not have to travel more than 30 minutes to drop-off or pickup their child from the child care provider's location.](#)

"unsuitability of informal child care":

[Informal child care is unsuitable if it is not provided legally, or does not meet basic health and safety standards as outlined in the Child Care Policy Manual. If circumstances exist that may cause possible abuse, neglect or harm to children as outlined in county ordinances and/or state statutes; and/or if the arrangements do not support the working schedule of a parent, are not affordable, not easily accessible, or do not meet quality standards as defined by the parent.](#)

"affordable child care arrangements":

[Affordable child care is child care that does not exceed 15% of the parent's gross income.](#)

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:

[Nevada Division of Welfare and Supportive Services Eligibility and Payments Manual section 816.2](#)

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": A special need is defined as a physical or mental condition, which severely limits the child's ability to care for himself/herself, or an emotional condition that places the children or others at risk and describe how services are prioritized:

Children with special needs are given first priority when a wait list is in effect. Child care can take place within the child's home, under special consideration.

- b. Provide definition of "Families with very low incomes": One hundred percent of federal poverty level and below.

and describe how services are prioritized:

Families at the lowest income levels on the State's income sliding fee scale are given priority when funding is limited. Waiting lists are imposed at higher income levels first.

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) Families in the TANF/NEON program are served with reduced eligibility verification requirements and within a seven day application processing standard. Co-payments are waived for TANF/NEON households.

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)l)(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

Homeless families receive presumptive eligibility for the first 90 day period in order to acquire any missing adult and child required documentation. Outreach is provided by CCDF contractors statewide. Families can receive services under a self-sufficiency purpose of care.

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

Outreach is provided by CCDF contractors statewide. This includes meeting with staff at homeless shelters to educate them on the CCDF and provide referral information and direct intervention with clients.

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 requirements for CCDF can be waived for 90 days and additionally through special consideration to the Child Care Chief.

- 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

Child Care Manual Section 165. Parents are not required to report any temporary changes including temporary job loss or temporary change in participation in a training or education activity until eligibility redetermination, unless the change takes them over 85% of SMI and makes them ineligible for the program. Employed NEON participants transition into the At-Risk program with a 365 day certificate. NEON clients involved in job search activities will be given 90 days under Job Search. A Policy Transmittal clarifying this process will be released by July 1, 2016.

- 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 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

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

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

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

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

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

- Yes, the State/Territory terminates assistance prior to 12 months due to parent's loss of work or cessation of attendance at a job training or education program ONLY.
List the Lead Agency's policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs
- 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

[Child Care Manual Section 540. Applications and other required documentation may be submitted in person, by mail, email, or fax. Reapplications for TANF/NEON clients are submitted by DWSS workers directly to child care eligibility workers without requiring additional verification from parents. Eligibility for families participating in wraparound services for Early Head Start and Head Start is only redetermined when the child transitions from Early Head Start to Head Start or when the child ages out of Head Start.](#)

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

[3.4 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

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

Family Size	(a) Lowest "Entry" Income Level Where Copayment First Applied	(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(c) What is the percent of income for (b)?	(d) Maximum Highest "Entry" Income Level Before No Longer Eligible	(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(f) What is the percent of income for (e)?
1	981	5% of the State max rate	1.68%	1276.00	20% of the State max rate	5.17%
2	1328	5% of the State max rate	1.24%	1726.00	20% of the State max rate	3.82%
3	1675	5% of the State max rate	0.99%	2177.00	20% of the State max rate	3.03%
4	2021	5% of the State max rate	0.82%	2628.00	20% of the State max rate	2.51%
5	2368	5% of the State max rate	0.70%	3078.00	20% of the State max rate	2.14%

a) What is the effective date of the sliding fee scale(s)? [10/01/2015](#)

b) Provide the link to the sliding fee scale <https://dwss.nv.gov/pdf/ChildCareManual.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:

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 \$

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:

Copay is based on family size and income and is a percentage of the State's maximum reimbursement rate.

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

Describe:

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

Describe:

The Nevada CCDP has reimplemented a sliding fee scale up to 85% of the SMI

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:

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

The 2014 reauthorization of the CCDBG Act is designed to help States and Territories advance improvements to the quality of child care in order to promote the healthy social-emotional, cognitive and physical development of participating children. Ensuring that low-income and vulnerable children can access high-quality care (and remain enrolled to school entry and

beyond) is an equally important purpose of CCDBG. Payment levels and policies have a major impact on access.

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

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

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

4.1 Parental Choice In Relation to Certificates, Grants or Contracts

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

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

The Child Care and Development Program contractors provide fact sheets regarding

choosing a child care provider with each application that includes information related the different provider types. In addition, all parents are encouraged to participate in child care consultation through CCR&R agencies. Parents are informed that they have several options, all of which can be supported in various ways. This information is also shared verbally by the client's case manager, and again by a CCR&R specialist during the child care consultation.

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

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

School-age care before and after school and during school breaks. Wraparound services to provide full-day care to children attending Head Start and Early Head Start.

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.)

School-age care is provided by non-profit agencies including Boys & Girls Clubs and city/county recreational programs. Wraparound services are provided by Head Start and Early Head Start agencies.

the process for accessing grants or contracts

Families apply for subsidy directly through contracted agencies. For Head Start, the subsidy program accepts the Head Start application.

the range of providers available through grants or contracts

Boys & Girls Club, Head Start, and Early Head Start Agencies, City and county parks and recreation programs that provide before & after school programs on school grounds and programming during school breaks.

how rates for contracted slots are set for grants and contracts

When initially developed, the rates were set through a funding formula that included geographical area, their average daily program attendance, and the free and reduced lunch rates of the schools in their service delivery area. This was multiplied by the working population and the result was the number of children that could be funded for each agency. Contract amounts were calculated by using the daily reimbursement rate for the geographical area, type of care, and age of child multiplied by the number of children to be served and then multiplied by the number of days in the year care was provided. This amount was dependent upon the total amount available per geographical area, which was determined based on percentage of overall need. Now, funding is based on this historical precedent, and will be reevaluated as funding comes available in the future.

how the State/Territory determines which entities to contract with for increasing supply and/or improving quality

New contracts are evaluated on a case-by-case basis. For example, the vast majority of school-age care in Nevada is offered by license exempt before and after school programs. These are recreational or non-recreational, operate more than 10 hours per

week, are offered on a continuous basis, provide supervision of children who are school age, and provide regularly scheduled, structured and supervised activities (i.e, Boys & Girls Clubs, City/County Parks and Recreation Safe Key and Latch Key programs). These programs may be offered before and after school, on the weekend, during summer, holiday, and track breaks in the school calendar. Supporting these programs to maintain and build the supply of school-age care is critical in Nevada.

if contracts are offered statewide and/or locally:

Contracts are offered statewide.

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

This requirement is in the provider service agreement. The Service Agreement (IX.B.3) states, "As with all enrolled families, providers will allow unlimited access to parents during normal hours of operation and when children are in the care of the provider."

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:

In-home providers must care for at least two children on the subsidy program to meet this requirement. Providers caring for only one child must care for the child in the provider's own home to meet the FLSA.

Restricted based on provider meeting a minimum age requirement

Describe:

Providers must be 18-years of age to become a family, friend or neighbor provider, regardless of where the care is provided. A government-issued ID is required to verify age.

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

Describe:

An exemption is allowed that the provider may live in the home of a child with special needs (Manual Section 601 and 211 (special needs requirements)).

Restricted to care by relatives

Describe:

Restricted to care for children with special needs or medical condition

Describe:

An exemption is allowed that the provider may live in the home with the child with special needs (Manual Section 601 and 211 -special needs requirements).

Restricted to in-home providers that meet some basic health and safety requirements

Describe:

All Family, Friend, and Neighbor providers must meet the same Health & Safety requirements, regardless of where the care is provided. There are no exemptions for in-

home care. All FFN providers are subject to a health and safety inspection of the care setting within 45 days of enrollment and must meet all mandatory pre-service training requirements within 90 days:

Prevention and control of infectious diseases,

Prevention of sudden infant death syndrome and use of safe sleeping practices

The administration of medication, consistent with standards for parental consent

The prevention of and response to emergencies due to food and allergic reactions

Building and physical premise safety

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)

the handling and storage of hazardous materials and the appropriate disposal of bio contaminants

appropriate precautions in transporting children (for providers that offer transportation)

First aid and cardiopulmonary resuscitation

Nutrition and physical activity (optional)

After the first year, FFN providers are required to take a minimum of 24 hours of early education and child care training annually.

Other

Describe:

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:

An MRS was a conducted between 9/1/2015 through 12/18/2015, with all rates reported as of 11/1/2015. An Alternative Methodology was also conducted to assess the true cost of quality using the Quality Cost Calculator available on the Administration of Children and Families website. The Alternative Methodology was used to determine the difference

between the market and the true cost of quality and whether or not the State can reimburse at the true cost of quality as an incentive to provide higher quality care (3-, 4-, and 5-stars on Nevada's QRIS), care to infants and toddlers, and/or care for children with special needs.

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 State CCR&R agencies (The Children's Cabinet and Las Vegas Urban League) are the entities that collaborate to conduct the market rate survey on behalf of the State. The same survey instrument has been used for the last three surveys. The survey was designed and conducted with guidance from the Study of Market Prices: Validating Child Care Market Rate Surveys (2008). The 2015 instrument was modified to include questions to gather data to input into the Quality Cost Calculator. The instrument was updated by the CCR&R agencies and shared with Children's Advocacy Alliance prior to mailing to all licensed child care providers. Children's Advocacy Alliance conducted the analysis for the Alternative Methodology. The Nevada Early Childhood Advisory Council received an update regarding CCDBG reauthorization, the state plan, and market rate at the April 7, 2015; June 2, 2015; August, 4, 2015; and December 2, 2015 meetings.

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:

100% of the licensed provider market was sent the rate survey on 9/1/2015. Providers were asked to report their rates as of 11/1/2015 to capture any rates changes to take place during the months of September and October.

A multi-point method of contact is utilized to obtain a 65% response rate by provider type (center, family child care, and group family child care) and by county. A minimum 65% response rate of the total population ensures that non-responses are randomly distributed.

The following data collection procedures were used by the CCR&R agencies:

8/14/2015 - A post card was mailed as well as an announcement in the CCR&R e-newsletter one month prior to the survey release. Providers were informed that they will be entered in a raffle for a chance to win a \$100 gift certificate from an early learning vendor (Discount, Lakeshore, Kaplan, etc.) for completing the survey.

9/1/2015-Initial survey was mailed with postage-paid, self-addressed, return envelope to all licensed child care providers in Nevada

9/9/2015-Follow-up postcard was sent to thank the provider if they have already responded to the survey or encourage them to complete the survey.

9/22/2015-Reminder post card sent with contact to obtain an additional survey if needed.

9/22/2015-Telephone calls were made using the phone survey narrative and instrument.

Providers were encouraged to complete the survey over the phone or return the survey that was mailed to them.

10/6/2015-a second survey sent to all non-respondents.

10/13/2015-Six weeks after survey calls resumed - An attempt to gather at least the market rates was made over the phone.

10/23/2015-A third mailing using Priority Mail as the response rate was below 65% in a few rural counties for a family child care.

Calls continued until 12/18/2015 until a 65% return rate was achieved in each county for each provider type (center, family child care, group family child care).

Thank you cards are mailed after surveys are returned.

Raffle is conducted.

All rate data are captured by using NACCRRAware and then exported into MySQL to run

rate analysis by county, care level (age of child), and provider type. All data are shared with the state agency to determine the market rate by geographical area (see below 4.2.4). Analysis was also performed to assess the rates by QRIS star-level.

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):

Nevada's 17 counties are separated into local markets to control for geographical differences in rates: Washoe County (Urban); Clark County (Urban); Carson and Douglas Counties (Rural); Churchill, Elko, Esmeralda, Humboldt, Lander, Lincoln, Mineral, Nye, Pershing, Storey, White Pine (Rural/Frontier)

b) Type of provider:

Provider types are separated into Licensed Center (Over 13 Children), Licensed Family Group Home (7-12 Children), and Licensed Family Child Care (1-6 Children).

c) Age of child:

Rates are separated by Infants (0 up to 1 year); Toddlers (1 year up to 3 years); Preschool (3 years up to 6 years); and School Age (6 years up to 13 years).

d) Describe any other key variations examined by the market rate survey, such as quality level

Rate differences were also assessed by QRIS star level: 1 - Participating/Not Rated (in coaching); 2-Stars; 3-Stars; 4-Stars; and 5-Stars.

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)

11/01/2015

b) Date report containing results were made widely available, no less than 30 days after the completion of the report [12/18/2015](#)

c) How the report containing results was made widely available and provide the link where the report is posted if available

Survey results were shared in the statewide CCR&R e-newsletter that is sent to all licensed providers in the state and other key stakeholders (members of the Nevada Association for the Education of Young Children; Nevada Early Childhood Advisory Council; Child Care Licensing; representatives from other state and local agencies; Elected Officials; parents with children on the subsidy program and those who have received a CCR&R consultation).

The CCR&R Consumer Education packets are updated to include the new rate information. This information is shared with all parents in Nevada who receive a child care consultation through the CCR&R agencies.

Additionally, the rates are available on https://dwss.nv.gov/pdf/CC_FactSheets.pdf
And the CCR&R Agencies Websites:

The Children's Cabinet - <http://www.childrenscabinet.org/child-care-resources/for-parents/help-paying-for-child-care/>

Las Vegas Urban League - Link not currently available.

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

a) Infant (6 months), full-time licensed center care in most populous geographic region

Rate \$ 31 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 8.3

b) Infant (6 months), full-time licensed FCC care in most populous geographic region

Rate \$ 30 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 17.65

c) Toddler (18 months), full-time licensed center care in most populous geographic region

Rate \$ 28 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 5.17

d) Toddler (18 months), full-time licensed FCC care in most populous geographic region

Rate \$ 27 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 9.65

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region

Rate \$ 23 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 3.01

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 26 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 13.93

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

Rate \$ 19 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 4.48

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

Rate \$ 23 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 13.93

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

Infant, toddler, and preschool children -part time is 15 minutes to 4 hours 29 minutes and full time is 4 hours 30 minutes and greater.

For school age children -part time is 15 minutes to 2 hours and 59 minutes and full time is 3 hours or more.

j) Provide the effective date of the payment rates : 2004

k) Provide the link to the payment rates : <https://dwss.nv.gov/pdf/ChildCareManual.pdf>

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

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

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

Tiered rate/rate add-on for non-traditional hours.

Describe:

Tiered rate/rate add-on for children with special needs as defined by the State/Territory.

Describe:

- Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on).

Describe:

- Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory.

Describe:

Programs achieving a 3, 4, or 5-star level on Nevada's QRIS are currently reimbursed at 6%, 9% and 12% respectively over the State's standard reimbursement rate.

- 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:

Increases in child care payments have not occurred in Nevada since 2004. These changes require approval at multiple levels including administrative, executive, and legislative. Due to a number of factors, Nevada has not been able to make changes to this rate. Because of the Federal requirement, the Nevada CCDP is working to require all subsidy providers to be involved in Nevada's QRIS program, and working to move QRIS reimbursement rates into alignment with the current market rate by 09/30/16.

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:

Nevada has implemented tiered reimbursement rates for providers participating in QRIS. CCDF program staff are working to continue the expansion of QRIS statewide and link reimbursement for subsidy to participation in QRIS. Nevada is also currently working to revise QRIS logic to link the cost of quality improvements to tiered reimbursement rates. As of February 2016 CCDF staff have submitted agency budget requests that would increase reimbursements rates to the current market rate without decreasing the number of subsidy clients for providers participating in QRIS. If included in the Agencies budget request, this will be addressed during the 2017 legislative session.

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:
- Data on the proportion of children receiving subsidy being served by high-quality providers.
Describe:
- Data on where children are being served showing access to the full range of providers. .
Describe:
- Data on how rates set below the 75th percentile allow CCDF families access to the same quality of care as families not receiving CCDF.
Describe:
- Feedback from parents, including parent survey or parent complaints.
Describe:
- Other.
Describe:

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

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

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) [9/30/2017](#)

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

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

Unmet requirement - Identify the requirement(s) to be implemented [payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology](#)

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 Nevada CCDP is currently planning to require subsidy providers to be involved with Nevada's QRIS beginning October 1st, 2016. Reimbursement rates will be linked to star rating, with one star centers receiving the current 2004 reimbursement rate, 5 star centers receiving 75% of the market rate and 2,3, and 4 star centers receiving a percentage between these two rates. The current plan is to work with centers in the highest poverty areas in Nevada, and expand the process to additional centers as QRIS coaches become available and capacity around QRIS increases. QRIS staff are currently analyzing caseload data and coach capacity and by October 1st will have a plan in place to implement this process.](#)

Projected start date for each activity: 01/01/2015

Projected end date for each activity: 09/30/2017

Agency - Who is responsible for complete implementation of this activity
Nevada Division of Welfare and Supportive Services, Nevada Department of Education.

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
CCDP contractors including the Children's Cabinet and the Las Vegas Urban League.

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

Unmet requirement - Identify the requirement(s) to be implemented [payment practices for CCDF child care providers reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory \(so as to provide stability of funding and encourage more child care providers to participate in the subsidy program.\)](#)

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

Child care payments are generally made based on a clients schedule. Those clients that are reimbursed based on actual attendance (varied schedules, before and after school programs) are allowed 21 absences per year, for any reason.

- 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

Payments are generally made based on a parent's approved schedule. The exceptions are varying schedules and before and after school programs. When a family works a varied schedule, policy allows 21 absence days per year to ensure payments to providers and stability for families. Before and after school programs frequently cannot take payment for days the child was not in attendance, so policy reflects this practice.

- Pays on a full-time or part-time basis (rather than smaller increments such as hourly)

Describe:

Rates are paid on a full-time or part-time basis. Because school-age children have schedules that include public school hours, the hours that constitute full-time and part-time are different:

Infant, Toddler, and Pre-School Children

Part-time = 15 minutes to 4 hours and 29 minutes

Full-time = 4 hours, 30 minutes and greater

School-Age Children

Part-time = 15 minutes to 2 hours and 59 minutes

Full-time = 3 hours or more

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

Describe:

The CCDP pays up to \$40 annually for fees.

- Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment

Describe:

CCDP contractors have 10 days to update cases due to any changes to the family's eligibility and issue a new certificate to the child care provider or notify the provider that the case is terminated.

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

Describe:

Providers have 60 calendar days from the issuance of payment to request an adjustment if they disagree with the amount of their payment. All payment adjustment requests must be resolved and responded to in writing by the Child Care office within 30 calendar days of the request.

Child Care contractors must resolve all provider underpayments in the next available reimbursement period from the date the underpayment is validated. If an underpayment is discovered through a Management Evaluation or Quality Control review, the underpayment must be validated by the contracting agency. If the underpayment was due to a mistake of the contracting agency, the supplemental payment must be issued with the next available reimbursement period after validation.

If an overpayment is found by a contractor or through a Management Evaluation or Quality Control review, the overpayment must be validated by the contractor within 60 calendar days from the date the overpayment is discovered.

Child Care contractors are primarily responsible for the collection of all provider overpayments. Recovery is accomplished through retention of future provider payments until the debt is retired in whole. If the provider suggests that repayment of the debt will cause a hardship they may seek special consideration from the DWSS Child Care Chief. To do so, the provider must submit a written request to the DWSS Child Care Chief fully disclosing the circumstances which warrant special consideration.

If the provider's contract is terminated prior to full repayment of the overpayment, the

Child Care contractor must refer the debt to the appropriate DWSS Investigations & Recovery (I&R) office for continuation of the recovery action.

If the provider initiates a new contract with Child Care contractor prior to full recovery of the debt by DWSS I&R, the Child Care office must suspend approval of the contract until the remaining overpayment balance is paid. The provider retains the right to seek hardship consideration using the aforementioned process. If a hardship is granted, the Child Care contractor must submit a written request to DWSS I&R seeking to reclaim the debt and assume responsibility for collection of the outstanding balance through reimbursement reduction.

Other.

Describe:

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

Historically, the Nevada CCDP paid providers prospectively. In 2012 Agency Administration determined that this practice violated standard accounting practices and, because of this, the Nevada CCDP moved to a reimbursement based payment process. This process is generally done within 21 days of billing for services, but due to the process of requesting funds at the State and Federal level, the program allows contractors 30 business days to provide reimbursements.

Nevada generally reimburses based on parent's schedule. Exceptions to this process include before and after school programs and parents with varying schedules. Nevada's data system does not allow for payment based on percentage of time.

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:

Payment for the service period must be sent to the provider within 30 business days.

This is 30 business days from the receipt of the reimbursement record.

- Track and monitor the payment process

Describe:

Contractors process timesheets within 30 days of receipt. Contractors submit weekly draw requests to the State for all timesheets processed within the week. The State provides payment to the contractors within 7 days of receiving the weekly draw requests. Once payment is received by the contractors, provider payments are released.

- Use of electronic tools (e.g., automated billing, direct deposit, etc.)

Describe:

Nevada has a web-based attendance system that operates as a module of the Nevada Child Care System (NCCS). Providers approved to submit reimbursement records via Web Attendance may submit the reimbursement records weekly, bi-weekly or monthly. All providers can request direct deposit through the child care contractors.

- 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

<http://www.childrencabinet.org/wp-content/uploads/2014-Demographics-Report.pdf>

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)
- Other.

Describe

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

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

- 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 fully implemented (not yet started, partially implemented, substantially implemented, other) [Partially implemented](#)

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

[The Nevada CCDP has begun implementing a pilot project in northern Nevada that will focus on wrapping services around areas of high poverty. In addition, if QRIS becomes mandatory for subsidy providers, this activity will initially focus on areas of high poverty.](#)

Unmet requirement - Identify the requirement(s) to be implemented [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.](#)

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 Nevada CCDP has begun a pilot project in northern Nevada that will focus on wrapping services around areas of high poverty. Activities will include linking education, public health, social services, public safety, transportation, job development, job training, housing, food security, and other services to families with young children in these areas. This will occur through schools, community centers, or other community based programs. In addition, CCDP is currently planning to require QRIS sites to provide resource and referral lists, and is planning to provide intensive wraparound services to child care centers in high poverty areas.](#)

Projected start date for each activity: [01/01/2015](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity

[Nevada Division of Welfare and Supportive Services](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Child Care contractors, Nevada Department of Education, Nevada Department of Health and Human Services, Nevada Department of Employment, Training and Rehabilitation.

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

Family Child Care facilities -provide services within an individual's residence. They are allowed to care for up to 6 children with a license and a curriculum.

Group Home Child Care facilities -provide services within an individual's residence. They are allowed to care for up to 12 children within their home with one additional caregiver and a curriculum.

Accommodation Child Care facilities -a business that provides child care, when customers are required to remain on the premises of the business, for up to 3 hours.

Child Care Centers -stand alone facilities that provide and all day curriculum to children.

Institutional Child Care facilities- provide care and house at risk youth. They provide education, daily sustenance, shelter, medical, and dental care to the children under their supervision.

On-site Child Care facilities- provide care to children of individuals employed by the business only.

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

The Nevada CCDF utilizes Family, Friend, and Neighbor providers for individuals caring for less than 5 children, as well as a variety of license exempt programs. Though not licensed by the State of Nevada, FFN providers are monitored yearly through CCRR staff

and license exempt providers receive oversight from county or non-profit agencies that ensure the safety and well being of children in their care.

No.

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

- Fully implemented and meeting all Federal requirements outlined above. 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) [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

[Nevada currently has ratio requirements for all licensed facilities.](#)

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.)

[Nevada does not currently have requirements for groups sizes. This change will require a change in Nevada's Child Care Regulations. Child Care Licensing staff are currently working in work groups with licensed child care centers to evaluate](#)

and to implement a group size requirement and clarify other licensing requirements. The CCDP has no direct authority over Child Care Licensing, or the workgroups that are in process. Workgroups members and CC Licensing staff have made assurances that they are aware of the reauthorization requirements and will provide additional information when their work is complete. Child Care and Development Program staff are working in a support capacity to provide necessary information to Child Care Licensing staff and provide input as requested.

Projected start date for each activity: 01/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity
Nevada Child Care Licensing

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Nevada Division of Welfare and Supportive Services, licensed child care providers, subject matter experts.

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.)

Nevada does not currently have group size or ratio requirements for license exempt providers. CCDP staff have met informally with a variety of providers to discuss this requirement and are planning a meeting with all CCDF funded programs by the end of June 2016 to determine the next steps. Based on the outcome of the June meeting, CCDP staff will work with Child Care Licensing to implement required changes for non licensed CCDP providers.

Projected start date for each activity: 01/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity
Child Care and Development Program

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Children's Cabinet, Las Vegas Urban League, Boys and Girls Clubs, and a variety of before and after school programs, Child Care Licensing

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:

NAC 432A.522 Nurseries for infants and toddlers. (NRS 432A.077)

1. A licensee of a nursery for infants and toddlers shall have on duty at least the following number of caregivers:

- (a) If all children in the nursery are under 9 months old, one caregiver for every four children;
- (b) If all children in the nursery are between 9 months and 18 months old, one caregiver for every six children; or
- (c) If all children in the nursery are between 18 months and 3 years old, one caregiver for every eight children,

Êxcept that if there are more than six children in the facility, there must be at least two caregivers on duty in the facility.

2. If the nursery contains children from more than one of these age groups, the required number of staff members is determined by computing the average of the ages of all children attending the nursery and using the average age to determine the applicable ratio of caregivers to children.

(Added to NAC by Bd. for Child Care, eff. 8-31-84; A 1-29-85; R112-06, 4-23-2009)-
(Substituted in revision for NAC 432A.331)

- Ratio:

- (a) If all children in the nursery are under 9 months old, one caregiver for every four children;
- (b) If all children in the nursery are between 9 months and 18 months old, one caregiver for every six children; or
- (c) If all children in the nursery are between 18 months and 3 years old, one caregiver

for every eight children,
except that if there are more than six children in the facility, there must be at least two caregivers on duty in the facility.

- Group Size:

2. Toddler

- State/Territory age definition:

NAC 432A.145 "Nursery for Infants and Toddlers" defined. (NRS 432A.077) "Nursery for infants and toddlers" means a child care facility: in which the licensee provides and early care and education program for five or more children who are under 2 years of age; and that has established specific goals to enhance the cognitive, social, emotional, physical, and creative development of each child at the facility.

- Ratio:

6:1; 7-20:2; 21-35:3; 36-50:4; 51-65:5; 66-80:6; 81-93:7

- Group Size:

N/A

3. Preschool:

- State/Territory age definition:

Children aged two and up.

- Ratio:

6:1; 7-20:2; 21-35:3; 36-50:4; 51-65:5; 66-80:6; 81-93:7

- Group Size:

N/A

4. School-Age

- State/Territory age definition:

Children aged two and up.

- Ratio:

6:1; 7-20:2; 21-35:3; 36-50:4; 51-65:5; 66-80:6; 81-93:7

- Group Size:

N/A

5. If any of the responses above are different for exempt child care centers, describe:

6. Describe, if applicable, ratios and group sizes for centers with mixed age groups. If the nursery contains children from more than one of these age groups, the required number of staff members is determined by computing the average of the ages of all children attending the nursery and using the average age to determine the applicable ratio.

b) Licensed Group Child Care Homes:

1. Infant

- State/Territory age definition:

NAC 432A.145 "Nursery for Infants and Toddlers" (NRS 432A.077) "nursery for infants and toddlers" means a child care facility: in which the licensee provides an early care and education program for five or more children who are under 2 years of age; and that has established specific goals to enhance the cognitive, social, emotional, physical and creative development of each child at the facility.

- Ratio:

Not more than eight of the children may be less than 3 years of age, and not more than four of the children may be less than 1 year of age. A group home must have one caregiver on duty at all times and an additional caregiver for more than 4 children.

- Group Size:

Except as otherwise provided in [NAC 432A.546](#), a group home must have one caregiver on duty at all times. An additional caregiver must be on duty whenever one or more of the following conditions exist:

- (a) More than six children are in the facility;
- (b) More than four of the children are less than 2 years of age; or
- (c) More than two of the children are less than 1 year of age.

2. Toddler

- State/Territory age definition:

[NAC 432A.145](#) "Nursery for Infants and Toddlers" ([NRS 432A.077](#)) "nursery for infants and toddlers" means a child care facility: in which the licensee provides an early care and education program for five or more children who are under 2 years of age; and that has established specific goals to enhance the cognitive, social, emotional, physical and creative development of each child at the facility

- Ratio:

Not more than eight of the children may be less than 3 years of age, and not more than four of the children may be less than 1 year of age. A group home must have one caregiver on duty at all times and an additional caregiver for more than 4 children.

- Group Size:

More than six children; more than four of the children are less than 2 years of age; or more than two children are less than 1 year of age.

3. Preschool:

- State/Territory age definition:

Children aged two and up.

- Ratio:

6:1; 7-20:2; 21-35:3; 36-50:4; 51-65:5; 66-80:6; 81-93:7

- Group Size:

N/A

4. School-Age

- State/Territory age definition:

Children aged two and up.

- Ratio:

6:1; 7-20:2; 21-35:3; 36-50:4; 51-65:5; 66-80:6; 81-93:7

- Group Size:

N/A

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

Child Care Licensing has two facility types: Family Care Homes and Group Care Homes. Each have a different maximum child allotment. Family Care Homes can have up to 6 children at any one time. Group Care Homes can have up to 12 children at any on time.

In a Family Care Home and a Group Care Home:

(a) Not more than four of the children may be less than 2 years of age, and not more than two of the children may be less than 1 year of age; and

(b) Any children of the person who is required to reside in the facility pursuant to subsection 3 who are less than 3 years of age will be counted for the purpose of the ratios.

Except as otherwise provided in NAC 432A.546, a licensee of a family home shall:

(a) Have one caregiver on duty at all times;

(b) Have a second caregiver on duty whenever four or more of the children in the facility are children with special needs; and

(c) Provide an alternate caregiver in case of an emergency.

In a group home, not more than eight of the children may be less than 3 years of age, and not more than four of the children may be less than 1 year of age.

Except as otherwise provided in NAC 432A.546, a group home must have one caregiver on duty at all times. An additional caregiver must be on duty whenever one or more of the following conditions exist:

(a) More than six children are in the facility;

- (b) More than four of the children are less than 2 years of age; or
- (c) More than two of the children are less than 1 year of age.

Three caregivers must be on duty whenever eight or more of the children in the facility are children with special needs.

Additional school age children: A licensee of a family home or group home may, after obtaining the written permission of the Administrator of the Division, provide care before and after normal school hours for as many as three children in addition to the number stated on the facility's license if each of the additional children is:

- (a) At least 6 years of age or is attending school for a full day; and
- (b) Less than 16 years of age.

2. Children who live in such a home and are 11 years of age or less must be included in counting the additional children.

3. The care must not exceed 3 consecutive hours before normal school hours and 3 consecutive hours after normal school hours.

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

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 Licensed Family Child Care can have up to six children at a time with one provider.

Describe the group size:

N/A

Describe the threshold for when licensing is required:

more than 3 children

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

six

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

If the caregiver has a child that is 3 years or younger they count in the numbers. If they have a family member whose child is visiting them and the adult guardian is present to supervise their own child they would not count in the number. If the adult guardian is not present, then for a Licensed facility that would count towards their numbers.

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

N/A

2. If any of the responses above are different for exempt family child care home providers, describe

N/A

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:

N/A

Describe group size:

N/A

Describe the threshold for when licensing is required:

N/A

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

N/A

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

N/A

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

N/A

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

Child Care licensing qualifications are universal for all child care providers with the following required qualifications:

Current child care background check and clearance

Nevada Registry (professional ladder establishment and continued training hub tracker)

Sudden Infant Death training (required if caring for children under 12 months of age)

Negative TB results

First Aid/CPR

Recognizing/Reporting Child Abuse (mandated reported training)

Signs and Symptoms of Illness with Blood borne Pathogens

Child Development training (3 hours required)

All providers are tasked with completed 24 training hours annually

and assistant teacher qualifications:

Child Care licensing qualifications are universal (see a 1 above)

2. Toddler lead teacher

Child Care licensing qualifications are universal (see a 1 above)

and assistant teacher qualifications:

Child Care licensing qualifications are universal (see a 1 above)

3. Preschool lead teacher

Child Care licensing qualifications are universal (see a 1 above)

and assistant teacher qualifications:

Child Care licensing qualifications are universal (see a 1 above)

4. School-Age lead teacher

Child Care licensing qualifications are universal (see a 1 above) and assistant teacher qualifications:

Child Care licensing qualifications are universal (see a 1 above)

5. Director qualifications:

Child Care licensing qualifications for Child Care Directors are also universal with the following qualifications:

NRS 432A.1773 Licensee or person responsible for daily operation, administration or management of child care facility: Registration required; qualifications.

1. A licensee of a child care facility, or a person appointed by the licensee, who is responsible for the daily operation, administration or management of a child care facility must:

(a) Be at least 21 years of age and:

(1) Hold an associate's degree or a higher degree in early childhood education and have at least 1,000 hours of verifiable experience in a child care facility;

(2) Hold an associate's degree or a higher degree in any field other than early childhood education, have completed at least 15 semester hours in early childhood education or related courses and have at least 2,000 hours of verifiable experience in a child care facility;

(3) Hold a high school diploma or, if approved by the Administrator of the Division of Public and Behavioral Health, a general educational development certificate, have completed at least 15 semester hours in early childhood education or related courses and have at least 3,000 hours of experience in a child care facility;

(4) Hold a current credential as a "Child Development Associate" with an endorsement for preschool age children or infants or toddlers, as appropriate, which has been issued by the Council for Professional Recognition, or its successor organization, and have at least 2,000 hours of verifiable experience in a child care facility; or

(5) Have a combination of education and experience which, in the judgment of the Administrator of the Division of Public and Behavioral Health, is equivalent to that required by subparagraph (1), (2), (3) or (4);

(b) Have at least 1,000 verifiable hours in an administrative position or have completed a course or other training in business administration; and

(c) Within 90 days after the licensee or person appointed by the licensee commences service as the director of a child care facility, apply to the Nevada Registry or its successor organization, and annually renew his or her registration before the date on

which it expires.

b) Licensed Group Child Care Homes:

1. Infant lead teacher

Child Care licensing qualifications are universal (see a 1 above)
and assistant qualifications:

Child Care licensing qualifications are universal (see a 1 above)

2. Toddler lead teacher

Child Care licensing qualifications are universal (see a 1 above)
and assistant qualifications:

Child Care licensing qualifications are universal (see a 1 above)

3. Preschool lead teacher

Child Care licensing qualifications are universal (see a 1 above)
and assistant qualifications:

Child Care licensing qualifications are universal (see a 1 above)

4. School-Age lead teacher

Child Care licensing qualifications are universal (see a 1 above)
and assistant qualifications:

Child Care licensing qualifications are universal (see a 1 above)

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

c) Licensed Family Child Care home provider qualifications

Child Care licensing qualifications are universal (see a 1 above)

d) Other eligible providers qualifications:

Child Care licensing qualifications are universal (see a 1 above)

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)(l)(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) [9/30/2016](#)

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

[Non licensed providers current receive all necessary training. Licensed providers currently receive: prevention and control of infectious diseases, prevention of SIDS, handling and storage of hazardous materials, and appropriate disposal of bio contaminants, first aid, and CPR. Licensed exempt providers vary. CCDP staff plan to meet with License exempt providers by July of 2016 to discuss the opportunity to bring these and other requirements into alignment, or remove them from Federal funds. All current trainings are approved by the Nevada Registry and are provided through a combination of in-class and online training.](#)

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.)

[Implementation of new requirements will be accomplished through regulation changes.](#)

Projected start date for each activity: [01/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity
[Nevada Child Care Licensing](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Nevada Division of Welfare and Supportive Services](#)

Unmet requirement - Identify the requirement(s) to be implemented [Prevention of and 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.)

[Implementation of new requirements will be accomplished through regulation changes.](#)

Projected start date for each activity: [01/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity

[Nevada child Care Licensing](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Division of Welfare and Supportive Services](#)

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

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

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.)

[Implementation of new requirements will be accomplished through regulation changes.](#)

Projected start date for each activity: [01/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity

[Nevada Child Care Licensing](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Nevada Division of Welfare and Supportive Services](#)

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.)

Implementation of new requirements will be accomplished through regulation changes.

Projected start date for each activity: 01/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity

Nevada Child Care Licensing

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Nevada Division of Welfare and Supportive Services

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.)

Implementation of new requirements will be accomplished through regulation changes.

Projected start date for each activity: 01/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity

Nevada Child Care Licensing

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Nevada Division of Welfare and Supportive Services

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) [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) [Not yet started](#)

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

[Non licensed providers current receive all necessary training. Licensed providers currently receive: prevention and control of infectious diseases, prevention of SIDS, handling and storage of hazardous materials, and appropriate disposal of bio contaminants, first aid, and CPR. Licensed exempt providers vary. CCDP staff plan to meet with License exempt providers by July of 2016 to discuss the opportunity to bring these and other requirements into alignment, or remove them from Federal funds. All current trainings are approved by the Nevada Registry and are provided through a combination of in-class and online training.](#)

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.)

Licensing has plans to implement the following: administration of medication, prevention of and response to emergencies, due to food and allergic reactions, prevention of shaken baby and abusive head trauma, precautions in transporting children, building safety, and emergency preparedness.

Projected start date for each activity: 01/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity
Nevada Division of Public and Behavioral Health

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Nevada Division of Welfare and Supportive Services

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:

A licensee of a facility shall meet the daily nutritional needs of each child. Meals and snacks must be of a quality and quantity which supplement the food served at home. Cultural and ethnic foods which are appropriate for children must be considered in planning meals. To the extent possible, information provided by parents concerning their child's eating habits and preferences or special needs regarding food must be considered in planning for meals. A licensee of a facility shall consult the Division or local licensing agency or some other public agency for nutritional information which is applicable to children of ages receiving care at the facility. Child Care licensing refers to the Child and

Adult Care Food while monitoring facility nutrition qualifications.

- Access to physical activity.

Describe:

If the weather permits, all children must have a daily period of outdoor play. A licensee of a facility shall provide opportunities for active play which builds muscles such as climbing, jumping, running, and playing with toys which have wheels. The quantity and quality of materials and equipment must be sufficient to avoid excessive competition between the children and long waiting periods to use the materials or equipment.

- Screen time.

Describe:

- Caring for children with special needs.

Describe:

The amount, variety, arrangement, and use of materials and equipment used in a facility must be appropriate to the developmental needs of the children cared for in the facility

- Recognition and reporting of child abuse and neglect.

Describe:

- Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety.

Describe:

Incorporate instruction, concepts, and activities that foster the social, emotional, physical, linguistic, and cognitive development of children

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.
- 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

Child care facilities are to be monitored as stated in NAC432A.180 unannounced inspections/investigations must be made at least two times during the 12-month licensing period or once every 6 months. CCDP policy has been revised to require yearly monitoring per DWSS Child Care Policy Manual 622.2.

- 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

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

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

Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are

qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting:

Current requirements include -**EDUCATION AND EXPERIENCE:** Bachelor's degree from an accredited college or university in early childhood development, education, social work, or closely related field and three years of professional experience providing developmental or educational services to children in an early childhood program which must have included program administration responsibilities, one year of which must have been at the supervisory level; OR Bachelor's degree from an accredited college or university in early childhood development, education, social work, or closely related field and three years of professional experience evaluating child development or early childhood education programs, one year of which must have been at the supervisory level; OR an equivalent combination of education and experience; OR one year of experience as a Child Care Facilities Surveyor Supervisor in State service. Working Knowledge of: early childhood teaching techniques and programs, resources and materials for early childhood educational programs; child and adolescent growth and development; the behavioral characteristics of the population which each facility serves; general mathematics; common office and record keeping practices and procedures; the operation of a residential, institutional or partial care facility. Ability to: investigate and enforce laws, regulations, policies and procedures; analyze situations and complex data and arrive at accurate or logical conclusions; prepare a variety of written reports, including grants and to make oral presentations; organize and reprioritize work; maintain a working relationship and provide public relations to federal, state, county and city entities; and all knowledge, skills, and abilities required at the lower levels.

- 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

[NAC 432A.190 Inspections; investigations. \(NRS 432A.077, 432A.180 Inspections of any building or premises of a facility pursuant to NRS 432A.180 may be unannounced and must be made at least two times during the 12-month licensing period or once every 6 months. Any authorized member or employee of the Division may enter and inspect any building or premises of a facility at any time pursuant to NRS 432A.180 to secure compliance with or prevent a violation of any provision of this chapter or chapter 432A of NRS](#)

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) [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) [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.)

[Subgrants with CCR&R providers will be revised by July 1, 2016 to hire staff and implement these processes.](#)

Projected start date for each activity: [07/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity
[Nevada Division of Welfare and Supportive Services.](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[CCR&R subgrantees.](#)

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:

Hiring practices are in place that allow inspectors to carry a manageable caseload and ensure compliance in unannounced visits. Current caseloads vary based on area of the state from 21 to 48 cases per inspector.

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):

Child Care Licensing enforces the following: NAC 432A.410 Reports of child abuse or neglect. (NRS 432A.077) If any person suspects that child abuse or neglect is occurring in a facility, the person may immediately report such suspicions to the Division. Every licensee or employee of a facility who has reason to believe child abuse or neglect is occurring in the facility, in the child's home or elsewhere shall report such beliefs to the appropriate authority as required in NRS 432B.220

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 date (no later than September 30, 2017). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2017) [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) [Substantially implemented](#)

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

[Non-licensed and registered providers are not yet in compliance with background checks. Licensed providers are in compliance with all except two requirements: background checks within 45 day, and NCIC analysis.](#)

[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:

[Child Care Licensing Background Process Includes the following:](#)

[STEP 1: Complete the appropriate Consent and Release Form within 24hrs of hire](#)

[STEP 2: Obtain the appropriate fingerprint referral](#)

[STEP 3: Take the complete consent and release and referral to local police for processing](#)

[STEP 4: Contact Nevada Department of Public Safety payment and submission information](#)

[STEP 5: Upon completion of fingerprinting a copy of the Consent and Release form and applicable work card\(s\) must be sent to Child Care Licensing for audit purposes](#)

[STEP 6: Once appropriate card\(s\) and/or reports are received, Child Care Licensing will notify the facility and applicant of the applicant's background clearance status](#)

[Appeals can occur through expunging criminal records, or providers can as for a variance through the Nevada Board of Health.](#)

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:

In Nevada, these activities occur through local law enforcement agencies.

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:

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:

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.

Currently, licensed providers are charged a fee for processing background checks. These fees cover the cost of the finger print process, and do not exceed the cost of processing and administration. The process for non-licensed providers is currently being developed. Based on current information, it is expected that the State will pay the fees for non-licensed background checks.

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue:

Describe.

The Child Care Licensing program is planning to hire additional staff to take on this responsibility July 1st, 2016. Once hired, this position will have responsibility for this activity.

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)

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

6.1.2 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.

To provide a common starting point for effective and appropriate training opportunities; Nevada has identified the following distinct Core Knowledge Areas (CKA) that serve as the foundation of the Nevada Early Care and Education Professional Career Ladder and the Training Approval System. Nevada's CKA include: human growth & development; positive interactions & guidance; observation & assessment; environment & curriculum; health, safety, & nutrition, family & community relationships; leadership & professional development; and management & administration.

- Career ladder or lattice.

Describe.

The career ladder is the cornerstone of the Nevada Registry's recognition system. Through this system, individuals are placed on a pathway that recognizes his/her unique professional and educational accomplishments in ECE and years of experience working with young children (up to 4000 hours). Through the application process, a career development file is established for anyone completing the membership application. Because ECE professionals work at all levels of the career ladder, from entry level to advanced, the career ladder recognizes the important contributions of the entire ECE workforce, regardless of the position a person holds or their level. The career ladder is specific to the field of ECE and consists of seven levels representing various combinations of formal education, training and direct experience (up to 4000 hours). The entry levels of the ladder are somewhat informal and become increasingly more formal with a greater emphasis on formal education and training in ECE as a

person advances along the continuum.

- Articulation agreements between two- and four-year postsecondary early childhood education or degree programs.

Describe.

There is full articulation of all degree programs between all of Nevada's higher education institutions. If a student completes an AA at any one of the other NSHE institutions, the 4-year institutions waive the core requirements when the student transfers.

- Community-based training approved by a state regulatory body to meet licensing or regulatory requirements.

Describe.

To promote quality training opportunities statewide and to increase the level of consistency within the approval process across the state all requests for child care training hours must be reviewed and approved by the Nevada Registry. With the establishment of the training approval system, all trainers and corresponding informal training events are subject to the same approval criteria and are processed through the same approval process within the Nevada Registry. Because of the partnership with statewide child care licensing agencies, the Nevada Registry has mainstreamed the process of approval by becoming the central clearinghouse for receiving training requests, approving requests, tracking approved training and making training information available to the ECE workforce on a statewide basis. All informal, not for college credit training must be approved by The Nevada Registry in order to be accepted and applied toward the annual training requirements of State and County Child Care Licensing. Currently, training approval is based primarily on the content of training. Beginning in 2017, training approval will also be based on the the education and qualifications of those providing professional development to the early childhood community, national trends for the development of training approval systems and the best practices outlined by The National Workforce Registry Alliance. Approval criteria will help to support higher quality in trainings, consistency in trainings, help ECE professionals make more informed decisions about the training/trainers they select, and increase the quality of care and education for all young children in Nevada.

- Workforce data, including recruitment, retention, registries or other documentation, and compensation information.

Describe.

The Nevada Registry is able to gather on the ECE workforce on a regular basis through

the process of career ladder placement and the training approval system. Any data provided to the community via the Nevada Registry website and/or collaborators through other means, is combined in order to report on large groups of people, rather than on any individual member. All information contained in each member's career development file is confidential. Types of information collected include: demographics, career ladder placement, and earnings. Data is shared with stakeholders and the broader ECE community in a number of ways including monthly statistical reports published to The Nevada Registry website and through annual reports that are distributed to members and key stakeholders. Annual reports provide a snapshot of Registry membership on an annual basis and help to track similarities and differences in member demographics over time. Reports highlight the composition and characteristics of Nevada's Early Care and Education (ECE) workforce and allows for comparison of how our membership population changes or stays the same as more of the workforce becomes active in the program. The information provided in this annual brief is also used to help guide the development of future Registry programs and services.

- Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework.

Describe.

The Nevada Registry Advisory Committee is an advising body with a broad range of professional representation across the state. The Committee is comprised of representatives from Early Childhood Programs who guide the vision of The Nevada Registry. Agency representatives are invited to participate based on the population represented by their program/agency (Higher Education, Center-Based Care, Home-Based Care, etc.) as well as the individual's connection to, and understanding of, the child care industry in Nevada. Members include, but are not exclusive to, at least one individual representing the following:

Funding Agent

Higher Education including 2 year and 4 year institutions

State Department of Education/State Funded Pre-K

Child Care Licensing (State and County)

Statewide Early Childhood Scholarship Program

Nevada Pre-K Standards

Child Care Resource & Referral/Subsidy Contractors

Licensed Center-Based Child Care Provider (Urban and Rural)

Licensed Family Day Care

Head Start/Tribal Child Care
Community Member at Large

- Continuing education unit trainings and credit-bearing professional development.

Describe.

A one-credit ECE college course is equivalent to 15 hours of child care training. Only college courses specific to ECE will meet the child care licensing training requirements.

- State-approved trainings.

Describe.

CEUs for child care trainings may be applied for and granted through the Nevada Department of Education (NDE). There is no articulation agreement between NDE and the Nevada Registry. There are currently distinct and separate requirements for each approval process.

- 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.

The Nevada Early Childhood Advisory Council (NECAC) has recently formed four sub-committees including a sub-committee specific to professional development. All new initiatives or changes to current programs will be included in this overall work. Previous to the formation of the professional development sub-committee all programs were presented to NECAC for feedback.

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.

Training and Professional Development Requirements:

Within the first 90 days, new hires must complete in person training in CPR/First Aid that addresses the ages of all the children in the facility and Signs of Illness/ Bloodborne Pathogens. Additional training that may be in person or online include 3 hours of Child Development, Guidance or Discipline, Recognizing and Reporting Child Abuse, and Sudden Infant Death Syndrome training if the new hire will be working with infants 1 year of age and under.

After the initial period, all facility employees, except Family and Group Care Homes, are required to complete 24 annual training hours. Family and Group Care Home Providers are currently required to complete 15 hours of annual training. Annual training MUST include at least 2 hours of training in Health, Obesity and/ or Wellness. Early childhood college courses translate to 15 training hours per credit taken.

All trainings must be pre-approved by the Nevada Registry. When training approval applications are submitted, the training must identify the primary focus as one of the eight Core Knowledge Areas.

Training specific to Nevada's Early Learning Guidelines (ELG) is offered statewide, but not required as part child care licenising requirements. The ELG trainings are aligned with the Core Knowledge Areas.

Specific to early childhood mental health intervention models:

Nevada TACSEI is a statewide initiative designed to create a sustainable, statewide system that promotes social emotional development in young children, using the Pyramid Model. Nevada TACSEI's Statewide Leadership Team is comprised of members from a variety of agencies, programs and services who are committed to supporting social emotional development and preventing challenging behavior. Training is available on The Pyramid Model framework for supporting and promoting social emotional competence for infants,

toddlers and preschoolers. The Pyramid Model is an effective way to create supportive, inclusive settings for young children with developmental delays, children who may be at risk for developmental delays and/or children with disabilities. At the base of the pyramid is the foundation where systems and policies are developed to ensure an effective workforce that is able to adopt and sustain evidence-based practices.

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.

All available training is posted on the Nevada Registry website. Providers are able to search for training to meet their professional development needs in one of two ways: by geographic area or by specific criteria (core knowledge area, initial training requirements or online/distance learning options) and is open to providers of tribal organizations.

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.

Child Care Licensing requirements include: SIDS training (if working with children under 12 months of age), child development, or positive guidance specific to the age group served by the facility.

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® Nevada scholarship program provides financial assistance to providers working in licensed child care facilities to obtain up to a bachelor's degree in

early childhood education. Financial assistance covers tuition, books, and stipend for travel.

Financial incentives linked to education attainment and retention.

Describe.

The T.E.A.C.H. Early Childhood® Nevada scholarship program provides financial incentives to providers working in licensed child care facilities. Financial incentives include wage increase and/or bonus upon contract completion and paid release time.

Registered apprenticeship programs.

Describe.

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

Describe.

In southern Nevada, there is an early childhood joint technical skills committee that focuses on the high schools that offer a child development sequence. This committee includes members from Head Start programs, child care licensing, higher education, community agencies, and the department of education. The committee supports the high school teachers, students, and the on-site pre-k programs.

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.

Nevada's CCR&R agencies do not actively recruit providers for whom English is not their first language. The Child Care Resource and Referral programs have staff and translation services to perform child care referrals in the parents' language. If a parent does not want to use licensed care or cannot find a child care provider that they are comfortable with, the CCR&R program consults with parents on family, friend and neighbor care and the requirements for registering an FFN provider of their choice on the Subsidy Program. The provider recruitment for an individual subsidy family is largely performed by the parent; however, the CCR&R program provides the parent with guidance on the importance of the selection process and the documentation requirements. The CCR&R program also contacts FFN providers who have been active on the program for 6 months and discusses the option of becoming a licensed child care provider and provides support with the licensing process. In addition, to support these providers, the number of staff members who speak dual languages (Spanish or Tagalog) that are in CCR&R specialist, subsidy case manager, and reimbursement assistance roles has increased.

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.

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

CCDP contractors use translation services that allow them to provide services in multiple languages.

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) [9/30/2016](#)

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

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

We will collaborate with NDE McKinney Vento State Coordinator to develop a plan for providing training and technical assistance to child care providers on identifying and serving homeless children and families.

The plan will build and expand the work of the Washoe County School District Homeless Liaison that currently includes training to Early Head Start, Head Start, and District Pre-k Programs.

Establish Point of Contacts for wraparound services (and expand the wraparound services offered through the Pre-k Development Grant)

Develop a comprehensive list of resources available to families

Add a training requirement to the Silver State Stars QRIS indicators

Add a training requirement to Child Care Licensing regulations

Develop trainings that can be offered online and in-person (including a train the trainer format)

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.)

Develop and implement a comprehensive plan to include training and technical assistance on identifying and serving homeless children and families. Bring stakeholders together to identify existing resources and training being provided in the community; identify gaps in existing resources; identify agencies that can fill the gaps in training and technical assistance needed; and develop comprehensive plan.

Projected start date for each activity: **04/01/2016**

Projected end date for each activity: **09/30/2016**

Agency - Who is responsible for complete implementation of this activity

Nevada Department of Education

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

CCR&R Agencies, School District Homeless Liaisons, Family Shelter Staff, Child Care Licensing, Family Resource Centers, Head Start Programs, and United Way of Southern Nevada

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.

Number of trainings by core knowledge area, number of participants, and satisfaction survey results

b) Indicate which funds will be used for this activity (check all that apply)

CCDF funds.

Describe:

Quality set-aside

Other funds.

Describe:

c) Check which content is included in training and professional development activities. Check all that apply.

- Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c.

Describe:

All trainings offered are approved by the Nevada Registry and aligned with Nevada's eight core knowledge areas: Environment & Curriculum; Families & Community Relationships; Health, Safety & Nutrition; Human Growth & Development; Leadership & Professional Development; Management & Administration; Observation & Assessment; and Positive Interactions & Guidance

- 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:

Training, technical assistance, and coaching are provided based on the Pyramid Model framework for supporting and promoting social emotional competence for infants, toddlers, and preschoolers.

- 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:

Nevada is currently partnering with WIDA to provide train the trainer training on dual language learners. A statewide master cadre group will provide training on the unique language needs of pre-k children who are in the process of learning more than one language and to incorporate the WIDA Early English Language Development Standards.

- 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:

Training and TA are provided to out-of-school time (OST) programs at least three times per month per geographical region. All trainings are approved by the Nevada Registry and aligned with Nevada's eight core knowledge areas.

- Other.

Describe:

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

There are no pre-services hours required to work in child care. An orientation is required within the first 2 weeks after commencing employment. Newly employed members of the staff of a facility must be given a written and oral orientation program and be trained in the policies, procedures and programs of the facility by the director or a designee trained by the director, but the regulation does not specify the number of hours required for the length of the orientation.

2) Number of on-going hours and any required areas/content

There are both initial training requirements and on-going training requirements. Initial training must be completed within 90 days after commencing employment. Initial training must include: CPR/First Aid, Recognizing and Reporting Child Abuse, SIDS (caring for children 12 months or younger), Child Development, and Signs and Symptoms of Illness w/Blood Bourne Pathogens. On-going training must be completed during each 12-month period immediately succeeding the completion of the initial training required. Providers must complete at least 24 hours of training.

b) Licensed Group Child Care Homes

1) Number of pre-service or orientation hours and any required areas/content

There are no pre-services hours required to work in child care. An orientation is required within the first 2 weeks after commencing employment. Newly employed members of the staff of a facility must be given a written and oral orientation program and be trained in the policies, procedures and programs of the facility by the director or a designee trained by the director, but the regulation does not specify the number of hours required for the length of the orientation.

2) Number of on-going hours and any required areas/content

There are both initial training requirements and on-going training requirements. Initial training must be completed within 90 days after commencing employment. Initial training must include: CPR/First Aid, Recognizing and Reporting Child Abuse, SIDS (caring for children 12 months or younger), Child Development, and Signs and Symptoms of Illness w/Blood Bourne Pathogens. On-going training must be completed during each 12-month period immediately succeeding the completion of the initial training required. Providers must complete at least 15 hours of training

c) Licensed Family Child Care Provider

1) Number of pre-service or orientation hours and any required areas/content

2) Number of on-going hours and any required areas/content

There are both intitial training requirements and on-going training requirements. Initial training must be completed within 90 days after commencing employment. Initial training must include: CPR/First Aid, Recognizing and Reporting Child Abuse, SIDS (caring for children 12 months or younger), Child Development, and Signs and Symptoms of Illness w/Blood Bourne Pathogens. On-going training must be completed during each 12-month period immediately succeeding the completion of the intial training required. Providers must complete at least 15 hours of training.

d) Any other eligible CCDF provider

1) Number of pre-service or orientation hours and any required areas/content

FFN providers are required to take 30 hours of pre-service training during an orientation period of 90 days. Completed within 30 days:

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; Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event; Handling and storage of hazardous materials and the appropriate disposal of bio contaminants; and

Precautions in transporting children (if applicable); Completed within 60 days:

Recognition and reporting of child abuse and neglect and Nutrition and physical activity (optional); Completed within 90 days:

Prevention and control of infectious

diseases (including immunization); Prevention of sudden infant death syndrome and use of safe sleeping practices; Prevention of shaken baby syndrome and abusive head trauma; and, First aid and cardiopulmonary resuscitation (CPR) certification.

2) Number of on-going hours and any required areas/content

After the first year, FFN providers are required to complete a minimum of 24 hours of Early Education and Child Care Training annually.

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

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) [9/30/2016](#)

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

[There is some training available related to business practices including community relationships, marketing, and parent provider communication.](#)

Unmet requirement - Identify the requirement(s) to be implemented [Policies and practices to strengthen provider's business 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.)

[Activity 1: Identify comprehensive business practices course/modules that can be taken online with face-to-face meetings to facilitate communities of learning for both Family Child Care and Centers Directors. Nevada is initially looking into McCormick's Aim4Excellence Modules for center directors and Child Care Education Institute for Family Child Care. Nevada is seeking to provide training series that covers all business practices identified in this section. Activity 2: Create business training action plan for both Centers and Family Child Care training. Plan will include method of delivery, state training/facilitation leads, training of trainers/facilitators in the selected content \(if needed\), cohort size, meeting/training schedule, and scholarship opportunities for providers. Activity 3: Submit all selected training for Nevada Registry approval. Activity 4: All business trainings for centers/family child care to be posted in state-wide training calendar.](#)

Projected start date for each activity: [02/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity
[Nevada Department of Education](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[The Children's Cabinet and The Nevada Registry](#)

[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

The Pre-k Standards were finalized in 2003, revised in 2010, and reviewed in 2013 with no changes made at that time.

- 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 the 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:

<http://www.nevadaregistry.org/department-of-education-office-of-early-learning-and-development/pre-k-standards.html>

Three-to-Five

Provide a link:

<http://www.nevadaregistry.org/department-of-education-office-of-early-learning-and-development/pre-k-standards.html>

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:

[A supplement to the Nevada Pre-k Standards "Early Childhood Crosswalk: Aligning the Nevada Pre-k and Common Core Standards" was developed in 2013. The crosswalk was designed to show pre-k teachers how they are building the foundation for what happens in kindergarten, and shows the kindergarten teachers what pre-k standards are directly linked to the many common core state standards across all domains of learning.](#)

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children's cognitive, physical, social and emotional development and support children's overall well-being?

- Yes, the State/Territory has a system of technical assistance operating State/Territory-wide
- Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities
- 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:

Training and on-site technical assistance is offered to support providers in developing and implementing curriculum/learning activities based on the Nevada's early learning guidelines.

- The technical assistance is linked to the State's/Territory's quality rating and improvement system.

Describe:

The on-site technical assistance mentioned above is available only to those centers participating in the QRIS. (The training is open to all providers regardless of QRIS participation.)

- Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines.

Describe:

Training and on-site technical assistance is offered to support providers in developing and implementing curriculum/learning activities based on the Nevada's infant-toddler guidelines.

- Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development

guidelines.

Describe:

Training and on-site technical assistance is offered to support providers in developing and implementing curriculum/learning activities based on the Nevada's pre-k standards.

- 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 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.)

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

- Yes.

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 overarching goals for quality improvement are: 1) Improve program quality and outcomes for young children; 2) Increase the number of children with high needs attending high-quality early learning and development programs; and 3) Reduce the achievement gap between children with high needs and their peers. These goals are a product of the Nevada Early Childhood Advisory Council's 2014-2017 Silver State Strong strategic plan.

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.)

[Pre- Development Grant \(PDG\) and W K Kellogg Foundation \(WKKF\) grant](#)

- 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.)

[Infant-toddler set-aside](#)

- Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

- Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4. Indicate which funds will be used for this activity (check all that apply)

- CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

- Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

- Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If

checked, respond to 7.5. Indicate which funds will be used for this activity (check all that apply)

CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6. Indicate which funds will be used for this activity (check all that apply)

CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

[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 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 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.)

[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.)

[PDG and WKKF](#)

[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

www.nvsilverstatestars.org

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

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:

When NV's Silver State Stars QRIS was developed, the criteria was selected to above and beyond licensing requirements. Being licensed is mandatory for all centers and family home providers to participate in the QRIS.

- 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

NV's Silver State Stars QRIS financial incentives include: a grant for materials based on program's licensing capacity; tiered reimbursement payments at star level 3 (6%), level 4 (9%), and star level 5 (12%); a stipend when a program increases their star level at renewal, and national accreditation support for programs at star level 4 and 5.

- 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
 Programs serving infants and toddlers
 Programs serving school-age children
 Faith-based settings
 Other.

Describe:

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:

Two assessment tools are used to determine a program's QRIS rating - the Environment Rating Scales (center and family home provider model) and the CLASS (district pre-k QRIS model.) An outside evaluator, UNLV Nevada Institute for Children's Research and Policy (NICRP), has been contracted to evaluate the impact of the star ratings on outcomes for children.

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

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers?

Check all that apply and describe.

- Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families.

Describe:

- Establishing or expanding the operation of community or neighborhood-based family child care networks.

Describe:

- Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers.

Describe:

Nevada is participating in a pilot project with Zero to Three that will provide training on their recently developed Critical Competencies for InfantToddler Educators™. This training includes 13 modules specific to infant toddler providers and the use of an online self-assessment tool that will be offered statewide. Nevada has also purchased 100

licenses through Zero to Three for online lessons called *Knowledge and Know-How: Nurturing Child Well-Being*. These lessons will be available fall 20146

Nevada is also developing a CDA program that will include technical assistance from both an infant toddler specialist and an early childhood mental health specialist, the required CDA training, and financial incentives.

- 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:

Grants to purchase infant toddler materials are provided as part of the QRIS. Materials purchased are aligned with an Infant Toddler Environment Rating Scale quality improvement plan.

- Providing coaching and/or technical assistance on this age group's unique needs from Statewide networks of qualified infant-toddler specialists.

Describe:

Nevada is in the process of developing a network of infant toddler specialists. The specialist services will be part of a comprehensive CDA program and the QRIS.

- Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.)

Describe:

The Nevada Early Intervention program places children receiving early intervention services in child care centers for up to six hours a week. The goals of the Early Intervention Partners Program are 1) to improve child care providers' knowledge of inclusive practices through training and technical assistance; 2) provide early intervention services in a natural environment; and 3) increase children's social experiences with typical peers.

- Developing infant and toddler components within the State's/Territory's QRIS.

Describe:

Nevada's QRIS addresses specific infant toddler components including: appropriate classroom group size and ratios and policies on oral health, breastfeeding, nutrition, and the use of early learning guidelines.

- Developing infant and toddler components within the State's/Territory's child care licensing regulations.

Describe:

- Developing infant and toddler components within the early learning and development guidelines.

Describe:

Nevada has developed infant toddler early learning guidelines that align with Nevada's pre-k standards. The guidelines address all domains including: cognition and general knowledge; language development and communication; personal and social emotional; approaches to learning; and physical development and health.

- Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care.

Describe:

- 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:

Number of participants completing Zero to Three in-person training and online lessons - to include pre/post training satisfaction survey

Number of participants achieving infant toddler CDA

Number of infant toddler teachers participating in training program - to include pre, mid, and post knowledge assessments

Number of new infant toddler specialist and evaluation of coaching provided

Increase in Infant Toddler Environment Rating Scale Scores

Increase in Infant Toddler CLASS Scores

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

Nevada has two CCR&R agencies: The Children's Cabinet and the Las Vegas Urban League. The Children's Cabinet is the subgrantee for Subsidy Administration and Parent Referrals in northern Nevada (all counties excluding Nye County and Clark County (Las Vegas)). The Las Vegas Urban League is the subgrantee for Subsidy Administration and Parent Referrals in southern Nevada. Additionally, The Children's Cabinet is the statewide subgrantee for six CCDF-quality activities: Early Childhood Professional Development; Out-of-School Time Professional Development; QRIS Coaching; Community Outreach; Parent Engagement; and Early Childhood Support Network (substitute teacher service for licensed child care). This is a voluntary network. Both subgrantees attend monthly contractor meetings and work closely together to avoid duplication of services and to coordinate efforts.

- 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:

1.1.1ECE & OST Trainings: # Trainings by Core Knowledge Area; # participants by participant type (center, family child care, school-age program, district Pre-K, parent, other); # evaluations returned. QRIS Coaching: Average coach reliability on both the ITERS and ECERS (85% benchmark); # Centers newly enrolled in the QRIS Coaching Program

includes educating providers on their responsibilities and signing MOUs; # open QRIS cases; Total # visits; Total # Quality Improvement Plans (QIPs) developed (based on ERS scores). Parent Engagement: # materials developed and distributed that enhance families' understanding of child development and high quality ECE. Community Outreach: # surveys to collect data related to the supply, demand, cost and quality of Nevada's Child Care Industry; # reports distributed to stakeholders on the supply, demand, cost and quality of Nevada's Child Care Industry; # community events/activities to increase community awareness of the importance of ECE. Early Childhood Support Network: # of child care centers/family child care providers served; # requests (hours); # hours served.

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 Children's Cabinet has developed a Technical Assistance request form that is distributed by Child Care Licensing surveyors. The surveyors provide the form to licensed facilities who need help with becoming compliant with standards.

Through the QRIS, if licensing compliance issues are identified during QRIS coaching visits, all compliance issues must be addressed by the QRIS coach prior to working on other areas of improvement (Environment Rating Scale improvement areas or model quality indicators improvements).

The Children's Cabinet also provides training and technical assistance specific to nutrition and physical development through a CDC Chronic Disease Prevention grant. These services meet Child Care Licensing training requirements.

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:

Number of compliance issues that are resolved; QRIS Ratings change; increase knowledge through training survey; provider policy changes; incident of obesity decreased

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

Program and Provider/Teacher Evaluation: child care facilities are evaluated by the Nevada Silver State Stars QRIS. The QRIS rating includes the Environment Rating Scales as part of assessing quality and developing quality improvement plans. District pre-k programs are also evaluated by the Nevada Silver State Stars QRIS. This version of the QRIS includes CLASS assessment scores to evaluate teacher child interactions. Evaluation of providers by families is collected through a child care resource and referral survey. Child assessment: assessment is a requirement of child care licensing, but facilities use a variety of assessment tools. State funded pre-k and the Pre-k Development pre-k programs use the PPVT, EOWPVT, and WIDA assessment tools. Nevada is in the process of selecting a kindergarten entry assessment with the plan to align pre-k assessment. In addition, as part of the Pre-k Development Grant (PDG), Nevada is working to align and collect data across systems in early childhood and to the K-12 system.

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:

QRIS Ratings

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

Nevada's accreditation facilitation project includes technical assistance, training, and funds for accreditation fees for programs at star level 4 and 5.

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:

Number of facilities that have maintained or achieved national accreditation.

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:

N/A

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:

N/A

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.

The Nevada Department of Ed, Office of Early Learning and Development has partnered with TNTP to pilot an intensive six-month leadership series offered to child care center administrators. The leadership series is designed to support administrators in becoming more effective instructional leaders.

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:

Contractors have been notified of changes and meetings with staff have been conducted to review the new policies and redefine red flags. In addition, CCDF uses policy manual reviews, audit process, Quality Control reviews, Management Evaluation reviews, and DWSS Investigations and Recovery staff are included when necessary.

8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements.

Check all that apply.

- Issue policy change notices
- Issue new policy manual
- Staff training
 - Orientations
 - Onsite training
 - Online training
- Regular check-ins to monitor implementation of the new policies.

Describe:

CCDF conduct on site reviews of contractors through programmatic review processes,

internal audits, Management Evaluation Processes and Quality Control processes. These reviews are based on scopes of work outlined in contracts/subgrants, and the Child Care Policy Manual.

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:

1.1.1 Audit processes are in place for the Lead Agency, all program contractors, and subrecipients. Subrecipients are required to understand their role and responsibilities under the Block Grant, each subgrant has language that outlines recipients responsibilities, and recipients are responsible for conducting a yearly audit. All CCDF subgrants state: this Subgrant is subject to inspection and audit by representatives of the Nevada Department of Health and Human Services, the State Department of Administration, the Audit Division of the Legislative Counsel Bureau or other appropriate state or federal agencies to

- verify financial transactions and determine whether funds were used in accordance with applicable laws, regulations and procedures;

- ascertain whether policies, plans and procedures are being followed;
- provide management with objective and systematic appraisals of financial and administrative controls, including information as to whether operations are carried out effectively, efficiently and economically; and
- determine reliability of financial aspects of the conduct of the project.

All books, records, reports, and statements relevant to this Sub-grant must be retained a minimum of three (3) years, and for five (5) years if any federal funds are used pursuant to the Sub-grant. The retention period runs from the date of payment for the relevant goods or services by the State, or from the date of termination of the Sub-grant, whichever is later. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue. Within mutually agreed upon time frames, develop corrective action plans to rectify any exceptions noted in monitoring and/or audit reports that place any office out of compliance with this agreement, federal statutes or regulations, or State statutes or regulations.

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:

- 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:

- 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: 0

- 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:

The Nevada Division of Welfare and Supportive Services has an Investigations and Recovery Unit that is responsible for these activities. DWSS recovers improper payments due to intentional or unintentional errors in eligibility. DWSS does not collect on improper payments made due to agency or case manager error.

- Other.

Describe:

- 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: 0

- 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 Nevada Division of Welfare and Supportive Services has an Investigations and Recovery Unit that is responsible for these activities.](#)

- Other.

Describe:

- 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: 0

- 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 Nevada Division of Welfare and Supportive Services has an Investigations and Recovery Unit that is responsible for these activities.

- Other.

Describe:

- 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:

Individuals found to have committed an intentional program violation are penalized as follows:

NEON TANF clients are ineligible for benefits for a period of twelve months for the first violation, twenty four months for the second violation, and permanently for the third violation. During the ineligible period, the individuals required to participate in NEON work activities unless otherwise exempt; therefore, the individual is entitled to NEON support services, such as child care benefits.

Non- TANF clients are decreased by two subsidy percentage steps for a period of six months for the first occurrence, three subsidy percentage steps for twelve months for the second occurrence.

- Disqualify provider.

If checked, please describe, including a description of the appeal process for providers who are disqualified:

If an intentional program violation has been validated by DWSS Investigations and Recovery Unit, the Chief of the Child Care and Development Program will render a decision on the appropriate action to be taken against the provider. The penalty can be either suspension for an appropriate amount of time, or termination from the program.

Prosecute criminally

Other.

Describe: