Washington 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 Washington 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 Washington 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 Washington CCDF Plan** - The Plan describes the CCDF program to be administered by Washington 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 Washington Lead Agency in their CCDF Plans for Fiscal Years 2016-2018. The CCDF Plans offer a snapshot into current and planned efforts, initiatives and implementation plans for each State/Territory through September 30, 2018. These Plans are not a catalog of all activities undertaken by the State/Territory. Administration for Children and Families (ACF) is not responsible for the contents of these CCDF plans.
June 10, 2016

Ross Hunter, Director
Department of Early Learning
PO Box 40970
Olympia, WA 98504-0970

Dear Director Hunter:

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 Washington 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 Washington 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 12-month eligibility (3.3.1) 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. Washington 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 Washington 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 Paul Noski, Child Care Program Manager, Office of Child Care at (206) 615-2609 or paul.noski@acf.hhs.gov. Thank you for all you do each day for children and families.

Sincerely,

Rachel Schumacher
Director
Office of Child Care

cc: Heather Moss, Deputy Director
    Lynne Shanafelt, Child Care Administrator
    Paul Noski, Regional Program Manager, Office of Child Care Region X
1 Define CCDF Leadership and Coordination with Relevant Systems

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

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

1.1 CCDF Leadership

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

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

Name of Lead Agency: Department of Early Learning

Address of Lead Agency: PO Box 40970, Olympia, WA 98504-0970

Name and Title of the Lead Agency Official: Ross Hunter, Director

Phone Number: (360) 725-4584

E-Mail Address: Ross.Hunter@del.wa.gov

Web Address for Lead Agency (if any): http://www.del.wa.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: Heather Moss

Title of CCDF Administrator: Deputy Director

Address of CCDF Administrator: PO Box 40970, Olympia, WA 98504-0970

Phone Number: (360) 725-4932
E-Mail Address: Heather.Moss@del.wa.gov

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

Name of CCDF Co-Administrator: Lynne Shanafelt
Title of CCDF Co-Administrator: Child Care Administrator
Phone Number: (360)725-4447
E-Mail Address: Lynne.Shanafelt@del.wa.gov
Description of the role of the Co-Administrator: Coordinates development of plan, plan amendments, federal reports and technical assistance.

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any): 360-725-4447
Web Address for CCDF program (for the public) (if any): http://del.wa.gov/government/CCDF
Web Address for CCDF program policy manual (if any): www.del.wa.gov/publications/subsidy/default.aspx
Web Address for CCDF program administrative rules (if any): www.del.wa.gov/laws/rules/subsidy.aspx

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 Early Learning
Name of Lead Contact Nicole Rose

Subsidy/Financial Assistance (section 3 and section 4)
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.

Under the Service Level Agreement between Department of Social and Health Services (DSHS) and DEL, the Community Service Division within DSHS administers the subsidy eligibility determination, following policies established by the Department of Early Learning (DEL), for both the Working Connections Child Care (WCCC) program and the Seasonal Child Care (SCC) program.
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.

Homeless Child Care Program (HCCP) eligibility is determined by HCCP contractors following policies and rules established by DEL.

Other.
Describe.

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

CCDF Lead Agency
TANF agency

Describe.

DEL assists parents in locating child care by promoting the services of Child Care Aware and consumer education on its website. Child care licensing administrative staff provide one on one assistance to parents who have additional questions about child care or a particular child care provider. Child Care Check on the DEL website provides information about the quality, licensing, background checks, monitoring and compliance with regulation online.

Through a Service Level Agreement with DEL, DSHS assists families who need to find a child care provider by referring the family to Child Care Aware.
☐ Other State/Territory agency.
Describe.

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

☐ Child care resource and referral agencies
Describe.
DEL contracts with Child Care Aware of Washington to provide parents assistance in finding child care in their local community.

☐ Community-based organizations
Describe.

☐ Other.
Describe.

c) Who issues payments?

☐ CCDF Lead Agency

☐ TANF agency
Describe.
The Department of Social and Health Services issues payment to providers on behalf of the parents who are eligible for child care subsidy for Working Connections Child Care (WCCC) and Seasonal Child Care (SCC).

☐ 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.
Homeless Child Care Program (HCCP) contractors issue payments to the child care providers and DEL reimburses the contractors.

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

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

For example, did the entity participate in a drafting committee, review drafts, sign off on the final version, or develop a memorandum of understanding with the Lead Agency to meet requirements to share information or services for CCDF subsidy families, or other manner of participation? This list includes entities required by law along with a list of optional CCDF Plan consultation partners that Lead Agencies potentially would consult with in their developing their CCDF Plan.
[REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns

Describe:
The membership of Washington's 10 Early Learning Regional Coalitions includes county and city representatives from Pierce and King County, City of Seattle, along with county health departments and Educational Service Districts around the state. These Regional Coalitions received all the same CCDF review materials as the Early Learning Council and were given specific time to review the final draft in August. Washington State has a network of 9 Educational Services Districts who were all consulted in the development of the plan.


Describe:
The State Advisory Council on Early Childhood Education and Care, referred to as the Early Learning Advisory Council (ELAC), provided extensive input into the plan development at four different meetings. Membership of ELAC includes the Office of Superintendent of Public Instruction; Governor's Policy Office, representation from the Senate and Legislature, School Superintendent, staff to the Washington State Board of Community and Technical Colleges, Washington Federation of Independent Schools, the Director of the Department of Early Learning, Children's Alliance, the Head Start State Collaboration Director, Tribal representation, a center child care provider, the Washington Student Achievement Council, a licensed family home provider, the Department of Health, Thrive Washington, and the Early Support for Infants and Toddlers.

A special meeting was convened in March to review the subsidy sections particularly to make recommendations about 12 month subsidy and whether to have a gap period, and also to discuss and make recommendations about the Market Rate Survey and a potential new methodology.

At the May, June and August meetings, all the other sections of the plan were discussed, with the final review of the plan in August. ELAC agreed to let the Regional Coalitions to have another month to review. ELAC's members and membership of the 10 Early Learning Regional Coalitions received the CCDF review materials ahead of time and also were sent a follow up email to elicit input.
If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?

- Yes,
- No.

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

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

Describe, including which Tribe(s) you consulted with:

DEL convenes an Indian Policy Early Learning (IPEL) committee which includes delegates from Port Gamble S'Klallam Tribe, Tulalip Tribes, Jamestown S'Klallam Tribe, Chehalis Confederated Tribes, Suquamish Tribe, Squaxin Island Tribe, Samish Indian Nation, Cowlitz Indian Tribe, and Nisqually Tribe. On April 16 and July 30, 2015, IPEL reviewed the new CCDF law and proposed approaches to meeting the new law and gave input specifically around how background checks could be handled, and also on 12 month subsidy. Washington State has 29 federal recognized tribes which include the following: Chehalis Confederated Tribes; Lower Elwha Klallam Tribe; Colville Confederated Tribes; Lummi Nation; Cowlitz Indian Tribe; Makah Tribe; Hoh Tribe; Muckleshoot Tribe; Jamestown S'Klallam Tribe; Nisqually Tribe; Kalispel Tribe; Nooksack Tribe; Port Gamble S'Klallam Tribe; Sauk-Suiattle Tribe; Puyallup Tribe; Shoalwater Bay Tribe; Quileute Tribe; Skokomish Tribe; Quinault Indian Nation; Snoqualmie Tribe; Samish Indian Nation; Spokane Tribe; Squaxin Island Tribe; Tulalip Tribes; Stillaguamish Tribe; Upper Skagit Tribe; Suquamish Tribe; Yakama Nation and Swinomish Tribe. The tribal leaders from all 29 tribes are part of the DEL listserv and received the draft CCDF plan with the opportunity to review and give input into the plan. The tribes also received notification about when and where to attend the public hearing for CCDF input along with a website to submit input.
Check N/A if no Indian Tribes and/or Tribal organizations in the State

☑️ State/Territory agency responsible for public education.

Describe:
The Office of the Superintendent of Public Instruction (OSPI) Early Learning Policy Director is represented on the Early Learning Advisory Council (ELAC) and was able to give input and review the draft plan. This Policy Director was also on the CCDF Executive Steering Committee which discussed and gave input into the CCDF plan. This committee was convened by the DEL Director and approved the draft plan.

Washington State also has 9 Educational Service Districts who all have Early Learning Coordinators who participate on their area's Regional Coalitions and gave input into the draft CCDF plan. School Superindents have representation on ELAC which provided input into the draft plan.

☑️ 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:
DEL is the lead agency for Part C which is the Early Support for Infants and Toddlers (ESIT) program, which is also represented on the Early Learning Advisory Council (ELAC) by the program administrator. ESIT staff reviewed the plan. Section 619 is represented on ELAC by the Office of the Superintendent of Public Instruction (OSPI) Early Learning Policy Director who gave input into the draft plan.

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

Describe:
DEL partners on professional development and training for child care providers with community colleges and the four year universities. Higher education is represented on both ELAC and the CCDF Executive Steering Committee which reviewed and gave input into the CCDF plan. DEL also convenes a professional development consortium with representatives of higher education and child care providers to work on improvements to training, coaching, mentoring and technical assistance to child care providers.

☑️ State/Territory agency responsible for child care licensing.

Describe:
DEL is responsible for child care licensing of child care centers and family home providers. Licensing policy staff are the primary authors of Section 5 of the CCDF plan.
The plan was reviewed and input given by the four Licensing Regional Administrators.

☐ State/Territory office/director for Head Start State collaboration

Describe:

The Washington Head Start Collaboration Office (HSCO) is located at the Department of Early Learning and works in coordination with programs across the agency to increase services and processes to better meet the needs of low-income children and families, from birth to school entry. The HSCO Director assists in the development and review of the CCDF plan, especially in the areas pertaining to supports for low-income families with young children, birth to school entry. The role of the HSCO in supporting the efforts of the CCDF plan are to promote and align work across sectors at the state and local level, while utilizing resources and guidance from federal partners. Key areas of focus for the HSCO include the Early Head Start - Child Care Partnership Initiative, supports for infants and toddlers, support for the expansion and access of high-quality, workforce and career development opportunities, state QRIS, continuity across birth to school-entry programs, and high-quality comprehensive services such as health and family engagement.

The HSCO is committed to the specific provisions outlined in the Head Start Act of 2007 to "assist Head Start agencies to coordinate activities with the State agency responsible for administering the State program carried out under the Child Care and Development Block Grant Act of 1990 (42 U.S.C. 9858 et seq.) and entities providing resource and referral services in the State, to make full-working-day and full calendar year services available to children" and is also committed to providing resources from Head Start and the Office of Head Start/Office of Child Care National Centers that may be used for alignment and support of the state plan.

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

Describe:

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

Describe:

The Office of the Superintendent of Public Instruction (OSPI) is responsible for CACFP and is part of the Early Learning Advisory Council (ELAC). The plan was sent to the
CACFP program manager at OSPI for review and input.

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

Describe:
The Department of Health (DOH) is the agency responsible for WIC, Nutrition and Childhood Obesity Prevention. DOH is a member of the Early Learning Advisory Council (ELAC). The Department of Health is also represented on the executive steering committee, as it was created to provide oversight of CCDF reauthorization in Washington. The draft plan was sent directly to the Maternal Child Heath Program Manager who reviewed and gave input in writing.

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

Describe:
The Department of Social and Health Services (DSHS) is part of ELAC and is the Assistant Secretary for Economic Services Administration participated on the executive steering committee for CCDF reauthorization. This Administration of DSHS is responsible for the eligibility determination of families for CCDF child care subsidies, and also administers TANF, along with the Supplemental Nutrition Assistance Program (SNAP) for families.

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

Describe:
DEL is responsible for implementing the Maternal Infant Early Childhood Home Visiting (MIECHV) programs. The Assistant Director who oversees home visiting, infant/toddler services and ESIT participated in the executive steering committee for CCDF reauthorization. This steering committee advised the DEL Director and Child Care Administrators on policy directions of the CCDF plan.

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

Describe:

☑️ McKinney-Vento State coordinators for Homeless Education.

Describe:
The Homeless Education Coordinator who is the McKinney-Vento State coordinator for Homeless Education from OSPI met with a small group at DEL to discuss and give input
for the CCDF plan. This group included the Homeless Child Care Program Manager, the Assistant Director of Partnerships and Collaboration, the DEL Subsidy Manager and the Child Care Administrator. The Homeless Child Care Program Manager sent the Homeless Education Coordinator at OSPI the draft plan for her review and comment.

☐ State/Territory agency responsible for public health.

Describe:
The Department of Health's (DOH) Assistant Secretary is part of the executive steering committee for CCDF reauthorization. The Assistant Secretary reviewed all the sections of the plan and advised the DEL Director about the plan. DEL also sent the draft plan to the Maternal Child Health Program Manager at DOH for review and comment.

☐ 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:
DEL works closely with the Department of Social and Health Services (DSHS) on the eligibility and operation of the child care subsidy program. DSHS reviewed the draft plan and gave input about how to implement 12 month eligibility and other subsidy changes. The DSHS Assistant Secretary who oversees the Administration that determines eligibility for child care subsidy and administers TANF is also part of the executive steering committee for CCDF reauthorization.

☐ State/community agencies serving refugee or immigrant families.
Child care resource and referral agencies.

The Child Care Aware Network president was a member of the CCDF Executive Steering Committee who gave input into the CCDF plan. Child Care Aware provided consultation regarding consumer education and outreach. They are the primary organization for coaching, mentoring and technical assistance to child care providers who are participating in Early Achievers, the State's Quality Rating and Improvement System.

Provider groups or associations.

The Washington State Association of Head Start and ECEAP represents Head Start and ECEAP programs and has a seat on the CCDF executive steering committee which did an extensive discussion of the plan. This committee provided consultation to the DEL Director and CCDF administrator around policy directions for CCDF. DEL also sent out the draft plan to child care center providers and licensed child care providers for review.

Worker organizations.

The family home and family, friend and neighbor (FFN) provider union (SEIU 925) is represented on the executive steering committee for CCDF reauthorization and actively reviews the draft plan.

Parent groups or organizations.

DEL has a Parent Advisory Group (PAG) which reviewed the draft plan October 7, 2015.

Other organizations that are represented on the CCDF Executive Steering Committee who gave input and reviewed the draft CCDF plan included Schools Out Washington (who trains and support school age providers); Department of Social and Health Services Assistant Secretary; Thrive Washington, a private partner; Secretary of the Department of Health; the Washington State Association of Pediatricians; the Office of the Superintendent of Public Instruction, the Washington State Military Department and the Governor's office.
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: 01/08/2016

**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.

DEL sent a listserv and blog message to all stakeholders which includes several thousand providers, members of Regional Coalitions, Educational Service Districts, non-profits, Head Start and ECEAP, licensed family home associations, tribes, interested stakeholder who have signed up to be on the listserv and blog, partner State Agencies staff like DSHS and DOH, legislators, members of DEL advisory groups, the State Interagency Coordinating Council for Disabilities. The flyer with TYY is found here: [http://www.del.wa.gov/government/CCDF/Default.aspx](http://www.del.wa.gov/government/CCDF/Default.aspx).

DEL received written comments along with comment from the hearing which was summarized and reviewed by the internal DEL CCDF writing and implementation team. The comments were summarized and will be posted on the DEL website on the CCDF page.

c) Date(s) of public hearing(s): 01/28/2016

**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. The statewide public education videoconferencing system was used. The public was also be able to call into the hearing to make comment.
e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s). DEL issued web notifications about the hearing, along with a link to the draft plan on the DEL website. Additionally, specific stakeholder groups received targeted emails about the public hearing, along with an electronic copy of the draft plan.

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? Information from the public will be provided to the Executive Leadership Team to consider, as policies and programs are established.

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:
  DEL actively engages with the Early Learning Advisory Council (ELAC) around the CCDF plan, regularly updating members on the federal law and proposed plan amendments. DEL will also send out amendments to IPEL, along with the listserv and blog. Coordination with the tribal governments regarding the State plan will be facilitated by the DEL tribal liaison.

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

- Providing translation in other languages.
  Describe:

- Making available on the Lead Agency website.
  List the website: www.del.wa.gov/government/CCDF

- Sharing through social media (Twitter, Facebook, Instagram, email, etc.).
  Describe: https://www.facebook.com/WashingtonDEL/ - link to blog post.

- Providing notification to stakeholders (e.g., provider groups, parent groups).
  Describe:
  Listserv message is sent out regularly to all stakeholders.

- 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:

DEL has a partnership with the Office of Superintendent of Public Instruction (OSPI), Department of Health (DOH), Department of Social and Health Services (DSHS) and Thrive Washington to coordinate early learning activities between the five entities. This partnership
meets monthly to discuss current projects within early learning and transition services for children. The goal of this partnership is to move toward a seamless system of services for children birth to age eight, and improve supports to child care providers.

DEL also coordinates services with Head Start, ECEAP (state pre-K) and other preschool programs such as the City of Seattle Preschool Initiative. In order to better coordinate services, DEL has a Memorandum of Understanding with the City of Seattle which outlines specific agreements and services between ECEAP and the Preschool Initiative. At the statewide level DEL is moving toward serving all income eligible 4 year old children who are not in Head Start by 2020.

☑ [REQUIRED IF APPLICABLE] Tribal early childhood programs.
Describe, including which Tribes coordinating with:
DEL formed an Indian Policy Early Learning (IPEL) committee to improve coordination and strengthen the relationship between the state and tribes around areas of licensing, quality improvement systems and child care subsidy. Currently, participating tribes include Port Gamble, Tulalip, Jamestown, Chehalis, Suquamish, Squaxin, Samish, Cowlitz, and Nisqually. DEL hopes to increase tribal participation in the future. The DEL Director meets with the Indian Policy Early Learning (IPEL) committee quarterly to discuss common areas of interest and concern. This partnerships results in better coordination between the state and tribes so that both entities can provide better services to tribal families, children and providers.

DEL also has hired a Tribal Liaison who will work with Tribal CCDF Administrators, Head Start Directors, and ECEAP Directors within the tribes so that DEL and the tribes will have coordinated policy for Early Learning. DEL hopes to increase communication with all tribes particularly those who are unable to participate on IPEL.

☐ 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:
DEL partners with Early Head Start to support infants and toddlers to receive a full day full year program using layered funding.
DEL is the lead agency for Part C and has a project to coordinate and strengthen services for infants and toddlers, particularly in the areas of transition between programs. DEL provides staff support to the statewide Interagency Council for Children with Special Needs. DEL coordinates with local contractors to provide support to providers so that children and families receive appropriate services to address infant and toddler developmental issues. This increases the positive growth and development of infants and toddlers.

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

Describe:
DEL uses CCDF to fund a Homeless Child Care Program which contracts with local agencies to authorize child care for eligible families in an enhanced referral model. While children are in licensed child care, their parents participate in activities to stabilize the family, find employment and secure housing. Other programs that DEL administers, such as Working Connections Child Care (WCCC), Seasonal Child Care (SCC), and ECEAP, serve children meeting the McKinney-Vento Act's definition of "homeless."
DEL coordinates services to homeless families available under these programs through regular inter- and cross-divisional planning and collaboration. DEL’s ongoing goals for this coordination are to expand capacity to assist families in crisis under HCC, and to expand access to quality full-day, full-year programs with comprehensive services under WCCC, SCC, ECEAP, Head Start and Early Head Start. DEL prioritizes homeless families for services under all these programs and continues to explore layered funding strategies through ECEAP expansion and Early Head Start Child Care Partnerships to improve access to quality comprehensive services for this vulnerable population.
At the start of each school year, DEL sends HCCP information to the McKinney-Vento liaisons in the elementary schools that are located in the counties where HCCP is available. The information consists of a letters explaining the program and several program brochures listing local contact information.

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

Describe:
DEL coordinates with the Department of Social and Health Services (DSHS) Children’s Administration to serve children in foster care through non-CCDF state and child welfare funds. The goal of this coordination is to promote availability of high quality child care to one
of the state's most vulnerable populations.

☑️ State/Territory agency responsible for child care licensing.

Describe:
DEL is responsible for child care licensing and is aligning the standards and rules across different types of care to the greatest extent possible. DEL coordinates licensing activities with other child care services it administers with the goal of aligning programs toward a "one system" approach. As directed by the legislature under the Early Start Act, DEL is aligning licensing standards with ECEAP standards under the state's quality rating and improvement system (QRIS) framework--Early Achievers. DEL anticipates completion of this project by November 1, 2016, with the expected result that transitions between programs and child age groups will be smoothed and quality services will be better aligned.

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

Describe:
The Washington Head Start Collaboration Office (HSCO) operates under the Head Start Collaboration Office federal grant. The HSCO is strategically located at the Department of Early Learning, and works to promote cross-sector coordination and collaboration with a wide range of state agencies and programs, including the Washington Association of Head Start and ECEAP, child care and tribes. According to the Head Start Act (2007), HSCOs exist to facilitate collaboration among Head Start agencies and entities that carry out activities designed to benefit low-income children from birth to school entry, and their families. They provide a structure and a process for the Office of Head Start to work and partner with State agencies and local entities to leverage their common interests around young children and their families to formulate, implement and improve state and local policy and practices. The priority areas of focus for Head Start Collaboration Offices include supporting new federal initiatives, such as the Early Head Start - Child Care Partnerships, strategic policy development focused on the early learning workforce and professional development, statewide longitudinal data collection, supporting ongoing efforts to develop and sustain the Early Achievers and the Washington Kindergarten Inventory of Developing Skills (WaKIDS), as well as the promotion of high-quality early learning comprehensive health and family support services.

The Office of Head Start Collaboration also coordinates with Early Head Start Expansion grantees across the state, including the Nisqually Indian Tribe.
State Advisory Council authorized by the Head Start Act.

Describe:
Washington's Early Learning Advisory Council (ELAC) provides input and recommendations to DEL on state-wide early learning community needs and progress. ELAC representatives from around the state meet at least quarterly to provide input and recommendations to the Department of Early Learning so strategies and actions are well-informed and broadly supported by parents, child care providers, health and safety experts and interested members of the public. ELAC members represent Washington’s regionally, culturally and racially diverse communities, including members from public, nonprofit and for-profit entities. ELAC and DEL partnered to create the state's Early Learning Plan. The plan's vision is aligned with the CCDBG Act's coordination requirements: "In Washington state, we work together so that all children start life with a solid foundation for success, based on strong families and a world-class early learning system for all children prenatal through grade 3. Accessible, accountable, and developmentally and culturally appropriate, our system partners with families to ensure that every child is healthy, capable, and confident in school and in life."
The Early Learning Advisory Council advises DEL on the implementation of the CCDF Reauthorization passed by Congress and the Early Start Act passed by the Washington State Legislature.

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

Describe:
Starting January 1, 2016, DEL implemented an Early Head Start - Child Care Partnership pilot. It offers 316 full-day high quality slots funded by Early Head Start and Working Connections Child Care layers. The combined funding allows existing licensed child care providers to reduce child:staff ratios, improve facilities, purchase materials and enhanced curriculum, and to provide comprehensive services that benefit both children in pilot slots and children not participating in the pilot. The pilot requires that partner providers serve at least 10% children with disabilities.

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

Describe:

Child care resource and referral agencies.
Describe:
DEL has a contract with Child Care Aware of Washington that meets all areas of the requirements for Child Care Resource and Referral Agencies.

☑ State/Territory agency responsible for public education.

Describe:
DEL has an agreement with the Office of Superintendent of Public Instruction (OSPI), Department of Health (DOH), Department of Social and Health Services (DSHS) and Thrive Washington to help coordinate early learning activities of the five entities under the Washington Early Learning Partnership (WELP).
This supports early learning and transition services for children, moving toward a seamless system from birth to age eight. Coordination and support to child care providers are improved for transition of children from child care to kindergarten.

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

Describe:

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

Describe:
DEL meets with the family child care sponsors, CAC and the Lead Agency, the Office of Superintendent of Public Instruction (OSPI). DEL licensors also coordinate with CACFP child care sponsors who are in facilities a minimum of three times per year. DEL and OSPI review and revise reporting protocols for health and safety issues, resulting in increased child health and safety.
DEL regularly collaborates with the CACFP staff at OSPI to increase opportunities for children enrolled in child care programs to eat healthy and be more physically active. DEL promotes child care program enrollment in CACFP, as research indicates that programs enrolled in CACFP serve healthier meals and snacks to children and are more financially-viable businesses.

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

Describe:
Nutrition and physical activity education materials developed by the State WIC office are regularly distributed to child care program staff and the families that they serve via child care
health consultants at local health jurisdictions. These materials provide important information on healthful practices that can be supported by the child care program staff and families. The State WIC office collaborates with child care programs in underserved areas in order to promote their program's services to families. DEL is currently collaborating with the breastfeeding promotion staff at the State WIC office to develop a "Breastfeeding Friendly Child Care Recognition Program." The goal of this program is to increase breastfeeding duration rates in the state by assuring that child care programs appropriately support breastfeeding mothers and infants.

☐ 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:

Since being created by the state Legislature in 2010, the Home Visiting Services Account (HVSA) has brought together state, federal, and private dollars to support a portfolio of evidence-based, research-based and promising home visiting programs. The Washington State Department of Early Learning (DEL) oversees the HVSA and Thrive Washington (Thrive) supports services delivery and high quality implementation of programs funded through the HVSA. About 2,000 families, many of whom live in some of the state's most vulnerable communities, are in home visiting programs funded by the state's HVSA. Washington has placed specific emphasis on reaching the most vulnerable geographic and race/ethnic groups, especially focusing on families prenatal through age three. One specific focus has been assessing and cultivating interest in and capacity for implementation of high quality home visiting in Tribal communities.

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

Describe:

☑ State/Territory agency responsible for public health.

Describe:

DEL and the Department of Health (DOH) directors meet regularly to discuss public health issues for young children. DOH is represented on the Early Learning Advisory Committee
(ELAC) and the Washington Early Learning Partnership (WELP) described above. DEL also collaborates with DOH on implementation of infant/toddler consultations with child care providers and Early Head Start Programs. DEL and DOH collaborate (along with OSPI) on the state's Healthiest Next Generation initiative to promote healthy eating and physical activity in early learning settings through training and provision of materials. As a result of this collaboration, information to providers is better coordinated about healthy child development, current practices about social emotional development and emerging health issues.

☐ 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:
As established in state statute, DEL is the policy lead for child care subsidy programs under CCDF, while DSHS implements service delivery. DSHS' mission is access-oriented, family-focused, and increasingly emphasizes two-generational approaches. DEL's mission and values emphasize quality early learning experiences for children, marked by continuity, that prepare them to be successful in school and beyond. These combined attributes result in service delivery consistent with the goals of this section. Division of DEL and DSHS responsibilities is defined by a Service Level Agreement between the agencies.

☐ State/Territory community agencies serving refugee or immigrant families
Describe:
Provider groups or associations.

Describe:
DEL collaborates with providers through interaction with SEIU Local 925 (see below) and through the state's 10 Early Learning Regional Coalitions. The coalitions are composed of early learning professionals, parents, K-12 school leaders, and business and civic leaders. Coalition members assess the need for early learning services in the community, plan actions and build public support. Providers are further represented on the Early Learning Advisory Council (ELAC).

Worker organizations.

Describe:
SEIU Local 925 is the designated representative for license-exempt family, friend and neighbor providers and licensed family home providers receiving child care subsidy in Washington state. DEL meets quarterly with SEIU Local 925 to discuss emerging issues and at least yearly to engage in contract negotiations around all bargain-able issues including provider compensation, professional development, training, technical assistance, quality efforts, health and safety requirements, subsidy billing, etc. Most recently, these negotiations produced subsidy rate and tiered reimbursement increases based on 75th percentile of market rate, and the creation of a joint committee to administer professional development of represented providers. This collaboration promotes access, quality, and continuity through effective provider compensation and professional development.

Parent groups or organizations.

Describe:
DEL has reconvened the state-wide Parent Advisory Group (PAG). The PAG is made up of parents and family caregivers of children birth through age nine. The PAG meets quarterly by phone or in person and held its first in-person meeting in October 2015. PAG members represent unique experiences and perspectives, such as:
- Rural, remote, urban and military communities;
- Access a variety of early learning services for their children or not currently connected to services;
- Have diverse family structures (for example, headed by both or single parents, grandparents, kinship care, foster parents, or are blended families);
- Experience with immigration and being new to a community;
- Impacted by incarceration;
- Cultural, linguistic and ethnic diversity;
- Have children with varying developmental and special needs.

The PAG will be critical to increasing parent involvement in early learning decision-making and development of policies and programs that support families' strengths and needs,
including access to quality programs and comprehensive services and continuity of care.

☐ 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"

Combine is defined as using CCDF in addition to another federal fund source like Early Head Start or state funds to fund child care services.

Which funds will you combine

CCDF, TANF transfer and state funds are combined with Head Start, pre-K, municipality and tribal funds at the local level.

Goal(s) of combining funds (why?) and expected outcomes, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations

The goal of these combined funds is to extend and improve the supply of full-day, full-year programs with comprehensive services, and low staff-child ratios, to vulnerable families with children ages birth to three years, and to ensure continuity of programs participating in this approach. We expect this approach will result in smoother transitions for these children and will ultimately put them on the path to kindergarten readiness.

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

We allocate funds at a State level for a certain number of programs who operate full day, full year for eligible children.

How are the funds tracked and method of oversight

We track the funds through contracts with the providers, and through the Social Services Payment System administered by DSHS through the use of designated payment codes created for this initiative. DSHS further tracks the difference in WCCC payment to families participating in the layered approach and those who participate in traditional, non-layered WCCC.

☐ 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.

DEL has an agreement with the Office of Superintendent of Public Instruction (OSPI), Department of Health (DOH), Department of Social and Health Services (DSHS) and Thrive Washington to help coordinate early learning activities of the five entities under the Washington Early Learning Partnership (WELP). Thrive Washington is a private non-profit organization created to support high quality early learning opportunities around the state. Thrive works with DEL to support the Regional Coalitions around the state and assists with the implementation of home visiting.

The cross-agency goals and strategies of WELP are spelled out in Washington's 10-year Early Learning Plan, written in 2010. This plan and partnership supports early learning and transition services for children, moves toward a seamless system of services for children birth to age eight, and improves supports to child care providers.

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:

DEL supports a system of regional child care resource and referral organizations (CCR&R) that is coordinated by statewide network office which is Child Care Aware Washington (CCA-WA). The services provided by this network include:

- Families are provided with information about child care options including licensed child care centers and family child care homes, nontraditional hours and emergency child care centers in locations that they request;
- Information about child care is provided by a statewide Family Call Center staff by 8 staff who are able to provide one on one assistance in the family's home language if needed;
- Families are provided information about why quality is important in child care and what they should look for in child care;
- Families are provided the quality rating of the child care that they are
interested in;
- Information and referral is provided for other services like IDEA for children with disabilities.
- Data is collected about the supply of and demand for child care services in local areas or regions to increase the supply and quality of child care services.

CCA-WA is an essential partner of DEL. CCA-WA also provides services to child care providers statewide across six regions. Each region provides the following:

- **Training.** CCA-WA provides state-approved trainings to child care and early learning professionals, including the professional training series required for participation in Early Achievers, WA's quality rating and improvement system (QRIS).
- **Technical assistance.** CCA-WA also offers technical assistance as a benefit of Early Achievers participation to licensed child care providers.
- **Pre-probationary consultation.** Pre-probationary consultation is provided to child care providers upon referral by DEL licensors.
- **Coaching for Early Achievers participants.** CCA-WA provides coaching to rated Early Achievers participants that typically aligns with a quality improvement plan.
- **Culturally Relevant/family, friend and neighbor (FFN) training and events.**
- **Service delivery and awarding of Washington Scholarships for Child Care Professionals.**

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.

- 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) Substantially implemented

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

DEL has worked with a team of partners consisting of federal staff, DSHS subsidy payment and eligibility workers, DSHS child care policy staff, Child Care Aware staff to develop a Statewide Child Care Disaster Plan which includes:

- 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.
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.)


Projected start date for each activity: 03/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Review of training by Emergency Management Division in the Military Department will be requested.

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 the rules regarding emergency preparedness specific to CCDF providers caring for children in the child's home.

Projected start date for each activity: 06/15/2016
Projected end date for each activity: 09/15/2016
Agency - Who is responsible for complete implementation of this activity
DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Child Care Aware of Washington

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.)
Incorporate emergency preparedness rules into monitoring and inspections of CCDF providers who are caring for children in the child's home.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
N/A

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.)
Communicate emergency preparedness expectations to CCDF providers who are caring for children in the child's home.

Projected start date for each activity: 08/15/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
DSHS
2 Promote Family Engagement through Outreach and Consumer Education

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

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

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

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

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

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

When families apply to the Department of Social and Health (DSHS) for food assistance, TANF or other assistance, they are provided information about child care subsidy. The online consumer portal allows a family to enter in their family demographic and income data and then shows the family the services for which they are potentially eligible.

For the Seasonal Child Care (SCC) program, DSHS administers "Mobile Community Service Offices (CSOs) that travel to areas where seasonal work is widespread so that families that engage in this work can more readily access subsidized child care.

For the HCCP redesign and statewide expansion, DEL is using the 2016 Point in Time Count.
As part of the Child Care Aware Washington contract, they provide data about supply and demand of child care around the State. This study provides data about the overall demand for child care referrals along with the changes in child care capacity.

As part of ECEAP expansion around the state, a saturation study is conducted that shows how many income eligible 3 & 4 year olds are in each community and how many are in preschool and/or child care.

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.

When a family needs child care assistance, they call the state-wide parent line through Child Care Aware of Washington's Family Center to get information about child care subsidy and providers in their area. Families can also find out about child care subsidy by calling 211 which is a statewide information and referral line. Families who are homeless can access child care subsidy through the Homeless Child Care Program contractors. Another resource for families is the Within Reach outreach and referral which provides information about services in their local area, and also provides an online developmental screening. Reach Out and Read is a statewide initiative by pediatricians to provide books to young children and help families understand healthy development. The Department of Health in partnership with DEL provide Child Profile to every baby born in the state. Child Profile is a Washington State Department of Health program that sends child health information to all Washington State parents with a child age birth to six years old. Parents receive 17 age-specific mailings or emails with information on immunizations, well-child checkups, nutrition, growth and development, safety, and other child health topics. Visit www.childprofile.org for more information and materials.

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

Outreach is done through the DEL website, contracts with Child Care Aware Washington, electronic newsletters and the DSHS online portal for services. DSHS also has an online portal that families can see all the services that they are eligible for and apply for those services including child care. For community outreach, DSHS has a Mobile Van that they can use in more remote areas to determine eligibility for Seasonal Child Care services. Homeless Child Care Program (HCCP) contractors do regular outreach such as attending community
meetings and distributing brochures and posters. At the beginning of the school year DEL send brochures and local contact information to the McKinney-Vento liaisons in all school districts where the program is available. [http://www.del.wa.gov/care/help/homeless.aspx](http://www.del.wa.gov/care/help/homeless.aspx)

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

- [x] Electronically via online application, mobile app or email.
  
  Provide link [https://www.washingtonconnection.org/home/](https://www.washingtonconnection.org/home/)

- [x] In-person interview or orientation.
  
  Describe agencies where these may occur:
  
  DSHS uses their Mobile Van for outreach to families engaged in agricultural work who may qualify for the Seasonal Child Care program. DSHS Community Services Offices are open for families to get information about child care subsidy.

  When possible, HCCP contractors conduct in-person interviews with the families. When an in-person meeting is not possible, an interview is done by phone.

- [ ] 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:

- [x] 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:
  
  The DSHS online portal allows families to enter their income and demographic information to let them know what programs that they might be eligible for, and allows them to apply.

  TANF case workers determine eligibility through a coordinated application process for
families to apply for TANF and child care if needed.

☐ 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 Information for families is available through Child Care Aware of Washington's Family Center and child care referral line. On Child Care Aware of Washington website, families and providers have different tabs at the top of the page with specific information that is culturally
responsive. Here is the links: http://wa.childcareaware.org/families and http://wa.childcareaware.org/providers.

**Parent Help 123** - information on local resources, pregnancy, child development and programs for families

**Help Me Grow Washington** - free child development information and resources

**Kindergarten Readiness** - learn if your child is ready to start kindergarten

**Vroom** - ideas for turning everyday moments into brain-building opportunities for your infant, toddler, or preschooler

**Institute of Learning and Brain Sciences** - I-LABS at the University of Washington is building an online library of resources for parents. Modules use videos and pictures to share research. The modules also explain why each topic is important to child development.

**Zero to Three** - a national, nonprofit organization that provides parents, professionals and policymakers the knowledge and know-how to nurture early development

**Our Family Center Newsletters** - articles and information about child development

Materials are provided along with customized search results (electronically, verbally and written upon request).

Examples of provider information include:

**Business Tools**
- **The First Steps**
- **Business Planning**
- **Business Financing**
- **Business Administration**
- **Sample Contracts/Handbooks**
- **Commonly Used DEL Forms**
- **IRS Tax Forms & Schedules**
- **Liability Insurance is a Requirement**
- **Free Classroom Visuals and Supports from the Head Start Center for Inclusion**
- **Frequent Child Care Provider Questions**
- **Preguntas Frecuentes**

**Quality Tools**
- **Child Development**
- **Early Achievers**
- **Health**
- **Healthy Child Care Washington web site**
- **Local, State and National Organizations**
- **Safety**
- **Understanding and Helping Children with Depression**
- **Understanding Inclusion and the Americans with Disabilities Act**
DEL also has extensive resource information for parents, providers and the general public on its website at http://www.del.wa.gov.

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

The Family Center database of child care providers includes both child care centers and family home providers, and is regularly updated. An online database tool is always accessible, and telephone service representatives at the Family Center are available Monday through Friday to help conduct searches for families. Search information that is available includes, but is not limited to, demographic and service-specific information, such as ages, hours of operation, and languages spoken. Families are also linked to subsidy and other financial assistance programs as appropriate. Search information can be mailed (both electronically and standard) to families upon request. In addition to providing diverse child care referral information to consumers, the CCA of WA Family Center provides information about what to look for when searching for quality child care. This includes a quality checklist, a one-pager on quality care, and a video about Early Achievers. Materials are available in English, Spanish and some are also available in Somali.

A variety of materials are available about the many types of child care services available, including federal, state and military programs, and services for children with special needs. These materials are available both electronically and hard copy and are available in English and Spanish. Examples include


Birth to Six Growth and Development Chart at http://www.del.wa.gov/publications/esit/docs/PrescreenChart_English.pdf

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

Child Care Aware of Washington, WithinReach, Thrive Washington, DSHS, DOH, local health agencies, and the 10 regional Early Learning Coalitions.
2.2.3 Describe how the State/Territory makes information about the quality (such as through a quality rating and improvement system, if available, nationally-recognized accreditation, or other means) of child care services available to the public, including consumer-friendly strategies such as messages that are designed to engage intended audiences and are easy to understand

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

The CCA-WA Family Center provides extensive verbal and written information about how to identify and select high quality child care. They also share information with parents about the quality rating status of providers in Washington's QRIS, Early Achievers. Additionally, Early Achievers rating information can be found in DEL's online licensing resource, Child Care Check.

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

Publicly accessible information on DEL's online licensing resource includes:
- how many children and the age ranges of the children currently enrolled at a facility
- licensing status
- background check status
- information about licensing inspections

Early Achievers quality rating (this also includes a description of what each rating level means)
- Written materials about child care quality created and provided by DEL include:
  - Early Achievers informational brochures for parents and families
  - The Early Achievers Quality Standards Framework
  - A Guide to Choosing Quality Child Care
  - Early Learning and Developmental Guidelines

Additionally, providers who are participating in Early Achievers have the opportunity to post on Child Care Check, a customized description of their program.

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

The University of Washington (UW) helps determine child care quality by conducting the onsite evaluations of providers in the Early Achiever rating process.

CCA-WA disseminates information about quality and provides information on Early Achievers quality rated child care and early learning programs to parents and the general public.
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)
DSHS has an online portal which provides information about TANF and allows the family to see if they are eligible for TANF and apply for services. DEL's website also has a link to the DSHS online portal which is called Washington Connections. DSHS also has local Community Service Offices which are located statewide where families can be interviewed by a TANF case worker, and qualify for services. If families access the website of Child Care Aware of Washington or call their Family Call Center, they can be assisted with a referral to the DSHS online portal or the local DSHS Community Service Office.

b) Head Start and Early Head Start Programs
Families are made aware of the Head Start and Early Head Start programs through Child Care Aware of WA's Family Center services and the Department of Social and Health Services (DSHS). Local programs have recruitment for their services within their individual area.

c) Low Income Home Energy Assistance Program (LIHEAP)
Families are given referrals to LIHEAP as needed through DSHS and the Child Care Aware of WA's Family Center. For families using the Washington Connection portal for public benefits, eligible families are referred to local community organizations for services https://www.aap.org/en-us/ Documents/periodicity_schedule.pdf

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)
Families can determine if they are eligible for SNAP through the DSHS online portal. Information about SNAP is also available through the Child Care Aware of WA's Family Center.
e) Women, Infants, and Children Program (WIC)
Families can determine if they are eligible for WIC through the DSHS online portal. Information about WIC is also available through the Child Care Aware of WA’s Family Center.

f) Child and Adult Care Food Program (CACFP)
This is available to providers through the Office of the Superintendent of Public Instruction (OSPI) for families who qualify. A link for information for providers about this program is available through the DEL website at the tab for child care providers.

g) Medicaid
Families can determine if they are eligible for Medicaid through the DSHS online portal. Information about Medicaid is also available through the Child Care Aware of WA’s Family Center.

h) Children’s Health Insurance Program (CHIP)
Families can determine if they are eligible for CHIP through the DSHS online portal. Information about CHIP is also available through the Child Care Aware of WA’s Family Center.

i) Individuals with Disabilities Education Act (IDEA)
If a family has a concern about their child’s development, the DSHS eligibility worker or Child Care Aware Family Center can refer the family to Parent to Parent for family support to access services for their child. The referral process varies by community but is handled by local partnerships and/or community agencies.

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten)
Through a service level agreement with DSHS and within the contract that DEL has with the Child Care Aware of WA Family Center, families are referred to the state-funded preschool. Local ECEAP contractors also recruit and enroll families directly in their local community.

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)
DSHS and the Child Care Aware of WA Family Center refer families to home visiting programs if available in their areas. Help Me Grow is a system Washington is developing that connects families to resources and information about available services in their community. Help Me Grow provides free developmental screening for children under five; referrals for further evaluation and early intervention services; links to community resources such as parenting classes, medical clinics, and food banks; and activities and games that support healthy growth and learning. Washington is exploring ways to use the Help Me Grow model to partner with early learning, family support and pediatric primary care providers to serve as...
referral linkages to available supports and services.

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

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

a) Temporary Assistance for Needy Families (TANF)  
Providers receive information from the Child Care Aware of Washington about how to refer families to these services. Providers who participate in local community resource networks and provider associations receive information about TANF. Family home providers also learn about TANF and other services from their union, SEIU Local 925.

b) Head Start and Early Head Start Programs  
Providers receive information about Head Start and Early Head Start programs through the DEL website and from their local community-based agencies and partnerships. The Head Start Collaboration office at DEL also provides information through the list serv and blog to providers.

c) Low Income Home Energy Assistance Program (LIHEAP)  
DEL contracts with Child Care Aware of Washington (CCA-WA) to provide a number of training and technical assistance to child care providers including resources for families. Providers can refer families to the Family Call Center or the CCA-WA website. Family home providers also learn about this and other services from their union, SEIU Local 925.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)  
Providers get information about SNAP through the CCA-WA website and from their local Child Care Aware offices.

e) Women, Infants, and Children Program (WIC)  
Providers get information about WIC from the CCA-WA website or outreach from their local health departments.

f) Child and Adult Care Food Program (CACFP)  
The Office of the Superintendent of Public Instruction (OSPI) does outreach to child care providers about CACFP.
g) Medicaid
Providers get information about Medicaid from DSHS local offices about Apple Health or online at http://wahealthplanfinder.org. Health Care Authority is responsible for the campaign for Apple Health and has extensive outreach brochures and posters broadly displayed throughout communities around the State.

h) Children's Health Insurance Program (CHIP)
Providers get information about CHIP through CCA-WA website, and the Apple Health campaign to make sure all eligible children have health coverage.

i) Individuals with Disabilities Education Act (IDEA)
Community partners like local school districts, DEL licensors, CCA-WA, DSHS Community Service Office, health departments and medical providers all provide outreach to providers about services available through IDEA for families who have children with special needs.

j) Other State/Federally Funded Child Care Programs (example-State Pre-K)
Local ECEAP and Head Start programs do recruitment efforts with providers in their communities.

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)
Local outreach is done with providers in the areas that have home visiting programs. Reach Out and Read provides training and technical assistance to pediatric primary care providers who incorporate early language and literacy promotion throughout early childhood.

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
Information is available on the DEL website at http://www.del.wa.gov/parents-family/. DEL has worked the Department of Health to send age appropriate material about child development to all children born in in the State until they are 6 years old.
Providers can access through the DEL website the following material which has research based practices:

- Washington State Early Learning and Development Guidelines
- Licensed Child Care in Washington State: A Guide for Child Care Providers
- Family Home Child Care Licensing Guide
- Child Care Center Licensing Guidebook
- Electronic Licensing Forms Frequently Asked Questions
- Get Ready to Read: Classroom Literacy Environment Checklist.

Child Care Aware of Washington has a training portal and resources for providers about child development.

The DEL website is open to the general public about child development and have access to materials about child growth and development like the Washington State Early Learning and Development Guidelines.

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

DEL provides this through the Department of Health's print materials available in Spanish and English.

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

DEL partners with the Department of Health to distribute materials to families with young children birth to 6 years old. Child Profile is a Washington State Department of Health program that sends child health information to all Washington State parents with a child age birth to six years old. Parents receive 17 age-specific mailings or emails with information on immunizations, well-child checkups, nutrition, growth and development, safety, and other child health topics. Most Child Profile materials are below. Visit www.childprofile.org for more information and materials.

DEL also contracts with CCA-WA to provide child development information and best practices that are research based to parents who call the Family Call Center. Information is also available about child development through Parent 123 and Within Reach, non-profit organizations that provide family support.
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

Parents receive materials about child development which includes social emotional supports through Child Care Aware of Washington's website which include: Parent Help 123 - information on local resources, pregnancy, child development and programs for families

Help Me Grow Washington - free child development information and resources

Kindergarten Readiness - learn if your child is ready to start kindergarten

Vroom - ideas for turning everyday moments into brain-building opportunities for your infant, toddler, or preschooler

Institute of Learning and Brain Science - I-LABS at the University of Washington is building an online library of resources for parents. Modules use videos and pictures to share research. The modules also explain why each topic is important to child development.

Zero to Three - a national, nonprofit organization that provides parents, professionals and policymakers the knowledge and know-how to nurture early development

Our Family Center Newsletters - articles and information about child development

ii. Providers

Providers receive information about social emotional/behavioral health of children through technical assistance, training, coaching and mentoring from CCA-WA and other training resources. Part of Early Achievers, DEL's QRIS, focuses on providers knowledge
and competency around supporting each child's social emotional health.

iii. General public

Materials are available to the general public through private partnerships with the Gates Foundation and Thrive Washington. Recent examples include "Love, Talk, Play" at http://www.lovetalkplay.org which talked about everyday ways to love, talk and play with a baby or toddler and VROOM, a partnership with CCA-WA that supports brain science including social emotional health http://www.joinvroom.org/

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

DEL partners with Thrive Washington, the Gates Foundation, the Department of Health, Frontiers of Innovation at Harvard University, Institute of Learning and Brain Science at the University of Washington, DSHS, Parent 123, and Child Care Aware of Washington to make information regarding social-emotional/behavioral and early childhood mental health of young children available to parents and providers.

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

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

☐ Yes.

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

☑ No.

School-age children from programs receiving child care assistance?

☐ Yes.

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

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

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

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

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

List the Lead Agency policy citation(s) and:

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

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

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

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

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

The 2015 Washington state legislature passed Senate Bill 5317 which requires universal screening and provider payment for all children in Medicaid programs for autism and developmental screening as recommended by the Bright Futures guidelines [https://www.aap.org/en-us/Documents/periodicity_schedule.pdf] of the American Academy of Pediatrics. This law was effective January 1, 2016 and amends the Revised Code of Washington (RCW) 74.09.520.

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

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.)

DEL will add information to the child care subsidy authorization letter to inform parents about the importance of getting a developmental screening for their child, and how to access services.

Projected start date for each activity: 05/15/2016
Projected end date for each activity: 08/01/2016
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with to complete implementation of this activity
DSHS

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.)
DEL will ensure that DSHS eligibility staff are trained to refer parents to developmental screenings following the Bright Futures screening schedule for all children with Medicaid, including referrals to Part C and 619 if parents are concerned about a developmental delay.

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
Department of Early Learning
Partners - Who is the responsible agency partnering with to complete implementation of this activity
DSHS

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.)

Provide information to CCDF providers through payment invoices, the DEL listserv and newsletter about the resources available to families for developmental screenings for their children.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
DEL
Partners - Who is the responsible agency partnering with to complete implementation of this activity
DSHS, Health Care Authority

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

For non-child abuse and neglect complaints by a parent, if the licensor finds the issue valid after following up with the provider, it is substantiated. For child abuse and neglect complaints, when Child Protective Services (CPS) investigates the allegation and determines that it is valid, it is considered substantiated.
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)

Electronic records in FAMLINK are maintained for seven years in the case of non-child abuse and neglect complaints. Substantiated complaints for child abuse and neglect are maintained permanently.

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

Complaints are available online within DEL's Child Care Check database. If more information is needed, frequently asked questions are available to read or the public can email check@del.wa.gov or call 1-866-48-CHECK (1-866-482-4325), Option 3.

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

DEL has a service level agreement with DSHS Children's Administration (CA) to receive and screen all child abuse and/or neglect allegations and licensing complaints for licensed and unlicensed care. CA intake determines whether the allegation regarding a licensed or unlicensed child care rises to the level of child abuse and neglect. DEL reviews the intake to determine if it a licensing only allegation or if the complaint should be re-screened by CA for child abuse and neglect. Complaints may also be a self report from the providers where the licensor asked the provider to call intake. If the complaint is about ECEAP, the DEL licensing supervisor will sent it to the DEL ECEAP Program Administrator. A record of complaints is kept in the licensing database.

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

Spanish, Vietnamese, Russian

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

All persons with a disability have the option to receive additional supports through the local community service office to access services. Offices are Americans with Disabilities Act (ADA) compliant which allows access to persons with a disability to more easily apply for services. Brochures and communication about how to apply for child care subsidy and what to look for in child care have TTY listed. The Child Care Aware Family Call Center which helps parents find child care has TTY capacity, phone and internet access and walk-in referrals.

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing processes for licensing and monitoring child care providers, processes for conducting criminal background checks, and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse.
The State/Territory must make public certain information about the results of such monitoring on a website in a way that is consumer-friendly and in an easily accessible format. (658E(c)(2)(D)) In order for a website to be a useful tool for parents, it should be easy to navigate, with a minimum number of clicks, and in plain language. States and Territories must post the results of the monitoring on the website no later than November 19, 2017. All other components of the website must be completed no later than September 30, 2016.

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

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

Provide the link to the website:

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

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

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

c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers. Describe

d) Provide information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe

e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate. Describe
Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date. Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

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

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

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

The main webpage for DEL, http://www.del.wa.gov/ has two tabs that implement the requirements: Parents & Family http://www.del.wa.gov/parents-family/ and Providers & Educators http://www.del.wa.gov/providers-educators/. On the Providers & Educators tab there are links to DEL Rules (WAC) which provide information about health and safety requirements for child care providers; information about the process for becoming licensed, obtaining background checks, monitoring, and offenses that prevent individuals from being providers.

DEL's Child Care Check webpage meets the requirement for sharing information for parents about monitoring checklists and history of violations for child care providers: https://apps.del.wa.gov/check/CheckSearch.aspx. This includes last date of inspection and history of violations.

On DEL's website families have multiple ways to search for providers. DEL's website define terms such as types of care, who is exempt and additional information as listed in our Frequently Asked Questions document. The website provides Google Translate.
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.)

Put contract in place for web redesign to include serious injuries, deaths and substantiated child abuse for children in licensed child care centers and family homes.

Projected start date for each activity: 01/01/16
Projected end date for each activity: 09/30/16
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with to complete implementation of this activity
DSHS Children's Administration.

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.)

Design and programming of the website to include serious injury, death and substantiated child abuse information to parents.

Projected start date for each activity: 02/01/2016
Projected end date for each activity: 05/31/2016
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with to complete implementation of this activity
DSHS Children's Administration, Child Aware Aware, and DEL Parent Advisory Group

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.)

Test new website to make sure it captures the correct data from FAMLINK and the new tracking database.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 08/01/2016
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with to complete implementation of this activity
DSHS, Provider Union and Parent Advisory Group

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.)

Roll out new website with a strategic communication plan

Projected start date for each activity: 08/15/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with to complete implementation of this activity
Child Care Aware

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 birth (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: Children with special needs generally have a physical, emotional or mental challenge limiting one or more major life activities. Major life activities include breathing, hearing, seeing, speaking, walking, using arms and hands, learning and playing. Verification of a child’s special needs is required from an individual who is not employed by the child care facility nor a relative of the provider or the child's family. This individual must be a health, mental health, education, or social service professional with at least a master’s degree or a registered nurse.

☐
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 -
An eligible consumer with parental control of one or more children and who lives in the state of Washington and is the child's biological or adopted parent, step-parent, legal guardian, adult sibling or step-sibling, nephew or niece, aunt or uncle, great-aunt or great-uncle, grandparent or great-grandparent

b) in loco parentis -
The adult caring for an eligible child in the absence of the biological, adoptive, or step-parent who is not a relative, or is a court-ordered guardian or a custodian.

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:
Legal, income-generating activity taxable under the United States Tax Code or that would be taxable with or without a treaty between an Indian Nation and the United States.

* attending job training
TANF families receive child care based on their Individual Responsibility Plan that lists approved activities such as job search, training, education, and work. Travel, study and sleep time may be included as needed. Non-TANF families may receive child care for job training or education if they work a minimum of 20 hours per week in unsubsidized work, or a minimum of 16 hours per week in state or federal Work Study; eligible activities include adult basic education, English language skills training, GED or high school completion (for those under age 22, work is not required), vocational education, and job skills training. Travel, study and sleep time may be included as needed.

* attending education
TANF families receive child care based on their Individual Responsibility Plan that lists approved activities such as job search, training, education and work. Non-TANF families may receive child care for job training or education if they work a minimum of 20 hours per week in unsubsidized work, or a minimum of 16 hours per week in state or federal Work Study; eligible activities include adult basic education, English language skills training, GED or high school completion (for those under age 22, work is not required), vocational education and job skills training.

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

☐ Yes.
☒ No.

If no, describe additional requirements
Generally, education and training alone do not meet the state's requirements for approved activities in CCDF programs. The following are exceptions:

Participation in the Basic Food Education & Training (BFET) or Resources to Initiate Successful Employment (RISE) programs does not require minimum work requirements for non-TANF consumers; consumers under the age of twenty-two and attending school for GED or high school also do not require minimum work
requirements. Consumers over the age of twenty-two are required to work in addition to education and training, but can meet the requirement through work study. Additionally, HCCP subsidies may be authorized for short-term (90 days or less) training such as job training that will directly result in employment, English as a second language (ESL) classes, General Education Development (GED) classes, or life skills classes.

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

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

1) Definition of protective services -
For a definition of protective services for the purposes of eligibility, DEL includes in the definition families who participate in the Homeless Child Care Program, children who are homeless because of a disaster, and children receiving family assessment response (FAR) services under RCW 26.44.260.

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 -

Definition of income includes countable income as money earned or received from:

- A TANF grant (except for the first three calendar months after starting a new
- Child support payments;
- Supplemental Security Income (SSI);
- Other Social Security payments, such as SSA and SSDI;
- Refugee assistance payments;
- Payments from the Veterans' Administration, disability payments, or payments from labor and industries (L&I);
- Unemployment compensation;
- Other types of income;
- VISTA volunteers, AmeriCorps, and Washington Service Corps (WSC) if the income is taxed;
- Gross wages from employment or self-employment. Gross wages includes any wages that are taxable. "Self-employment income" means a consumer's gross income from self-employment minus allowable business expenses;
- Lump sums as money a consumer receives from a one-time payment such as back child support, an inheritance, or gambling winnings; and
- Income for the sale of property.

The Homeless Child Care Program defines income as money earned from employment.

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

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

Describe how many jurisdictions set their own income eligibility limits

Fill in the chart based on the most populous area of the state.
<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a) 100% of State Median Income (SMI) ($/month)</th>
<th>(b) 85% of State Median Income (SMI) ($/month)</th>
<th>(c) &quot;Entry&quot; Income Level if lower than 85% Current SMI [Multiply (a) by 0.85] [(IF APPLICABLE)]</th>
<th>(d) &quot;Exit&quot; Income Level if lower than 85% Current SMI [(IF APPLICABLE)] [Divide (c) by (a), multiply by 100]</th>
<th>(e) &quot;Entry&quot; Income Level if lower than 85% Current SMI [(IF APPLICABLE)] [Divide (c) by (a), multiply by 100]</th>
<th>(f) &quot;Exit&quot; Income Level if lower than 85% Current SMI [(IF APPLICABLE)] [Divide (e) by (a), multiply by 100]</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3684</td>
<td>3131</td>
<td>1962</td>
<td>53%</td>
<td>No second tier</td>
<td>No second tier</td>
</tr>
<tr>
<td>2</td>
<td>4817</td>
<td>4094</td>
<td>2656</td>
<td>55%</td>
<td>No second tier</td>
<td>No second tier</td>
</tr>
<tr>
<td>3</td>
<td>5951</td>
<td>5058</td>
<td>3350</td>
<td>56%</td>
<td>No second tier</td>
<td>No second tier</td>
</tr>
<tr>
<td>4</td>
<td>7084</td>
<td>6021</td>
<td>4042</td>
<td>57%</td>
<td>No second tier</td>
<td>No second tier</td>
</tr>
<tr>
<td>5</td>
<td>8218</td>
<td>6985</td>
<td>4736</td>
<td>58%</td>
<td>No second tier</td>
<td>No second tier</td>
</tr>
</tbody>
</table>

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


d) These eligibility limits in column (c) became or will become effective on: 04/01/16


### 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 redetermination, but remains below the federal threshold of 85% of State median income. Providing a graduated phase-out supports long-term family economic stability by allowing for wage growth and a tapered transition out of the child care subsidy program. (658E (c)(2)(N)(iv)) This might be achieved through policies such as establishing a second income eligibility threshold at redetermination (e.g., establishing a different eligibility threshold for families first
applying for assistance and those already receiving assistance, sometimes called and “exit threshold”) or by granting a sustained period of continued assistance to the family before termination.

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

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

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

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

Overall Target Completion Date (no later than September 30, 2016) 07/01/16

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) Substantially implemented

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

DEL has drafted rules and is ready to implement the following policy for families. After 12 months of eligibility, at redetermination, if a family’s income exceeds the program income limit of 200 percent FPL but does not exceed 220 percent FPL, the family will be eligible for three additional months of services. Families meeting the above criteria will be prioritized if and when a wait list is in effect for Working Connections Child Care. Copays for families in the phase out period will not exceed those for a family at 200% Federal Poverty Level.

Unmet requirement - Identify the requirement(s) to be implemented A graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income.
Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Rulemaking and field implementation are currently in place and on track to meet the implementation date of July 1, 2016.

Projected start date for each activity: 12/02/2015
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Department of Social and Health Services

3.1.6 Fluctuation in Earnings

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

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

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

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

List the Lead Agency’s policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement

Policy Citation: Per WAC 170-290-0075 and WAC 170-290-0060, DSHS uses a
consumer's countable income when determining income eligibility and copayment. A consumer's countable income is the sum of all income minus any child support paid out (through a court order, division of child support administrative order or tribal government order).

Description that covers irregular fluctuations: To determine a consumer's countable income, DSHS determines the number of weeks, months or pay periods it took the consumer to earn the income and divide the income by the same number of weeks, months or pay periods. For consumers with new employment or no income history, the consumer makes an accurate estimate of their future income and DSHS verifies this income with the employer within 60 days. Self-employed consumers provide a profit and loss statement or a projected profit and loss statement if the business is new. Consumers verify their gross income by providing paystubs for the previous three months; Federal income tax return for the preceding calendar year; by using the DSHS employment verification form; or DSHS calls the employer to get an average income or averages income by using year to date totals on paystubs. In Working Connections Child Care, income is calculated by averaging the income of the three months prior to application. In Seasonal Child Care, the consumer's seasonal income is averaged over a year.

☐ 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:
For Working Connections and Seasonal Child Care Applicant statement: The name on application must match name on wage-stubs or employer verification form. If questionable, a worker will request additional identity verification. Applicants are cross-matched to other automated systems to verify data.

For the Homeless Child Care Program, families who are homeless don't always have identity document readily available. HCCP contractors are allowed to ask for documentation to prove
identity but it is not a program requirement. Families may self-declare identity information.

☑ Applicant's relationship to the child.

Describe:
For Working Connections and Seasonal Child Care Applicant statement: If questionable, additional verification (birth certificate, collateral statement, custody agreement) is requested. Applicants are cross-matched to other electronic systems such as Social Security's State On-Line Query Internet (SOLQ) or DSHS Automated Client Eligibility System (ACES).

For the Homeless Child Care Program, families who are homeless don't always have documents such as birth certificates readily available. HCCP contractors are allowed to ask for documentation to prove the child's relationship to the parent but it is not a program requirement. Families may self-declare relationship information.

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

Describe:
For Working Connections and Seasonal Child Care Applicant statement: If questionable, additional verification (birth certificate, collateral statement, custody agreement) is requested. TANF applicants are cross-matched to WorkFirst systems. For special needs children, additional verification from medical, educational or therapeutic provider is required.

For the Homeless Child Care Program, families who are homeless don't always have documents such as birth certificates readily available. HCCP contractors are allowed to ask for documentation to prove the child's identity, age, etc. but it is not a program requirement. Families may self-declare their child's information.

☑ Work.

Describe:
For Working Connections Child Care work is verified in a variety of ways: Employment Verification Form (DSHS # 14-252); cross-matching using electronic TALX program; paystubs; and/or phone verification with the employer. Self-employment is verified with tax documents, business records and receipts.
For Seasonal Childcare- Work is verified in a variety of ways: Employment Verification Form (DSHS # 14-252); cross-matching using electronic TALX program; paystubs; and/or phone verification with the employer.

For the Homeless Child Care Program- Families are eligible for HCCP if one parent is working and the other is participating in HCCP approved activities. HCCP contractors are allowed to ask for proof of employment and wages but it is not a program requirement. Families may self-declare employment information.

☑️ Job Training or Educational Program.

Describe:
For Working Connections Child Care job training or educational programs are verified in a variety of ways: school or training schedules; or phone verification with job training or school official.

Seasonal Child Care applicants do not have a training or educational program option outside of training on the job.

HCCP allows for short term (90 days or less) training and education programs such as ESL classes, GED classes, and job training that will directly result in employment. HCCP contractors are allowed to ask for verification but it is not a program requirement. Families may self-declare their participation in job training or educational programs

☑️ Family Income.

Describe:
For Working Connections income can be verified with the Employment Verification form (DSHS #14-252); cross-matching using electronic TALX program; paystubs; or phone verification with employers. For self-employment, income is verified with tax documents, business records and receipts. Child support paid or received is verified by court documentation, receipts, paystubs, and cross-matching with SEMS.

For Seasonal Childcare income can be verified with the Employment Verification form
(DSHS #14-252); cross-matching using electronic TALX program; paystubs; or phone verification with employers. Child support paid or received is verified by court documentation, receipts, paystubs, and cross-matching with SEMS.

HCCP only counts income from employment. HCCP contractors are allowed to ask for documentation of income but it is not a program requirement. Families may self-declare the amount of income from employment.

- **Household composition.**
  Describe:
  For Working Connections and Seasonal Child Care, if the household composition seems questionable, a collateral statement from a landlord is requested. Applicants are cross-matched to other electronic systems (such as ACES) for verification and consistency of responses.

  For HCCP families who are homeless don't always have document readily available. Families may self-declare the household composition.

- **Applicant Residence.**
  Describe:
  For Working Connections and Seasonal Child Care if the applicant residence seems questionable, a collateral statement from a landlord is requested. Applicants are cross-matched to other electronic systems (such as ACES) for verification and consistency of responses.

  For HCCP families who are homeless is based on the McKinney/Vento definition. Families who have no proof of homelessness may self-declare that they are homeless. Families who self-declare homelessness have a grace period of 30 days to provide documentation from a community member or agency verifying they are homeless.

- **Other.**
  Describe:
  Extended Eligibility: For Working Connections Child Care, telephone verification of a child's current enrollment from Head Start, Early Head Start or ECEAP staff, or a completed, signed verification form provided to DSHS is acceptable.
The Homeless Child Care Program uses a simplified eligibility process due to the families classified as protected services.

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:
  
  For Working Connections and Seasonal Child Care, the time limit for making eligibility determination is 30 days from the date the application is received.

For the Homeless Child Care Program, the family's eligibility is usually determined at the first contact with the contractor.

- Track and monitor the eligibility determination process
- Other.

Describe:

For Working Connections and Seasonal Child Care when the consumer's current eligibility period is within 45 days of ending, a reapplication is mailed with a letter describing the information needed to have their eligibility determined for another period.

- 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:

State/Territory TANF Agency: Department of Social and Health Services

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

"appropriate child care":
Child care licensed, certified or approved under federal, state or tribal law and regulations for the type of care the family wants and was free to choose within locally available options.

"reasonable distance":
Within range without traveling farther than is expected in their community.

"unsuitability of informal child care":
undefined

"affordable child care arrangements":
Does not cost more than the copayment would under the WCCC program.

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

☐ In writing
Verbally

Describe:
When child care exemptions are used, WorkFirst case managers document the exemption in the Individual Responsibility Plan.

List the citation to this TANF policy.
List:

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": Thirteen up to nineteen years old and under court supervision; or (2) Less than nineteen years old; and (a) Have a verified physical, mental, emotional, or behavioral condition that requires a higher level of care while
in the care of a licensed or certified facility, a DEL contracted seasonal day camp or an in-home/relative provider; and (b) Have their condition and need for higher level of care verified by an individual who is not employed by the child care facility and is either a: (i) Health, mental health, education or social service professional with at least a master's degree; or (ii) Registered nurse.

and describe how services are prioritized:
When a waitlist is required, families with children requiring special needs care are given priority.

b. Provide definition of “Families with very low incomes”: Families enrolled in TANF.

and describe how services are prioritized:
Families in TANF are prioritized for access to child care subsidy if a waiting list is needed to stay within the budgeted funding level.

c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act)
The goal of WorkFirst is to help low-income families build a pathway that can lead them out of poverty and toward economic security. The WorkFirst program is a partnership between the lead agency and six state agencies that administer a full-range of programs to help needy families. The agency that administers TANF coordinates with other entities (i.e. TANF office, other State/Territory agencies and contractors) and uses their priority rules to meet the needs of TANF families. further, TANF families, families seeking to cure TANF sanctions, homeless families and teen parents are prioritized for immeditate access if Working Connections Child Care has a waiting list.

3.2.2 Improving Access for Homeless Children and Families.

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

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

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

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

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

DEL has established the Homeless Child Care Program which is delivered by contractors in local communities who are part of the network supporting homeless children and families.

HCCP does not require families to produce immunization records to qualify for child care subsidies. Immunizations records are required for children to attend licensed child care but children have time to either obtain the child’s immunization or re-start immunizations or provide documentation according to WAC 170-295-7020. 170-295-7020.

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

HCCP contractors do monthly outreach and distribute HCCP posters and brochures in
the counties where the program is available. HCCP information is available to the McKinney/Vento liaisons in the school districts where HCCP is available.

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

**Foster children are not served through CCDF.**

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

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

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

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

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

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

3.3.1 Twelve Month Eligibility

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

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

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

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

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

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

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

Overall Target Completion Date (no later than September 30, 2016) 07/01/2017

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable
The state Legislature passed the Early Start Act during the 2015 Legislative Session. The law provides for 12-month eligibility redetermination periods and removes the requirement for families to report changes in circumstances. DEL has completed rules for Working Connections and Seasonal Child Care programs for 12 month eligibility to begin on July 1, 2016.

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

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
The rule change for 12 month eligibility for Working Connections and Seasonal Child Care is completed and ready for implementation on July 1, 2016.

Projected start date for each activity: 12/01/15
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity Department of Early Learning
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity Department of Social and Health 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.)
DEL will put contracts in place in all areas of the state to help guide families who are homeless through the process of finding a child care provider and securing subsidies.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2017
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Department of Social and Health Services
Homeless Child Care Program contractors

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.)
DEL will request legislative approval to change this program from a short term temporary program model to a 12 month eligibility model.

Projected start date for each activity: 12/01/2016
Projected end date for each activity: 04/30/2017
Agency - Who is responsible for complete implementation of this activity DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity N/A

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.)
Staff will analyze and implement system changes to technology and reports to support this model of homeless child care.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 01/30/2017
Agency - Who is responsible for complete implementation of this activity DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
DSHS, Homeless Child Care contractors

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.)

Rules will be modified to support the redesign of homeless child care and 12 month eligibility for subsidy.

Projected start date for each activity: 10/31/2016
Projected end date for each activity: 2/1/2017
Agency - Who is responsible for complete implementation of this activity DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity N/A

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.)
DEL will work with agency partners to implement this redesign of homeless child care.

Projected start date for each activity: 10/01/2016
Projected end date for each activity: 06/30/2017
Agency - Who is responsible for complete implementation of this activity DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DSHS, Homeless Child Care contractors

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

The family can apply, reapply or make changes by calling into a toll free number or by using Washington Connections, a web-based program, by mail and by fax.

DEL recently implemented a policy change to WAC 170-290-0031 whereby families can self-report work schedules instead of employers being required to supply it.

Homeless families can meet with the eligibility worker in the Homeless Child Care program and get determined eligible the same day.

☐ 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:
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.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a) Lowest &quot;Entry&quot; Income Level Where Copayment First Applied</th>
<th>(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?</th>
<th>(c) What is the percent of income for (b)?</th>
<th>(d) Maximum Highest &quot;Entry&quot; Income Level Before No Longer Eligible</th>
<th>(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?</th>
<th>(f) What is the percent of income for (e)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>0</td>
<td>15</td>
<td>NA</td>
<td>1980</td>
<td>374</td>
<td>19%</td>
</tr>
<tr>
<td>2</td>
<td>0</td>
<td>15</td>
<td>NA</td>
<td>2670</td>
<td>482</td>
<td>18%</td>
</tr>
<tr>
<td>3</td>
<td>0</td>
<td>15</td>
<td>NA</td>
<td>3360</td>
<td>590</td>
<td>18%</td>
</tr>
<tr>
<td>4</td>
<td>0</td>
<td>15</td>
<td>NA</td>
<td>4050</td>
<td>698</td>
<td>17%</td>
</tr>
<tr>
<td>5</td>
<td>0</td>
<td>15</td>
<td>NA</td>
<td>4740</td>
<td>806</td>
<td>17%</td>
</tr>
</tbody>
</table>
a) What is the effective date of the sliding fee scale(s)? 04/01/2016

b) Provide the link to the sliding fee scale
http://www.del.wa.gov/publications/subsidy/docs/WCCC_copays.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.

Copays are waived on a case-by-case basis for families in protective services as defined in the plan.

☐ 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:

☐ 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:
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:

Families may not be charged by the consumer's licensed, certified, or license-exempt provider, or be made to pay for the difference between the provider's private rate and the state maximum rate, when the provider's private rate for child care is higher than the maximum state rate.

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

Describe:

Families may not be charged by the consumer's licensed or certified provider, or be made to pay for:

(a) The difference between the provider's registration fee and the state's maximum registration fee, when the provider's registration fee is higher;
(b) Any day when the consumer's child is absent;
(c) Vacation days when the provider chooses to close;
(d) A higher amount than the state allows for field trips. If the provider has a written policy in place, the consumer may voluntarily pay the difference between the amount that the state allows and the actual field trip cost;
(e) A preschool tuition fee in addition to regular child care services; or
(f) Child care services after the final day of care, when the provider stops caring for the consumer's children.

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 parent is advised of their choice of providers through education materials, on pertinent forms and through verbal communication at any point in the eligibility determination process or case maintenance process. Through materials provided by DSHS, parents are advised about licensed child care providers, family, friend and neighbor license-exempt child care providers, Head Start, Early Head Start, and the Early Childhood Education and Assistance Program. WCCC has also partnered with Early Head Start to offer child care to eligible children utilizing Early Head Start services.

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

Agency website: www.del.wa.gov, provides multiple points of communications throughout the eligibility and renewal process. Links include:


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

Washington implemented an Early Head Start - Child Care Partnership pilot that offers features associated with contracts including enrollment based payment. These 316 pilot slots are available from January 1, 2016 through December 31, 2016.

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.)

These slots are available to both licensed centers and licensed family homes who are not Early Head Start Grantees. In both cases, the facility must meet licensing requirements and Early Head Start performance standards as to staff-child ratios, environment, curriculum, materials, etc. Family homes are paid a monthly rate calculated based on an average of family home rates across regions under the infant category, unless the home's regional rate would be higher, in which case the higher rate applies. The same payment logic applies to centers but based on center infant rates.

the process for accessing grants or contracts

Partner providers coordinate with an Early Head Start - Child Care Partnership
grantee and with families potentially dual eligible for Early Head Start and State Child Care Subsidy. Families contact DSHS to apply for subsidy and if they are determined eligible and have a participating provider, DSHS authorizes care under the partnership program. Providers sign a partnership agreement with DEL that outlines payment policies, QRIS participation requirements, and data sharing requirements.

the range of providers available through grants or contracts
Contracts are offered locally in King County, Pierce County, Spokane County, and Kitsap counties for the first year of this pilot project. Most providers are licensed centers but at least one family home is participating and family homes are part of the grantee recruitment strategy. Partner providers are required to participate and eventually rate level 3 in the state's QRIS.

how rates for contracted slots are set for grants and contracts
Rates are based on enrollment, meaning that partner providers receive a monthly rate based on an average of regional rates for infants. A vacancy rate for up to 30 days of child absence is also provided for so that partner providers have stable funding while seeking to fill vacated slots.

how the State/Territory determines which entities to contract with for increasing supply and/or improving quality
Partner providers are required to participate and eventually rate level 3 in the state's QRIS and to meet all Early Head Start performance standards.

if contracts are offered statewide and/or locally:
For the period of the pilot the three grantees are selecting partner providers from within King, Pierce, Spokane, and Kitsap counties, so the pilot is local. DEL will seek to gather data on pilot performance to determine whether the pilot can be expanded in the future.

- 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
  - Program to serve infants and toddlers
  - Program 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 policy is described in the administrative policies under "parent rights." It is also communicated in the parent brochures and on the parent applications. Additionally, licensing rules require that providers inform parents that they have unlimited access to their child(ren) in care at all times.

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

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

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

Describe:

☑ Restricted based on provider meeting a minimum age requirement

Describe:

The providers must be 18 years of age.

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

Describe:

☐ Restricted to care by relatives

Describe:
Restricted to care for children with special needs or medical condition
Describe:

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

☑ Other
Describe:

The following two documents are available in both English and Spanish. The first document is a one-page guide that explains exempt provider qualifications and parent responsibilities. The second document explains child care subsidies and billing rules for exempt providers.

The Homeless Child Care Program and the Seasonal Child Care do not allow for the provision of in-home care.

☐ No.

4.2 Assessing Market Rates and Child Care Costs

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

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

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

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

The State must set CCDF subsidy payment rates in accordance with the results of the current MRS or alternative methodology. When setting payment rates, the State must take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered reimbursement or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number served as of November 2014. In taking the cost of providing quality into consideration, it is important to consider such key factors as what it takes to support increased stability and reduced provider turnover when setting payment rates.

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

- ☑ MRS
- ☐ Alternative Methodology.

Describe:

- ☐ Both.

Describe:

- ☐ Other.

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

Describe:
The Early Learning Advisory Council (ELAC) and CCDF Executive Steering Committee recommended that DEL conduct a market rate survey while researching an alternative methodology that depicts the true cost of quality early learning in a tiered reimbursement system. DEL shared the results of the market rate survey with the ELAC and Executive Steering Committee.

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

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

Describe:
The Social and Economic Sciences Research Center (SESRC) at Washington State University conducted the multimode (telephone, web, and mail) survey of child care facilities for DEL from January to May 2015. The population for the Washington 2014 Child Care Survey consisted of all 1,977 licensed child care centers, and 1,536 of the 3,832 family home child care providers licensed in Washington as of September 2014. Two surveys were designed, one for child care centers and the other for family homes. DEL staff members compared previous studies to determine changes to the interview script and worked with SESRC to design a multimode survey. Telephone and web modes were offered to both the
center and family home providers; and a written, self-administered (mailed) questionnaire was offered only to multiplesite center directors. Each mode contained similar questions with only minor wording differences that were based on whether the survey would be heard (phone) or read (Internet and mailed). Different survey protocols were implemented based on whether each respondent was part of the single center group, a multiplesite group or a family home child care provider.

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

a) Geographic area (e.g., statewide or local markets):
The market rate survey reflects variations in the price of child care by the different regions that were used in the groupings.

b) Type of provider:
All licensed centers and a sample of licensed family home providers were surveyed.

c) Age of child:
Questions were asked about private pay for all ages of children - infants to age 12.

d) Describe any other key variations examined by the market rate survey, such as quality level
The survey examined benefits offered to child care staff, average yearly income of providers, educational levels and hours open.

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)
   08/01/2015

b) Date report containing results were made widely available, no less than 30 days after the completion of the report 08/31/2015
c) How the report containing results was made widely available and provide the link where the report is posted if available

Posted on the DEL website here:


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 $ 48.96 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 8.2

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

Rate $ 44.17 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 38.9

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

Rate $ 40.88 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 6

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

Rate $ 38.41 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 31.8
e) Preschooler (4 years), full-time licensed center care in the most populous geographic region

   Rate $ 34.30 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   Percentile: 4.4

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

   Rate $ 32.36 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   Percentile: 33.20

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

   Rate $ 30.89 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   Percentile: 69.9

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

   Rate $ 31.06 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   Percentile: 31.1

i) Describe the calculation/definition of full-time care:
   Over five hours per day, 22 days per month.

j) Provide the effective date of the payment rates: January 1, 2015

k) Provide the link to the payment rates:

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:
  
  For Working Connections Child Care and Seasonal Child Care, the add-on is $75 dollars per child per month additional payment if the provider is licensed or certified and provides at least 40 hours of non-standard hours care during one month. This payment is subject to availability based on the fixed amount appropriated annually for this purpose by the state Legislature.

- **Tiered rate/rate add-on for children with special needs as defined by the State/Territory.**
  
  Describe:
  
  Licensed centers, licensed family homes, and family, friends and neighbors (FFN) providers are all eligible to receive an additional special needs rate. This rate can vary based on the level of care required for the individual child and the type of provider providing the child care. There are two levels of Special Needs authorization that can occur for each given provider type. DSHS has a specialized team that determines if a level 1 special needs rate is appropriate or if a level 2 special needs rate review must take place. If a level 2 special needs review is required, an interagency review board reviews the circumstances around the case and determines:
  1. If a level 2 special needs rate is, indeed, necessary and,
  2. What the level 2 special needs rate will be after review, a special needs rate is authorized to the provider by an authorizing worker at DSHS and the provider can bill appropriately.

  The special needs rates have a range of maximums depending on the child's age, geographic region, and provider type. This range is as low as $.62 per hour to as high as $15.89 per hour.

- **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:
Licensed providers may participate in the state's quality rating and improvement system--Early Achievers. A provider's additional rate is dependent upon their rated level (which is on a scale of 1 through 5). Licensed providers may participate in the state's quality rating and improvement system, Early Achievers. A provider's additional rate is dependent upon their rated level, as follows: Level 2=2%, Level 3=5%, Level 4=10%, Level 5=15%.

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

Describe:
HCCP pays the same rates as the other state child care subsidy programs plus a Homeless Enhancement Bonus of $10 dollars for a full day and $5 dollars for a half day.

Other tiered rate/rate add-on beyond the base rate.

Describe:
The state pays registration fees for licensed providers of up to $50 dollars per child per calendar year and field trip fees to licensed family home providers of up to $30 dollars per child per month.

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:
Current rates for licensed family homes and FFN providers were set by collective bargaining by the licensed family home and FFN provider child care union. The market rate survey was considered as part of the bargaining. Both center and family home rates are based on the market rate survey and are subject to funding increases from the legislature. DEL will work to increase rates for centers, especially for infants, toddlers and preschoolers.
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:
DEL implemented Tiered Reimbursement using state funds so that the amount of expected expenditure would not be affected and maintaining availability of subsidy payments to the same number of families. Tiered Reimbursement provides payment incentives in the form of percentage increases on base rates to child care providers that provide higher-quality child care services for children in their care. DEL conducted a study on the cost of quality and based the tiered reimbursement on the recommended amounts.

Current tiered reimbursement for providers participating in Early Achievers, Washington’s QRIS, are 2% for providers rated level 2, 5% percent for providers rated level 3, 10% for providers rated level 4, and 15% for providers rated level 5.

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.
  
- 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
  
- 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.

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

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

Describe:

- DEL contracted a cost-of-quality study in 2013 which provided the foundation of the tiered reimbursement amounts.

- DEL used data on the number of children being served by providers at different levels within Early Achievers to determine how to set tiered reimbursement percentages and quality improvement awards with a focus on ensuring that providers at level 2 move to level 3.

- Providers were asked during the market rate survey if they accepted subsidized children, and if they were willing to care for subsidized children. All regions had providers with vacancies and who accepted children with subsidies at all age groups. According to the 2015 Child Care Aware of Washington Data Report, the vast majority of providers (84%) accept at least one kind of subsidy or offer other forms of financial assistance, although
some limit the number of subsidized children they accept at any given time.

☐ 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) 06/30/2017

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

The requirement will be met for licensed family homes as of July 1, 2016. The base rate increase will bring providers rating level 3 in Early Achievers to 75th percentile.

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.)

Implement the rate increase at the 75% percentile of the Market Rate Survey for licensed family homes at Level 3.

Projected start date for each activity: 03/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity DSHS

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.)

Decision package developed to raise Level 3 center rates to meet the 75% of the current Market Rate Survey.

Projected start date for each activity: 04/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity N/A
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.)

Submit the decision package to the Governor's Office for inclusion in the state budget.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: Governor's Office

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 rules for the new subsidy rates at the 75% percentile of the current Market Rate Survey for Level 3 licensed centers.

Projected start date for each activity: 04/15/2017
Projected end date for each activity: 06/30/2017
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: N/A

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 the system changes to the payment system, and payment charts.

Projected start date for each activity: 04/01/2017
Projected end date for each activity: 05/31/2017
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DSHS

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.)

Communicate the rate changes to licensed center providers, DEL and DSHS staff and the public

Projected start date for each activity: 05/01/2017
Projected end date for each activity: 06/30/2017

Agency - Who is responsible for complete implementation of this activity

DEL

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

DSHS and Child Care Aware of Washington

4.5 Payment Practices and Timeliness of Payments

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

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

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 4.5.2 through 4.5.3 below.

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

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

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

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

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

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

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

The Lead Agency

☐ Pays prospectively prior to the delivery of services.
Describe:
Pays within no more than 21 days of billing for services.

Describe:

Payment is processed within one business day if billing occurs before 4:30 p.m. Payment is processed within two business days if billing occurs after 4:30 p.m. HCCP contractors pay child care providers at least monthly, depending on their internal payment cycle.

Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance.

Describe including the State/Territory's definition of occasional absences

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

The provider is eligible to bill for any days and hours the child is authorized and scheduled to attend. This means that the child has unlimited absence days in each month, assuming that the child attends at least one day. The Homeless Child Care Program (HCCP) allows one authorized day per week as a paid absent day.

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

In WCCC and SCC, the provider is eligible to bill for any days or hours the child is authorized and scheduled to attend but absent, provided the child attended at least one day in that month. The Homeless Child Care Program (HCCP) allows one authorized day per week as a paid absent day.

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

Describe:

Licensed providers are paid in half-day and full-day units.

Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.)
Describe:
In Working Connections Child Care and Seasonal Child Care registration fees, field trip fees and non-standard hours bonuses for care after 6:00 p.m. and before 6:00 a.m., weekends and holidays are paid to providers.

✓ Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment
  Describe:
  Any termination of benefits is communicated to the provider within 10 days. Communication is sent immediately upon the termination of payment authorization.

✓ Has a timely appeal and resolution process for payment inaccuracies and disputes.
  Describe:
  Parents and providers have the right to request an administrative hearing. A consumer may receive benefits pending the outcome of a hearing.

✓ Other.
  Describe:
  HCCP contractors pay child care providers at least monthly, depending on their internal payment cycle.

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

  Payment in advance is not a practice that this state has used. Enrollment-based payment practices are actively being investigated but that research has not yet concluded.

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

☐ Policy on length of time for making payments.
  Describe length of time:
Track and monitor the payment process
Describe:

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

Other.
Describe:
Provider invoices are paid through DSHS' Social Service Payment System (SSPS). The provider usually receives their invoice before the last day of the month. Invoices may be submitted by phone through Invoice Express 24 hours per day, seven days a week. If an invoice is called in before 4:30 p.m. it will be processed for payment the next day. If the invoice is called in after 4:30 p.m., there is a one day delay. Invoices may be mailed to SSPS and will be entered into the system by DSHS staff. Providers can use direct deposit or have their check mailed to them. With direct deposit, the check will be deposited in the provider's account on the fifth day after the invoice was processed. Providers receive a paper check in the mail about 10 days after DSHS receive the invoice. HCCP contractors pay the child care providers, based on their individual invoicing cycles, which can vary. The HCCP program pays contractors once per month.

4.6 Supply Building Strategies to Meet the Needs of Certain Populations

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

4.6.1 Has the State/Territory conducted data analysis of existing and growing supply needs?
Yes.
Describe data sources
The 2014 market rate survey includes information about the provider's capacity for additional children. Child Care Aware of Washington's "2014 Annual Data Report" with county-level data, the "Early Head Start Program Information Report," regional data summaries and plans for improving infant and toddler services and the "Cost of Quality in Early Achievers" all show elements of the need to improve infant and toddler care, and increase subsidy rates to cover the cost of quality.

☐ 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
DEL is exploring how to improve the quality of infant and toddler care in center-based and family home child care within the Early Head Start Child Care Partnerships. The Washington State Association for Infant Mental Health (WA-AIMH) brought the Michigan Endorsement System for Infant Mental Health to Washington. The endorsement is a way to verify that a professional has attained specific education and training and has acquired the necessary competencies to deliver high quality social emotional health services to young children and their parents and caregivers. DEL is exploring ways to expand training and development opportunities for early learning professionals in this area. Also, Early Achievers Infant Mental Health consultants will be required to have or be working towards endorsement.
b) Children with disabilities (check all that apply)

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

Describe

For Working Connections Child Care and Seasonal Child Care, if the provider cares for a child with special needs and requests additional funding for the child's care, a special needs review board, reviews the request and approves or denies it based on the documentation. Child care providers receive a point within Early Achievers if developmental screenings are conducted for all children within 90 days of the family's enrollment and results are shared with parents. Families are then responsible for finding services. Child care providers receive an additional point in Early Achievers for providing individualized instruction for children and if provider-child interactions consider each child's developmental needs.

Child Care providers receive one point in Early Achievers for individualized instruction for children and provider-child interactions consider each child's developmental needs.

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)
- [x] Other.

Describe

If a provider cares for a child at least 30 hours per month during the times after 6:00 p.m., before 6:00 a.m. and/or on weekends and holidays, the provider is eligible to receive $75 dollars per child per month.
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

The Homeless Child Care Program (HCCP) provides child care subsidy to homeless families who qualify through 13 contractors throughout the state. HCCP offers a $5/half-day and $10/full-day enhancement fee. This fee increases access by offering an incentive to providers to accept children subsidized by the HCCP.

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

Washington State’s Early Start Act establishes timelines for all providers who receive subsidy to participate in the quality rating and improvement system, Early Achievers, and receive a Level 3 rating. Waitlist priority status, if implemented, is given to families receiving TANF, teen parents and families with children with special needs. DEL has used the ECEAP community needs assessment to identify the areas of the state that have high numbers of families in poverty. Those areas were targeted for outreach to providers about participating in Early Achievers in order to increase the number of high quality providers.
Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

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

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

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

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

Projected start date for each activity:
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 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

DEL licenses three types of care:
- Child Care Centers under Washington Administrative Code (WAC) 170-295;
- Family Home Child Care under WAC 170-296A; and
- School-Age Child Care under WAC 170-297.

Centers are facilities providing regularly scheduled care for a group of children one month of age through twelve years of age for periods less than 24 hours. Family home child care means a facility licensed by the department where child care is provided for 12 or fewer children in the family living quarters where the licensee resides as provided in RCW 43.215.010 (1)(c). School Age Child Care means the developmentally appropriate care,
protection, and supervision of children designed to promote positive growth and educational experiences for children outside the child's home for periods of less than 24 hours per day.

Child care facilities legally exempt from licensing pursuant to RCW 43.215.010 may request to be certified as meeting state licensing requirements. License exempt centers like tribal, school district or military child care can choose to be certified.

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 types of providers that are legally exempt from licensing but can receive CCDF:
- Providers who are located on a federal military reservation;
- Providers who work for local, state or the federal government;
- Providers who are located within a federally-recognized Indian reservation;
- Care in the child's home;
- Care by relatives.

For all providers on federal military reservations, or tribal or work for local/state or federal government, DEL will certify for payment only with the evidence that the provider has established policy for meeting the CCDF health and safety rules, and has gotten a background check that meets the CCDF rules. If the exempt provider asks DEL for certification, a licensor will work with them to get certified which meets the same standards as licensed child care.

DEL is in the process of establishing yearly monitoring of care in the child's home. Relatives will continue to be exempt. Both all types of exempt care get background checks. The background checks will meet the law within the prescribed timelines. Providers caring for children in the child's home and relative providers receive information about CCDF health and safety requirements.

☐ 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) Substantially implemented

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

Licensed child care centers and family homes are in compliance with this regulation. License exempt Family, Friends and Neighbor care requirement limits care to no more than 6 children from two families. Currently exempt Federally recognized Tribal providers can request Certification for Payment Only from DEL but must provide a copy of their standards and a letter from their tribal chair. Once their standards are reviewed and accepted as meeting basic health and safety needs, DEL will issue a Certification of Payment Only and Military providers follow their own rules of the Department of Defense.

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.)

Subsidy rules need to be modified to include health, safety and fire standards, ratios and group size, annual monitoring visits and group size.

Projected start date for each activity: 06/01/15
Projected end date for each activity: 09/30/16
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Department of Social and Health 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.)

Develop a process for the implementation of the new regulations for in home non-relative providers to qualify to receive CCDF subsidy.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity DSHS

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.)

Stakeholders and providers will be notified of the changes.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 09/15/2016
Agency - Who is responsible for complete implementation of this activity DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
DSHS, Child Care Aware of Washington
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.)

DEL will need to develop agreements with military, government and tribal entities which clarify expectations about health and safety requirements, ratios, group sizes and annual monitoring.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: N/A

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:

     1 month - 11 months
     - Ratio:

     1:4
     - Group Size:

     8

2. Toddler
   - State/Territory age definition:

     12 months - 29 months
3. Preschool:
   - State/Territory age definition:
     - 30 months - 5 years
       - Ratio:
         1:7
       - Group Size:
         14

4. School-Age
   - State/Territory age definition:
     - 5 years - 12 years
       - Ratio:
         1:10
       - Group Size:
         20

5. If any of the responses above are different for exempt child care centers, describe:
   No rules for ratios of the number of children and the number of providers or overall group size exist for license-exempt care. Although tribes are exempt from licensing, the certified tribes must meet the ratio and group size standards.

6. Describe, if applicable, ratios and group sizes for centers with mixed age groups.
   If a center is licensed for 12 or fewer children, children (excluding infants) may be combined. Staff-to-child ratios must be maintained to the age of the youngest child.
Larger centers may combine children of different age groups for periods of no more than one hour at the beginning and end of the day if staff-to-child ratios are maintained to age of the youngest child. Individual children, excluding infants not walking independently, may be in a different age group when it is based on the child’s individual needs and developmental level and the child's parents consent.

b) Licensed Group Child Care Homes:

1. Infant
   - State/Territory age definition:

   - Ratio:

   - Group Size:

2. Toddler
   - State/Territory age definition:

   - Ratio:

   - Group Size:

3. Preschool:
   - State/Territory age definition:

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

   - Ratio: 

   - Group Size: 

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 

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: 
The staff-to-child ratio is dependent on the age composition of children in care, the provider's years of experience and the number and qualifications of staff providing care. For example, a provider working alone with at least two years of experience and 10 hours of annual ongoing ECE training may have a ratio of 1:10, if all children are age
three through 12 years old. The ratio is lower when the children in care are younger than three years old, and/or the provider has less experience.


Describe the group size:
For providers who are working alone and have less than one year of experience, the maximum group size is six. For a provider working alone who has at least one year experience, the maximum group size is eight. For a provider with at least two years of experience, the maximum group size is 10 children. For providers with two or more years of experience, 10 hours of annual ECE education, and additional staff, the maximum group size is 12. A provider's own children are included in the group size count.

Describe the threshold for when licensing is required:
Any care outside of the child's home except for relative care.

Describe the maximum number of children that are allowed in the home at any one time:
12

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:
A provider's own children are included in the ratio and group size count. Ratios and capacity are considered the number of children at any one given time. There are no part-day limits.

Describe the limits on infants and toddlers or additional school-age children that are allowed for part of the day:
Ratios and capacity are considered the amount of children at any one given time. There are no part-day limits.

2. If any of the responses above are different for exempt family child care home providers, describe
Exempt child care in a relative's home limits the number of children receiving subsidy at one time to six children from two families for relative providers.

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:
For license exempt relative care in the relative's home, no more than 6 subsizided children are allowed from not more than two families.
Describe group size:
6 maximum for relative care in the relative's home.
Describe the threshold for when licensing is required:
Any out of home care that is not Military, Tribal or School District or less than 4 hours per day.
Describe maximum number of children that are allowed in the home at any one time:
6
Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:
Yes, not more than two families. The caregivers own children are not counted for relative caregivers.
Describe the limits on infants and toddlers or additional school-age children that are allowed for part of the day:
Maximum number of children is six at any one time, whether it is part day or full day.

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
      The infant lead teacher must be 18 years or older, have a high school degree or the equivalent and have documented child development education training or work experience, or complete 30 hours of Child Care Basics within 6 months of becoming a lead teacher.
and assistant teacher qualifications:
The assistant teacher must be at least 16 years or older and under direct supervision of lead staff. If 18 or older the assistant may have sole responsibility for a group of children without supervision for a brief period of time.

2. Toddler lead teacher
The toddler lead teacher must be 18 years or older, have a high school degree or the equivalent and have documented child development education training or work experience, or complete 30 hours of Child Care Basics within 6 months of becoming a lead teacher.

and assistant teacher qualifications:
The assistant teacher must be at least 16 years or older and under direct supervision of lead staff. If 18 or older the assistant may have sole responsibility for a group of children without supervision for a brief period of time.

3. Preschool lead teacher
The preschool lead teacher must be 18 years or older, have a high school degree or the equivalent and have documented child development education training or work experience, or complete 30 hours of Child Care Basics within 6 months of becoming a lead teacher.

and assistant teacher qualifications:
The assistant teacher must be at least 16 years or older and under direct supervision of lead staff. If 18 or older the assistant may have sole responsibility for a group of children without supervision for a brief period of time.

4. School-Age lead teacher
School-age lead teachers must be 18 years of age or older, have one year experience in school-age care, have a high school diploma or equivalent, and complete 30 hours of Child Care Basics within three months of assuming the position of lead teacher.

and assistant teacher qualifications:
Assistant teachers must be 16 years of age or older, and under the direction of a lead teacher or higher. If the assistant teacher is under 18 years of age, they must not be left in charge of a group of children. Program assistants eighteen years of age or older may have sole responsibility for a child or group of children for a brief period of time when there is a staff person on the premises who meets the lead teacher qualifications.

5. Director qualifications:
The Director must be at least 21 years of age or older, have child development knowledge proven through references, experience, and job performance, have between
10 and 45 college credits depending on the center capacity. School Age directors must have high school diploma, two years management experience in related field, 30 college credits or 20 credits and 100 clock hours of related community training.

b) Licensed Group Child Care Homes:
   1. Infant lead teacher
      and assistant qualifications:
   2. Toddler lead teacher
      and assistant qualifications:
   3. Preschool lead teacher
      and assistant qualifications:
   4. School-Age lead teacher
      and assistant qualifications:

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

c) Licensed Family Child Care home provider qualifications
   Licensed family child care home providers must be at least 18 years old and have a high school diploma or equivalent (GED, CDA or 40 credits of post-secondary educational), and have completed 30 hours of Child Care Basics training.

d) Other eligible providers qualifications:
   N/A

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.
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) 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)  Substantially implemented

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

This requirement is in place for licensed child care centers and licensed family homes.

Unmet requirement - Identify the requirement(s) to be implemented  First aid and cardiopulmonary resuscitation (CPR) certification

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

Draft and adopt proposed regulations to include this health and safety requirement for in-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity  Department of Early Learning
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity  N/A

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

In parallel of revising the WAC, revise the Provider Orientation to include this health and safety requirement for In-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity  DEL
Partners - Who is the responsible agency partnering with the State/Territory lead
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.)

Implement and communicate revised regulation.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

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.)

Draft and adopt proposed regulations to include this health and safety requirement for in-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: N/A

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
In parallel of revising the WAC, revise the Provider Orientation to include this health and safety requirement for In-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

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.)

Implement and communicate revised regulation.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

Unmet requirement - Identify the requirement(s) to be implemented: Prevention and control of infectious diseases (including immunization)

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

Draft and adopt proposed regulations to include this health and safety requirement for in-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity:
Department of Early Learning

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

In parallel of revising the WAC, revise the Provider Orientation to include this health and safety requirement for In-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

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.)

Implement and communicate revised regulation.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

Unmet requirement - Identify the requirement(s) to be implemented: Prevention of sudden infant death syndrome and use of safe sleeping practices
Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Draft and adopt proposed regulations to include this health and safety requirement for in-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: N/A

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

In parallel of revising the WAC, revise the Provider Orientation to include this health and safety requirement for In-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

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.)

Implement and communicate revised regulation.

Projected start date for each activity: 09/01/2016
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.)

Draft and adopt proposed regulations to include this health and safety requirement for in-home caregivers.

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

In parallel of revising the WAC, revise the Provider Orientation to include this health and safety requirement for In-home caregivers.

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.)
requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Implement and communicate revised regulation.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016

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

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.)

Draft and adopt proposed regulations to include this health and safety requirement for in-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity  DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity  N/A

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

In parallel of revising the WAC, revise the Provider Orientation to include this health and safety requirement for In-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

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.):

Implement and communicate revised regulation.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

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.):

Draft and adopt proposed regulations to include this health and safety requirement for in-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: N/A

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

In parallel of revising the WAC, revise the Provider Orientation to include this health and safety requirement for In-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

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.)
Implement and communicate revised regulation.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

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.)
Draft and adopt proposed regulations to include this health and safety requirement for in-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: N/A

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

In parallel of revising the WAC, revise the Provider Orientation to include this health and safety requirement for In-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

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.):

Implement and communicate revised regulation.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

Unmet requirement - Identify the requirement(s) to be implemented: Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))

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

Draft and adopt proposed regulations to include this health and safety requirement for in-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: N/A

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

In parallel of revising the WAC, revise the Provider Orientation to include this health and safety requirement for In-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

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.)

Implement and communicate revised regulation.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity  DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
DSHS

Unmet requirement - Identify the requirement(s) to be implemented  Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Draft and adopt proposed regulations to include this health and safety requirement for in-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity  DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
N/A

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
In parallel of revising the WAC, revise the Provider Orientation to include this health and safety requirement for In-home caregivers.

Projected start date for each activity: 06/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity  DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
DSHS

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.)

Implement and communicate revised regulation.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: DSHS

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) 09/30/2017

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

In-Home providers who care for children in the child's home currently receive a brochure printed in Spanish and English that covers the CCDF health and safety trainings.

Licensed Child Care Centers and Family Home Child Care review the CCDF requirements either prior or within 6 months of beginning child care through child care basics and orientation.

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.)

Develop the rule for license exempt providers who care for children in the child's home which specifies the required training at provider orientation in addition to the requirement for the provider to get a First Aid/CPR certificate.

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 **DEL**
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity **Child Care Aware of Washington**

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.)

**Modify Child Care Basics** (training meeting therequired training topics) to match what the provider needs to know when caring for a child in their own home.

- **Projected start date for each activity:** 06/01/2016
- **Projected end date for each activity:** 08/30/2016

**Agency - Who is responsible for complete implementation of this activity:** DEL

**Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity:** Child Care Aware of Washington

**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.)**

- **Communicate with DSHS on the changes for license exempt providers who are not relatives of the child but provide care for the child in the child's home.**

  - **Projected start date for each activity:** 07/01/2016
  - **Projected end date for each activity:** 08/31/2016

**Agency - Who is responsible for complete implementation of this activity:** DEL

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

**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.)**

- **Train in-home non-relative providers and monitor requirements through the provider training database.**

  - **Projected start date for each activity:** 07/01/2016
  - **Projected end date for each activity:** 09/30/2017

**Agency - Who is responsible for complete implementation of this activity:** DEL

**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 ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the required topic areas

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Revise the rules for license exempt non-relative providers who care for children in the child's home that ongoing training is required.

Projected start date for each activity: 06/15/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
N/A

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.)
Communicate with providers the new requirements for ongoing training.

Projected start date for each activity: 08/15/2016
Projected end date for each activity: 09/15/2016
Agency - Who is responsible for complete implementation of this activity DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Child Care Aware of Washington

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.)
Provide ongoing training for in-home providers.

Projected start date for each activity: 08/01//2016
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity
DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
N/A

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.)
Ensure that providers are meeting the requirements.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity
DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
N/A

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

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

☑ Nutrition (including age appropriate feeding).
   Describe:
The Washington Administrative Code (WAC) outlines nutritional requirements for licensed centers and licensed family home providers in relation to the milk served, food
and menus, food service standards, approved food sources, and food storage preparation and handling.

Access to physical activity.
Describe:
WAC outlines for licensed centers and licensed family home providers the need to include daily opportunities for children to develop small and large muscles; requires 30 minutes of scheduled outdoor time and have an outdoor play area that promotes a variety of age and developmentally appropriate active play opportunities for the children in care.

Screen time.
Describe:
In licensed family home and school age WAC, if the licensee or staff provide screen time for children in care; the screen time must be educational, and developmentally and age-appropriate; have child-appropriate content, and not have violent or adult content. Screen time is limited to less than two hours for each child, it shall not be required, and children cannot be closer than three feet away from the screen.

Caring for children with special needs.
Describe:
WAC outlines specific requirements for all licensed providers to meet special needs accomodations with department approval. The plan, including supervision, must include supporting documents from IEP's IFSP's, medical, educational, and/or social work professionals. 170-296A-0050, 170-297-0050, 170-295-3050 & 170-295-6010

Recognition and reporting of child abuse and neglect.
Describe:
DSHS is responsible for the investigation of child abuse and neglect and training of DEL staff both in person and online. As specified in RCW 26.44, all agency staff and child care providers are responsible to report child abuse and neglect.

Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety.
Describe:
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.
   Relatives are provided information about healthy development and how to provide a safe environment for children, along with resources for more information. Training is available to them in several areas that are similar to licensed providers. If the relative takes CPR/First Aid and 10 hours of training, they receive a bonus and an increase in their subsidy rate.

☐ 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

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.

<table>
<thead>
<tr>
<th>Overall Target Completion Date (no later than September 30, 2016)</th>
<th>09/30/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)</td>
<td>Substantially implemented</td>
</tr>
<tr>
<td>Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable</td>
<td>Complete compliance for licensed and certified child care centers, school-age programs or family homes is achieved by applying applicable Washington Administrative Code (WAC) and through annual unannounced monitoring visits.</td>
</tr>
<tr>
<td>Unmet requirement - Identify the requirement(s) to be implemented</td>
<td>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.</td>
</tr>
<tr>
<td>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.)</td>
<td>Work with military and tribal organizations that are certified for payment only to develop formal agreements that either authorize state agents to conduct oversight, or to demonstrate current health and safety rules apply including an annual unannounced monitor visit sufficient to meet the needs of the CCDBG Act of 2014. These agencies currently are eligible to receive subsidy, though oversight has been effectively delegated to the tribal or military organization.</td>
</tr>
<tr>
<td>Projected start date for each activity:</td>
<td>01/01/16</td>
</tr>
</tbody>
</table>
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.)

These agencies currently are eligible to receive subsidy, though oversight has been effectively delegated to the tribal or military organizations. Per the state action plan DEL will work with military and tribal organizations that are certified for payment only to develop formal inter-local agreements that either -

- authorize state agents to conduct licensing oversight, including an annual unannounced monitor visits and ongoing technical assistance; or
- require to demonstrate to the state how tribal or military child care health and safety rules are aligned with the current licensing regulations, and how implementation of these rules is monitored and supported on the ongoing manner, similar to the state annual unannounced monitor visits, sufficient to meet the needs of the CCDBG Act of 2014.

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:

DEL licensors are highly trained to provide services to all types of providers. Majority of the licensors have a specialization - their caseload is focus on family or center providers. According to the Washington State Human Resource classifications and official job description, licensors are Social Service Specialist 3 and required to have Bachelor's or Master's degree or be qualified in the Specialist 2 or 1 positions, and are preferred to have education in child development, risk assessment and decision making, interviewing techniques, role in expert representative in both court proceedings and multi-disciplinary team service delivery. If the person does not have this type of background, an in-training plan can be developed. Licensors are training in specific licensing rules and the internal policy and procedures of DEL. In some rural regions of the state licensors may have a "blended" caseload - they are trained to monitor both licensed child care settings - families and centers. Not unlike family home licensors, center licensors spend a large amount of their time on the road and "in the field." All DEL licensors (homes and centers) are currently equipped with tablets that can connect to the Internet when needed to ensure open and consistent dialogue with supervisors, licensees and colleagues. Tablets are also used so licensors have constant access to WAC documents and guidelines, as well as the electronic forms and checklists used for monitoring visits.
No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016)

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. The Revised Code of Washington (RCW) 43.215.260 (4)(a) explains the department's established monitoring practice. Agency procedure 10.1.8 Monitoring Visits, section 8 requires an unannounced monitoring visit for family home child care, child care center and school age program every 12 months.

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.

<table>
<thead>
<tr>
<th>Overall Target Completion Date (no later than November 19, 2016)</th>
<th>11/19/2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)</td>
<td>Partially implemented</td>
</tr>
<tr>
<td>Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable</td>
<td>A draft of a monitoring checklist of the nonrelative Family,Friends and Neighbor (FFN) care is completed. We are finalizing an action plan of the ongoing annual monitoring process, including communication, technical assistance, training, participation in Early Achievers, and licensing components.</td>
</tr>
<tr>
<td>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))).</td>
<td></td>
</tr>
<tr>
<td>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.)</td>
<td>DEL will require a fingerprint and background check for any nonrelative caregiver that receives a child care subsidy.</td>
</tr>
<tr>
<td>Projected start date for each activity:</td>
<td>09/01/2015</td>
</tr>
<tr>
<td>Projected end date for each activity:</td>
<td>09/30/2016</td>
</tr>
</tbody>
</table>
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning

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

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.)
DEL will require an annual unannounced monitoring visit for any nonrelative caregiver that receive a child care subsidy through rule making.

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
Department of Early Learning

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
None.

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.)
DEL will work to enhance communication with families and communities about quality childcare, especially in such topics as health and safety.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity
Department of Early Learning

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

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.)
DEL will increase the provision of ongoing technical assistance and training opportunities for all FFNs with the collaborative support of Service Employees International Union (SEIU), DSHS and Child Care Aware Washington.

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
Department of Early Learning
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
SEIU and Child Care Aware Washington

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:

☑ 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) 11/19/16

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

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

In 2007 NARA conducted a Washington state licensing services caseload study that
for the last 9 years is guiding development and organization of the DEL caseload procedures and practices. In January 2015 with NARA support DEL Licensing Analysts' team developed a Licensing Caseload/Workload Analysis, Washington State vs. National Sample, the Analysis had been updated in January 2016. Per analyzed national and Washington state data, and in consideration with NARA recommendations, currently the ratio of licensors to providers falls into the range recommended by NARA.

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

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.)

Guided by the National Association of Regulatory Agencies (NARA) recommendations for the ratio of licensors to providers, DEL is in the process of developing a licensing caseload policy which will allow to support the specialized caseloads of family and center providers, a blended caseload to combine services for family and center providers, and include the FFN nonrelative monitoring activities as a specialized caseload, as well as a part of the blended caseload.

Projected start date for each activity: 04/01/16
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
N/A

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.)

Establish the rule for ratio of licensors to providers so that monitoring can be maintained in a timely manner.
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):

  RCW 26.44 The Washington state legislature finds and declares: The bond between a child and his or her parent, custodian, or guardian is of paramount importance, and any intervention into the life of a child is also an intervention into the life of the parent, custodian, or guardian; however, instances of nonaccidental injury, neglect, death, sexual abuse and cruelty to children by their parents, custodians or guardians have occurred, and in the instance where a child is deprived of his or her right to conditions of minimal nurture, health, and safety, the state is justified in emergency intervention based upon verified information; and therefore the Washington state legislature hereby provides for the reporting of such cases to the appropriate public authorities. It is the intent of the
legislature that, as a result of such reports, protective services shall be made available in an effort to prevent further abuses, and to safeguard the general welfare of such children. When the child's physical or mental health is jeopardized, or the safety of the child conflicts with the legal rights of a parent, custodian, or guardian, the health and safety interests of the child should prevail. When determining whether a child and a parent, custodian, or guardian should be separated during or immediately following an investigation of alleged child abuse or neglect, the safety of the child shall be the department's paramount concern. Reports of child abuse and neglect shall be maintained and disseminated with strictest regard for the privacy of the subjects of such reports and so as to safeguard against arbitrary, malicious or erroneous information or actions. This chapter shall not be construed to authorize interference with child-raising practices, including reasonable parental discipline, which are not proved to be injurious to the child's health, welfare and safety.

☐ 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.

In collaboration with DSHS, CCA, and Parent Trust for Washington Children DEL is providing an ongoing support to the relative FFN providers, which include and not limited to:

1. Ongoing communication and information with the focus on health and safety of children and quality of early learning home environments - http://www.del.wa.gov/care/family/.

2. The Family Health Hotline, providing information and referral on health and finding services related to raising children, e.g. health insurance, nutrition, immunization, child care, child development, children with special needs, and parent/sibling support.

3. The Family Help Line - a statewide, toll-free line offering information and referral; assistance with problem-solving; advocacy; coaching and support.

4. Training opportunities for relative caregivers, foster parents, and adoptive parents are available at no cost through the Resource Family Training Institute - RFTI.

5. Regional and community-based Play and Learn groups and Community Café

6. Background checks for relative providers who receive subsidy.

☐ 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) 07/01/17

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 current background check process for licensed child care staff includes a search of the Washington state criminal and sex offender registry, the Washington state CA/N registry, the FBI NCIC check using Next Generation Identification and the national sex offender registry.

Unmet requirement - Identify the requirement(s) to be implemented. State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years,

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

DEL will need to update the electronic background check system.

Projected start date for each activity: 01/01/17
Projected end date for each activity: 07/01/17
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Washington State Patrol and Department of Social and Health Services/Background check central unit (DSHS/BCCU)

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 background check application will need to be modified to include information on child abuse and/or neglect from states where the applicant has lived the previous five years.

Projected start date for each activity: 03/01/2016
Projected end date for each activity: 05/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
DSHS and Washington State Patrol

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.)
Contacts with all states will be made sharing our process for access to Washington State child abuse and neglect registry.

Projected start date for each activity: 04/30/2017
Projected end date for each activity: 05/30/2017
Agency - Who is responsible for complete implementation of this activity DEL
Partners - Who is the responsible agency partnering with the State/Territory lead
Unmet requirement - Identify the requirement(s) to be implemented. **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.**

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.)

DEL must modify the subsidy rules to establish that all license exempt providers that receive CCDF subsidy funds must get a background check through DEL which meets all the federal requirements.

Projected start date for each activity: 01/15/2016  
Projected end date for each activity: 09/30/2016  

Agency - Who is responsible for complete implementation of this activity  
**Department of Early Learning**

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

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.)

DEL will need to get FBI approval to conduct fingerprint checks for license exempt providers.

Projected start date for each activity: 01/15/2016  
Projected end date for each activity: 09/30/2016  

Agency - Who is responsible for complete implementation of this activity  
**Department of Early Learning**

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity  
**Washington State Patrol**
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.)

Rules will be developed and promulgated about license exempt background checks for Family, Friends and Neighbor providers who receive CCDF subsidy.

Projected start date for each activity: 01/15/2017
Projected end date for each activity: 05/01/2017
Agency - Who is responsible for complete implementation of this activity: DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity: N/A

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:

DEL does not contract with a third party to complete the background check process.

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:

States requesting Washington State child abuse and/or neglect information will be referred to DSHS Children's Administration (DSHS/CA). DSHS/CA already has an established process for requests that are received from other states regarding foster care or adoptive homes. This process was established in 2006 when the Adam Walsh Law was implemented for those programs. DEL staff in the newly formed Background Check Unit will provide the requesting state with the contact information for DSHS/CA.
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:
   DEL disqualifies individuals based on crimes listed on the DEL director’s list of disqualifying crimes. The list contains crimes that are permanently disqualifying and crimes that are disqualifying for five years from the date of the conviction.

☐ No.

5.3.6 Does your 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/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.

DEL charges a $12 dollar application fee and the applicant is charged $44 dollars for the fingerprint process. The $12 dollar fee only covers the cost for submission of the application it does not cover the cost of processing the application. The fingerprint processing fees covers only the cost set forth by the fingerprint vendor, WSP and FBI.

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 background check policies and procedures are published on the DEL website at http://www.del.wa.gov/laws/licensing/Default.aspx.

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.

Washington has developed and implemented core competencies for early learning professionals. The Early Care and Education Core Competencies and the Youth and Adolescent Core Competencies are part of the state's education and training infrastructure, and serve as a foundation of our professional development system.

Career ladder or lattice.

Describe.

Washington's career ladder has recently been revised to better support the early learning professionals and career pathways often pursued, encompassing degrees in and outside of Early Childhood Education (ECE) and certificates commonly found in the early learning career pathway. An interactive career planning portal has also been developed to help individuals navigate careers in early learning. The link is: http://ececareers.del.wa.gov

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

Describe.

The recently-developed "stackable certificates" serve as the first year of post-secondary education with common coursework around the state that can be articulated to a four-year postsecondary early childhood degree program. The State Board of Technical and Community Colleges (SBCTC) allows for the articulation of 12 college credits at any state community college when the student holds a Child Development Associate (CDA) from the Council for Professional Development. The links are: http://www.del.wa.gov/Professional/career.aspx http://www.del.wa.gov/publications/PD/docs/WA%20Stackable%20Certificates_02-24-2015%20(3).pdf

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

Describe.

The state-approved trainer process that was developed in 2012 supports community-based training approved by the state and grounded in core competencies, early learning
guidelines and adult learning theory. Trainings are delivered by state-approved trainers in various community settings and higher education venues.

- **Workforce data**, including recruitment, retention, registries or other documentation, and compensation information.
  
  Describe.
  
  Washington's professional development registry, the Managed Education and Registry Information Tool (MERIT), collects information about the workforce. This includes information about employment, degrees and certificates, and workforce demographics. In December 2015, MERIT data was cross-walked with compensation data from the state’s P-20 data set for the first time to collect verified compensation data tied to early learning professional records.

- **Advisory structure** that provides recommendations for the development, revision, and implementation of the professional development system or framework.
  
  Describe.
  
  Washington's Early Learning Advisory Council (ELAC) provides recommendations for all of DEL's programs and initiatives. DEL also facilitates a Professional Development Workgroup of state leaders that reviews the current professional development and workforce landscape to provide recommendations for growth and development of the professional development system and related policies.

- **Continuing education unit trainings** and credit-bearing professional development.
  
  Describe.
  
  In Washington, early learning professionals have access to continuing education that is tied to higher education for college credit and they can also pursue continuing education units with state-approved trainers. In both instances, these professional development opportunities count for STARS hours. All state-approved continuing education is tied to Washington's core competencies and delivered in one of the following formats: in-person, online or hybrid. Continuing education is delivered by state-approved trainers or institutions of higher education and recorded in MERIT. Training is often accessed through Early Achievers and tied to Early Achievers participation.

- **State-approved trainings**.
  
  Describe.
  
  State-approved training is delivered by trainers who have completed the trainer approval process and have been approved by the Department of Early Learning. State-approved
trainers have verified education and experience, and have demonstrated their knowledge and skills in adult learning principles and content to support early learning professionals. State-approved trainers commit to aligning their training to Washington's core competencies, which include eight content areas and competency levels 1-5, the Early Learning Guidelines, trainer competencies and NAEYC's Code of Ethical Conduct for Early Childhood Adult Learners.

☑ Inclusion in state and/or regional workforce and economic development plans.

Describe.

Through MERIT and Washington's partnership with the Education Research and Data Center's (ERDC) P-20 longitudinal data system, we are gaining baseline information about the early learning workforce. The next phase of data collection includes tying compensation information with current workforce data. The Professional Development Workgroup is currently exploring policy recommendations to further develop professional career options in early learning and tie competitive compensation and benefits to careers in early learning. Building off of state and national data, we are improving the professional development system to attract and retain a highly qualified early childhood education workforce that represents the community, families and children served.

☐ 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.

In 2010, Washington legislation required the development of a Professional Development Consortium (PDC) that provided recommendations on the professional development requirements and the state system. This information was shared with the state's advisory council and a five year plan was developed. DEL is kicking off another deeper look at our professional development system, focusing on cross-sector career pathways, data and compensation. Washington State's Early Learning Advisory Council (ELAC) reviews and approves recommendations from the professional development workgroup(s).
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.

The Early Learning Guidelines (ELG) are embedded into the professional development system. Within DEL's trainer approval process, all trainers complete an online training to learn about the content of the Early Learning Guidelines and how to incorporate it into the content of the trainings that they will deliver. The Child Care Basics initial training requirement covers the following context: Valuing Each Child and Family; Child Growth and Development; Curriculum and Learning Environments; Family and Community Partnerships; Healthy Practices: Safety and Wellness, Nutrition and Safe Practices; Interactions and Guidance; Program Planning and Development; Professional Practice.

DEL is developing strategies to embed these training topics more systematically and to implement a model that allows providers to progress in breadth and depth. Next steps include the development of annual curricula that expands on previous learning, incorporates current research, emphasizes practice-based application and helps providers meet their annual continuing education with high quality content.

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.

Washington’s professional development system is flexible to allow for personalization across communities to recognize the unique needs of providers, children and families. Higher education partners serving tribal communities have provided outreach to tribal Head Start programs and Northwest Indian College has taken the initiative to modify the Initial Stackable Certificate to meet the needs of the local tribal community. Child Care Aware of Washington works with individual tribes to make professional development more accessible.
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.

The Stackable Certificates, which includes a series of three certificates, provides a foundation that is tied to Washington's quality rating and improvement system and that connects providers to specialized certifications. These include a certificate in each of the following: General ECE specialization, infant/toddler care, school-age care, family child care and administration. Additional work will be completed to develop and provide additional certificates related to dual language learners, advanced infant/toddler care and coaching early learning professionals.

To support the diversity of the early learning field and families served, DEL has allowed minor variations to the stackable certificates to embed teachings of cultural traditions. An example includes Northwest Indian College modifying the stackable certificates to personalize the curriculum to personalize the content for the Native American early learning professionals they serve.

As a state, the Department of Early Learning has convened a state workgroup to develop recommendations for culturally competent professional development standards that will be presented to legislation in July, 2016.

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.

Providers receive financial assistance to pursue and for attaining credentials and post-secondary degrees. This is a financial incentive that covers GED completion, Washington's stackable certificates, the Child Development Associate credential, and AA and BA degrees.
Financial incentives linked to education attainment and retention.

Providers receive an initial education award for education completed and verified. This includes degrees and certificates. Additional education incentives, called "movement awards" are provided for verified education beyond the initial education award to incentivize the continued pursuit of educational goals.

Registered apprenticeship programs.

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

High schools around the state offer the initial training, Child Care Basics, to students as part of their course curriculum. This allows for a vocational learning opportunity to introduce high school students to identify early learning as a career pathway. Some high schools have also worked with their local community college to provide the first of the stackable certificates, the Initial Certificate in ECE, to high school students.

Policies for paid sick leave.

Policies for paid annual leave.

Policies for health care benefits.

DEL provides limited funds through the collective bargaining agreement with SEIU Local 925 that assists with providing health care coverage to licensed family home providers who do not have other health insurance coverage. Eligibility requirements include caring for children with subsidy payments for a set amount of time per month.
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.

Supporting the emotional well being of providers is a part of Washington's professional development system. Opportunities to practice mindfulness and self-reflection is incorporated within our Early Achievers quality framework. Through training and coaching, we aim to build resiliency skills, stress reduction techniques, executive function skills and self-care. Trainings on each of these topics are also delivered through Early Achievers Training Institutes and state-approved training offered throughout the year.

Other. Describe.

DEL is currently working on the development and implementation of a substitute pool that would allow time away from child care for providers to access professional development opportunities to support their successful participation and growth in Early Achievers. The substitute pool and stipends for substitutes will be available in 2016.

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.

Washington is committed to building and retaining an early learning workforce that is high quality and represents the children and families of our state. Strategies to recruit and retain providers to serve our diverse population include highlighting alternative pathways to completing educational qualifications, strengthening messaging related to career options in early learning in multiple languages and communities, and developing a substitute pool to provide hands-on experience to potential providers, including college and high school
students and family friend and neighbor caregivers. DEL is working closely with partners in higher education, state government agencies, family child care union and engaging in additional community feedback opportunities to hear directly from the field about how to recruit diverse providers.

6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.

- [ ] Informational materials in non-English languages
- [ ] Training and technical assistance in non-English languages
- [ ] CCDF health and safety requirements in non-English languages
- [ ] Provider contracts or agreements in non-English languages
- [X] 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.

The primary languages requested and provided in Washington include English, Spanish and Somali.
6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

☐ Yes.
The State certifies that no later than March 1, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families.

Describe that training and technical assistance for providers

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/16

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
None

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
Training materials will be developed and delivered to coaches and technical assistance specialists to use with providers. The design of the training will leverage and expand learning and supports to provider related to serving homeless children and their families.

Projected start date for each activity: 04/01/16
Projected end date for each activity: 09/30/16
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Child Care Aware of Washington

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.)
DEL will work with Homeless Child Care contractors to identify specific providers who care for children who are homeless to pilot the training and give feedback about the content.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Homeless Child Care contract staff
Licensed 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.)
Coaches and technical assistance specialist will implement the training with providers.
Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity  DEL
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Child Care Aware of Washington

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.
DEL will evaluate the progress toward improving quality by measuring the educational accomplishments of the teachers, quality of the learning environment and school readiness with Washington's kindergarten entry assessment. Examples of data that is currently collected includes post-secondary scholarships, number of completed certificates and degrees (State's ECE stackable certificates, associate's degrees, bachelor's degrees), Early Achievers ratings, and Washington Kindergarten Inventory of Developing Skills (WaKIDS), Washington's kindergarten entry assessment. A baseline salary survey has been completed and additional effort is underway to further develop DEL's cost of quality model in connection with teacher roles and compensation

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

☑ CCDF funds.
Describe:

CCDF funds will be used to further develop a progression of training requirements that builds on Washington's core competencies and ties to our Early Achievers quality framework. Cross-agency collaboration will ensure funds are leveraged to meet various professional development needs, provide common messaging, and highlight best practice and research. Additional focus will be on developing a training model grounded in learning communities, coaching, reflective practice and using innovative practice to implement and measure impact.

☑ Other funds.

Describe:

State funds support professional development scholarships and training reimbursements for licensed providers.

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:

Currently, the Early Learning and Development Guidelines and Early Achievers Health Training cover foundational information related to the topics listed above. DEL has interest in further developing training to go deeper into these topics, expanding from content knowledge to application, and to make these online trainings available also in person and in language(s) other than English.

☑ Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2).

Describe:

The Early Childhood Education and Assistance Program (ECEAP), the State funded PreK program, has a no expulsion policy, ensuring a child is not removed from the program for behavioral reasons. Emphasis is placed on supporting classroom teachers, planning to meet each child’s individual needs, engaging community resources and adjusting scheduling or settings in collaboration with the family.
Washington is focused on supporting additional work to extend this practice to other licensed programs and offering the training and technical assistance to ensure it is effective.

Currently, the Early Learning and Development Guidelines and Early Achievers Health Training, School Readiness Training and Child Care Basics cover foundational information related to behavior management strategies, including positive behavior interventions that promote positive social-emotional development and early childhood mental health and reduce challenging behaviors. DEL has interest in further developing training to go deeper into these topics, expanding from content knowledge to application, and to make these online trainings available also in-person and in language(s) other than English.

- 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:
  Cultural awareness training is provided in the initial required training series, Child Care Basics, as well as in the Early Achievers training, Cultural Competency. Child Care Basics which is 30 hours is offered in person and online in various languages and progress is being made to offer all Early Achievers trainings in person, which would include in person delivery of the Cultural Competency training that could then be presented in multiple languages.

- 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:
  Early Achievers offers a training series tied to developmentally appropriate, and culturally and linguistically responsive instruction aligned with the Early Learning and Development Guidelines. Training tied to the Environment Rating Scale, Classroom Assessment Scoring System, the Early Learning and Development Guidelines as well as regionally based Early Achievers Training Institutes covers this information. There is additional interest in developing training to support dual language learners.
DEL has adopted the Racial Equity Theory of Change within our work, including professional development. DEL is also in the process of creating cultural competencies for professional development to guide the implementation of knowledge and skills within the professional development system.

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:
Support for licensed providers includes access to a coach or technical assistance specialist as part of Early Achievers. Coaches and teaching assistants help to connect families to developmental screening and to navigate community services. Infant and toddler consultation also provides this service specializing in infant/toddler care. A strong demand for developmental screening training has been identified and will be developed.

Using data to guide program evaluation to ensure continuous improvement.

Describe:
DEL uses data from the Washington's Kindergarten Inventory of Developing skills (WaKIDS) assessment to inform professional development needs. As a result of this data collection DEL is creating three trainings on Numeracy in partnership with Office of the Superintendent of Public Instruction (OSPI) to train caregivers on methods for teaching numeracy skills to young children. Data is pulled from MERIT, Washington's State Registry System in which all state trainers enter trainings to identify Science, Technology, Engineering and Math (STEM) classes offered throughout the state in response to WaKIDS data.

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

Describe:
Using the Washington's Racial Equity Theory of Change as a frame, DEL is focused on keeping an equity lens on developing programs, services and system building. Through the collection and analysis of data, DEL identifies geographical areas that experience a concentration of poverty and can begin to target resources and
strategies to bring personalized support to reduce barriers and close the opportunity gap.

- Caring for and supporting the development of children with disabilities and developmental delays.

Describe:
DEL provides training and emphasis on individualized approaches for child care, connecting providers to external supports as needed to support each child's Individualized Education Plan or Individualized Family Support Plan for children under 3 who are receiving IDEA support.

- Supporting positive development of school-age children.

Describe:
Washington has developed core competencies for professionals working with school age youth. This covers the skills and knowledge professionals should have when working in school-age settings, including how to support the positive development of school age children. Learning opportunities are built off of these competencies, as they are for the ECE competencies.

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
      Thirty hours of Child Care Basics training which covers the topics: Valuing Each Child and Family; Child Growth and Development; Curriculum and Learning Environments; Family and Community Partnerships; Healthy Practices: Safety and Wellness, Nutrition and Safe Practices; Interactions and Guidance; Program Planning and Development; Professional Practice. These areas include the required training topics covered in 5.1.6 with the exception of First Aid/CPR which is a required certificate for all center staff.

      Providers also receive a 3 hours center orientation in which the Washington Administrative Code (WAC) licensing requirements are covered one on one with a DEL licensor.

      2) Number of on-going hours and any required areas/content
      Ten hours of annual continuing education covering the required CCDF training areas.

b) Licensed Group Child Care Homes
   1) Number of pre-service or orientation hours and any required areas/content
      Washington does not license group child care homes.

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

c) Licensed Family Child Care Provider
   1) Number of pre-service or orientation hours and any required areas/content
      Thirty hours of Child Care Basics which covers: Valuing Each Child and Family; Child Growth and Development; Curriculum and Learning Environments; Family and
Community Partnerships; Healthy Practices: Safety and Wellness, Nutrition and Safe Practices; Interactions and Guidance; Program Planning and Development; and Professional Practice. These areas include the required training topics covered in 5.1.6 with the exception of First Aid/CPR which is a required certificate for all licensed family home providers.

Providers also receive a two hour family home orientation which covers the WAC licensing requirements.

2) Number of on-going hours and any required areas/content
Ten hours of annual continuing education covering the required CCDF training.

d) Any other eligible CCDF provider

1) Number of pre-service or orientation hours and any required areas/content
Currently license exemptFamily, friend and neighbor (FFN) caregivers are provided a brochure that meets the current training requirement of healthy development including a link to the Early Learning and Development Guidelines, safe sleep for infants, healthy meals and snacks, information on children with special health care needs or developmental disabilities, child safety, child abuse and neglect, environmental safety, emergency preparedness, safe home environments and where to go for additional resources and information.

Family, friend and neighbor (FFN) caregivers have the option and will receive a financial bonus if they complete Child Care Basics, CPR, and training. The caregiver must complete eight hours of annual continuing education to maintain their annual incentive bonus in First Aid/Blood-borne pathogens.

2) Number of on-going hours and any required areas/content
If the caregiver must completes the optional training and incentive, then they must complete eight hours of training each year.

☐ 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) 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) Substantially implemented

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

Business practice training is available for family, friend and neighbor caregivers and for licensed providers in some regions of the state only.

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.)

Baseline collection of current strategies in select regions of the state will be completed with ECEAP and child care providers.

Projected start date for each activity: 11/01/2015
Projected end date for each activity: 01/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Early Learning
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Child Care Aware of Washington

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.)
DEL will consult with subject matter experts to inform the development of a trainer guide from the information gathered from providers.

Projected start date for each activity: 02/01/2016
Projected end date for each activity: 04/30/2016

Agency - Who is responsible for complete implementation of this activity
Department of Early Learning

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

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.)
DEL will work on a draft curriculum and implementation plan which will be circulated for input.

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity
DEL

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

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.)
DEL will begin statewide business training for all providers.
6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

6.3.1 Describe the status of the State's early learning and development guidelines appropriate for children from birth to kindergarten entry.

☑ The State assures that the early learning and development guidelines are:
  - Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
  - Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
  - Updated as determined by the State. List the date or frequency

Reviewed every five years.

☑ Fully implemented and meeting all Federal requirements outlined above - as of March 1, 2016. List the Lead Agency's policy citation(s) and describe using 6.3.2 through 6.3.4 below

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

☐ Three-to-Five
   Provide a link:

☑ Birth-to-Five
   Provide a link:
   Includes birth to age 8, available in English and Spanish. To view the document in English, go here: http://www.del.wa.gov/publications/development/docs/Guidelines.pdf
Five and older (check if State/Territory has standards for five and older that complement academic but cover child development areas not covered by k-12 academic standards).

Describe and provide a link:

☐ Other.
Describe:

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

☐ Yes, the State/Territory has a system of technical assistance operating State/Territory-wide

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

☐ 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:
Through Early Achievers, providers receive training and technical assistance on how to develop curriculum that aligns with the early learning guidelines.

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

Describe:
The technical assistance is offered through Early Achievers, Washington's quality rating and improvement system (QRIS).

☐ Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and
development guidelines.
Describe:
Through Early Achievers and infant/toddler consultation, providers receive technical assistance and in-person support for implementing the early learning guidelines in birth through age 3 settings.

☑ Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines.
Describe:
Through Early Achievers and Washington's state funded preschool, ECEAP, providers have access to technical assistance for implementing the early learning guidelines with preschool-age children.

☑ Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines.
Describe:
The Early Learning and Development Guidelines online training is available for free to all early learning professionals. Technical assistance is offered by contracted state partners who provide professional development opportunities for professionals caring for school age children. Washington is beginning work on expanding the QRIS to include school age programs.

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 discretionary funds are used.

☑ Other funds.
Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
State funds are used to support quality improvement and technical assistance.

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.

High-quality child care helps children get ready for success in kindergarten and beyond. Early Achievers, Washington’s quality rating and improvement system (QRIS), is voluntary.
for licensed child care providers and helps early learning programs offer high-quality care. Early Achievers connects families to child care and early learning programs with the help of an easy-to-understand rating system.

Coaching and resources are offered to child care providers that supports each child's learning and development. Research shows that providers improve the quality of their programs when provided with additional resources along with the support of coaching.

Starting on August 1, 2016, all licensed or certified child care providers who provide care for non-school age children and receive state child care subsidies must enroll in Early Achievers and achieve a level 3 or higher rating within 30 months. After August 1, 2016, all new licensed or certified providers receiving state child care subsidies will need to register in Early Achievers within 30 days of the initial subsidy payment and rate at level 3 or higher within 30 months.

Effective October 1, 2015, all state funded ECEAP programs must register in Early Achievers and rate and maintain a level 4 or higher by March 1, 2016. New ECEAP programs must register for Early Achievers within 30 days of the start of their state funded preschool contract and rate at a level 4 or higher within 12-18 months depending on the program model.

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.)
  - Race to the Top Early Learning Challenge and state funds.

- Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3. Indicate which funds will be used for this activity (check all that apply)
☑ CCDF funds.  
Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
Quality set-aside and infant-and toddler set aside.

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

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

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

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

☑ Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5. Indicate which funds will be used for this activity (check all that apply)

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

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

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

☐ State funds.

☐ 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.)

☐ 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.

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

☐ 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.

☐ Other funds.
   Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
7.2 Quality Rating and Improvement System

7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?

☐ Yes, the State/Territory has a QRIS operating State/Territory-wide.
Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available
Washington's quality rating and improvement system (QRIS), Early Achievers, is administered by the Washington State Department of Early Learning. Technical assistance, professional development and coaching services are provided by Child Care Aware of Washington and the data collection and evaluation is conducted by regionally located teams from the University of Washington. More information about Early Achievers can be found here: www.del.wa.gov/care/qris

☐ 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.)
Starting on August 1, 2016, providers must enroll in Early Achievers within 30 days of receiving their first subsidy payment and achieve a level 3 rating within 30 months of registering for Early Achievers.
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:

Licensing is equivalent to level 1 in Early Achievers and considered to be the foundation to quality, which the Early Achievers Quality Standards are built upon. In order for providers to achieve higher levels and proceed through the rating process they must be in good standing with licensing. Licensing status is reconciled weekly by the QRIS team. DEL is in the process of aligning child care licensing standards, QRIS standards, and state-funded preschool standards to clearly define a quality pathway for all providers that is grounded in health and safety and extends to individualized instruction and comprehensive services. In addition to clarity for providers, DEL hopes to realize efficiencies in monitoring.

- 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

Starting on July 1, 2016, annual quality improvement awards are reserved for providers who serve at least 5 percent subsidy and rate at a Level 3, 4 or 5. Additionally, qualifying providers receive a higher subsidy rate that starts as a 2
percent participation incentive on top of their base rate and increases at each higher rated level.

☑ 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:

The state will evaluate progress in improving the quality of child care programs in multiple ways including a comprehensive annual data report required by the legislature; analysis of Early Achievers participation and rating outcomes; and independent program evaluations, such as the Early Achievers validation study conducted by the University of Washington.
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:
  
  DEL is piloting pathways for child care providers to become ECEAP contractors. DEL would work with local partners to provide shared services, so centers and family homes that care for infant, toddler and preschool-age children will access comprehensive resources and services.

- Establishing or expanding the operation of community or neighborhood-based family child care networks.
  
  Describe:
  
  Early Achievers rewards informal family home child care peer networks by offering points for participating in reflective practice meetings. DEL is exploring the possibility of providing support networks through the Early Head Start Child Care Partnership grantees. Early Achievers standards include developing a community of practice. DEL
offers resources to help providers consider how they can develop their own network. We are developing a toolkit to describe the benefits of developing a network. DEL is exploring the idea to contract with local family child care associations/networks to provide professional development opportunities and access to resources and information.

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

Describe:

To improve the quality of center-based and family home infant and toddler child care DEL is supporting the provision of comprehensive services through partnerships between child care providers and Early Head Start. The Consortium for High Quality Infant/Toddler (I/T) Care was established to support Early Head Start-Child Care Partnership grantees. Consortium partners agreed to contribute resources and develop policy supports that prioritize services for programs that participate in the Consortium. In turn, programs contribute to statewide understanding about what resources, practices and strategies infant/toddler programs need to implement high quality care and services.

DEL is also convening a cross-sector professional development consortium to establish formal connections between higher education, state partners, and the early learning workforce. Topics of discussion include:

- Increasing the number of specialized higher education courses, related field experiences and ongoing professional development opportunities with a sole focus on the prenatal and/or birth to age three age group and their families within the WA higher education system. Also under consideration is the concept to embed specific coursework for working with infants and toddlers as requirements in ECE Associates and Bachelor degrees.
- Exploring the possibility of Early Educator Central to track professional development specific to supporting infants and toddlers,
- Supporting higher education in integrating resources such as EarlyEdU to increase content specific to professionals working with infants and toddlers
- Supporting WA State colleges and universities to offer preparation for the Washington Infant Mental Health Association endorsement at levels I through IV.

DEL is scaling up a targeted professional development intervention to teachers working in licensed family child care homes and child care centers, called Filming Interactions to Nurture Development (FIND). This intervention is one of the Frontiers of Innovation communities of practice with the Harvard Center for the Developing Child, based on brain research, with a theory of change that includes increased responsive interactions between teachers and children as well as positive outcomes for children. Teachers receive 10 weeks of relationship based training that highlights the importance of
nurturing, responsive interactions for children birth to three. This training is delivered through the infant-toddler consultation network and is currently in the first phase of implementation, in 4 out of 10 geographical regions around the state. The second phase of implementation will begin in July 2016, where the remaining 6 regions will begin to receive targeted coaching. In 2017, this intervention will be at full scale and an evaluation of the efficacy of the outcomes for teachers and children will be used to help inform the possible expansion to impact more teachers and children.

☐ Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care.

Describe:

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

Describe:

DEL provides interdisciplinary infant/toddler early learning coaching through a regionally-based, statewide network of qualified infant/toddler specialists. Coaching is provided to licensed child care centers and family child care homes within the state QRIS to improve the quality of care for infants and toddlers. Infant Mental Health consultation will be conducted during onsite visits within the statewide network of infant-toddler specialists within the state QRIS. Focus areas may include developmental screening, reducing expulsion, connecting families with referral resources and strategies for inclusion. Health consultation will be available for family child care providers and toddler classrooms through the statewide network of infant-toddler specialists within the state QRIS. Focus areas may include immunizations, infectious disease prevention, developmental screening, nutrition and physical activity. DEL also uses Filming Interactions to Nurture Development (FIND), a video coaching program for parents and other caregivers of high-risk children that employs video to reinforce naturally occurring, developmentally supportive interactions between caregivers and young children. This simple, practical approach emphasizes caregivers' strengths and capabilities. FIND is currently implemented through some regions in the statewide network of infant-toddler specialists within the state 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
Describe:
The state Part C early intervention program, Early Support for Infants and Toddlers (ESIT) is located within the department. ESIT collaborates with DEL child care licensing and home visiting programs to support coordinated service delivery for children and families. A state level memorandum of understanding (MOU) and guidance to the field is under development to ensure coordinated service delivery between DEL child care, home visiting programs and early intervention. The guidance will include information on referrals, screening, follow-up, service coordination, teaming among multiple providers, and data sharing as appropriate. ESIT implementation sites will revise or develop local MOUs and pilot the recommendations in the guidance. Early intervention providers will link families to other community services they are eligible for so that families have access to social-emotional supports in addition to early intervention.
The DEL professional development team provides support and consultation to ESIT in the development of trainings and technical assistance materials for child care providers.

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

Describe:
DEL includes infant and toddler standards within the context of the ITERS-R and Infant CLASS and Toddler CLASS. The remaining standards within Child Outcomes, Curriculum and Staff Supports and Family engagement require providers to be reaching all children—this means each child in the program from birth through five years old. DEL is exploring developing professional development, incentives and standards that further support the care and education of infants and toddlers and their teachers within the Early Achievers quality framework. A work group will be established to explore how quality standards can be modified for the specific needs of infants and toddlers. Changes to Early Achievers will also be based on the recommendations from the University of Washington’s evaluation study, FIND data, the Birth-to-3 subcommittee and the Early Achievers Review Subcommittee.

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

Describe:
DEL is in the process of aligning standards across licensing, the state preschool and Early Achievers, including information from Infant Toddlers Environmental Rating Scale (ITERS) and Infant/Toddler CLASS.
Developing infant and toddler components within the early learning and development guidelines.

Describe:

Infant and toddler components are already integrated within the early learning and development guidelines.

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

Describe:

DEL provides information about the quality of child care and early education programs to parents through an online search tool, Child Care Check. In partnership with CCA of WA, DEL will create a single source of clear and easily-accessible information for parents and caregivers to access details on providers' QRIS rating level, licensing history, and other indicators of quality and safety that will help parents and caregivers make informed choices. DEL provides information, support, and education to family, friend and neighbor (FFN) providers of infants and toddlers through Play & Learn groups.

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:

DEL uses Filming Interactions to Nurture Development (FIND), a video coaching program for parents and other caregivers of high-risk children that employs video to reinforce naturally occurring, developmentally supportive interactions between caregivers and young children. This simple, practical approach emphasizes caregivers' strengths and capabilities. FIND is currently implemented through some regions in the statewide network of infant-toddler specialists within the state QRIS.

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:
Early Achievers uses the ERS and CLASS along with educational levels of the teachers and other quality indicators to measure the quality of child care programs and services.

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
   Child Care Aware of WA serves as Washington's CCR&R with a state network office overseeing services delivery statewide via six regions.

☐ 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:
To date, CCA of WA's progress in improving the quality of child care programs and services is measured by provider volume in the QRIS system as it relates to receiving training, technical assistance, and demonstrating that they are ready for evaluation. This is further quantified by the quality rating level achieved by individual child care and early learning
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:
Licensing standards and agency procedures ensure yearly monitor visits are completed. Yearly monitor visits check compliance of licensing rules including, but not limited to: staff qualification, child to staff ratios, supervision, training requirements, safe food handling and preparation, safe storage of medicine, cleaning supplies and other toxins, and safe play areas. Noncompliance issues found are documented, and prompt follow-up is initiated to confirm timely correction of deficiency has been achieved. These Licensing rules are the foundation of Early Achievers. Technical assistance, coaching and professional development that are embedded within Early Achievers aim to reinforce licensing standards and help providers reach higher levels of quality in order to improve outcomes for children.

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:
DEL will track the progress of improving quality through ongoing analysis of Early Achievers rating data as well as the participation and outcome data that will be synthesized in a comprehensive annual report.
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.

Early Achievers is a comprehensive QRIS that uses the ERS, CLASS to assess the environment and adult-child interactions. The QRIS also includes the use of the LENA tool, a device that measures language usage within a facility by capturing adult word counts, child vocalizations, and the number and duration of turn-taking conversations. Additionally, Early Achievers evaluates programs on quality standard areas that include child outcomes, curriculum and staff supports, professional development of staff and family engagement through the Strengthening Families model. Teaching Strategies GOLD® and the Washington Kindergarten Inventory of Developing Skills (WaKIDS) are other assessment tools used across the state to measure child level outcomes. DEL uses this data to assess progress and shift course when necessary in order to improve outcomes for children.

Starting on August 1, 2016, all licensed or certified child care providers that receive state child care subsidies for non-school age children must enroll in Early Achievers and achieve a Level 3 or higher rating within 30 months. After August 1, 2016, all new licensed or certified providers receiving state child care subsidies will need to register in Early Achievers within 30 days of their initial subsidy payment and rate at Level 3 or higher within 30 months. Effective October 1, 2015, all current state funded preschool programs must register in Early Achievers and rate and maintain a Level 4 or higher. Early Achievers participants that provided state funded preschool services in the 2014-2015 school year must rate Level 4 by March 1, 2016. This means their data collection is complete by March 1, 2016 and their rating will be posted after all the data is quality checked. All new state funded preschool programs must register for Early Achievers within 30 days of the start of their state funded preschool contract and rate at a level 4 or higher within 12-18 months depending on the program model.
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:

The University of Washington's validation study of Early Achievers will show which quality standards and measures demonstrate positive child outcomes. This information will help DEL narrow the focus of Early Achievers to those areas that make the biggest impact for children. DEL will continue to use Early Achiever rating outcomes including ERS and CLASS scores to inform continuous quality improvement efforts of Early Achievers. Additionally, DEL must submit a comprehensive annual report to the Legislature that evaluates the progress of quality improvement initiatives. DEL will review the Early Achievers participation pipeline-analyzing providers and their outcomes at each phase of Early Achievers from Level 2 activities through rating. Data about participants informs agency investments in professional development and additional tools or resources in order to continue making improvements to the system that will have a positive impact on child outcomes. DEL is also assessing participation barriers and working on developing solutions to ensure all providers who are now mandated to participate in Early Achievers can be successful. DEL is also monitoring extensions to Early Start Act timelines due to exceptional circumstances and analyzing the different reasons for extension. DEL will continue to review child outcomes in state funded preschool using Teaching Strategies Gold data and consider how positive results might be replicated in Early Achievers sites. DEL is in the process of developing a research team that will continue to evaluate DEL programs and initiatives in order to ensure the agency makes progress on its goals.

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

☐ 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:

   By creating a pathway to recognize national accreditation within Early Achievers we hope that more programs will participate in the QRIS, thus increasing the number of programs sampled for data analysis to help DEL assess the quality of child care programs across the state. It will also provide a way to recognize various accreditation achievements within our QRIS, creating more efficiency in the rating process. This information will be collected and synthesized in a comprehensive annual report due each December.

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:
   
   In the current Early Achievers quality standards, there is a component in the Family Engagement and Partnership section where child care providers are awarded a point value for providing information about community-based programs available for parents in languages represented in the facility (including community mental health, child nutrition,
physical fitness, food banks, Child Find, medical/dental resources, etc.).

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:

Early Achievers rating data and a comprehensive annual report will reflect the progress the state is making in improving quality. This includes ITERS data and Infant CLASS and Toddler CLASS data. DEL is also in the process of implementing FIND (Filming Interactions to Nurture Development) as one of the services available through infant/toddler consultation. DEL in partnership with the University of Oregon and the University of Washington is conducting an evaluation of the impact of FIND on children and their teachers. All of these data points will help us to better target resources for child care providers who serve infants and toddlers and inform our continuous quality improvement efforts of our system.

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.

DEL participates as a member of the Universal Developmental Screening Partnership. Using a collective impact approach, partners are guided by a common agenda with a focused understanding of the problem and a shared vision for change. Strategies include planning aligned content and scalability to train early care and education preschool and child care providers about developmental screening with a consistent approach. In addition, strategies address strengthening the network of state and local services that respond to the unique needs of children and families and articulating screening and responsive services pathways for different types of providers.
8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory’s policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory’s own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly “checking” on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

8.1 Program Integrity

8.1.1 Describe how the State ensures that their definitions for violations have been modified, staff trained, and program integrity procedures revised to reflect new requirements.

Describe:

Pursuant to CCDF reauthorization, the Washington State Legislature enacted law, effective July 1, 2016, providing for 12-month eligibility in Working Connections Child Care (WCCC) and the elimination of reporting requirements whereby participants had to report continued eligibility during their eligibility period. DEL is revising the rules, modifying staff training, and re-writing procedure manuals due to changes in the areas of: background checks meeting all the federal requirements for all CCDF providers, Graduated Phrase Out policy and implementation; Fluations in Earnings; Increasing Access for Vulnerable Children and Families; Protection for Working Parents; Family Contribution to Payment; Setting Payment
Rates; and Payment Practices and Timeliness of Payments. DEL and DSHS are collaborating to implement the changes in policy to realize reduction in errors. DEL is requesting funding in the 2016 supplemental budget to apply the same policy to Seasonal Child Care (SCC). Further, DEL provides subsidy billing training for licensed family home, and family, friends and neighbors (FFN) child care providers. DEL has requested in the 2016 supplemental budget additional funding for provider training to reduce erroneous billing. DEL provides regular policy clarifications to DSHS and internally on subsidy policy and audit procedure. As described in other plan sections, DEL is implementing income phase-out, FFN fingerprint background checks and non-relative FFN monitoring. All these efforts represent program integrity procedure improvements.

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:
  The auditors will meet monthly with subsidy policy staff to understand the implementation of the new policies and incorporate into the audits the policy changes.

☐ Other.
  Describe:
  DEL and DSHS discuss changes and clarifications to policies and procedures at least quarterly.
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:

DEL has internal control policies in place to ensure segregation of duties to safeguard its assets and check the accuracy and reliability of its accounting data. Washington state’s Agency Financial Reporting System (AFRS) is the accounting system of record and has IT security built in to ensure segregation of duties. In addition, the collaboration between the different departments relating to expenditures and reviewing all data adds an additional safeguard. DEL also has multiple approvals built in to the contracts, budgeting, and expenditure systems to ensure proper levels of approval.

DEL has a sub-recipient monitoring plan supported by the agency’s Integrated Contract Information System (ICIS). The agency Contracts and Procurement Manager meets with agency contract managers on a monthly basis to provide regular training on state and federal requirements. Contract managers are required to conduct a risk assessment for each contract and monitor the contract according to the risk rating. To assist in ensuring the DEL
sub-recipient contract contains the required monitoring elements, the Grants Manager completes the Sub-recipient Monitoring Worksheet with the Contract Manager. The monitoring worksheet contains standard Administrative and Fiscal requirements, while the Programmatic section is tailored to capture specific monitoring elements based on the Federal Program Grant requirements. All sub-recipient contracts contain language on roles and responsibilities and assurances of compliance with grant requirements.

All contracts and agreements are sent to through a chain of reviews including positions such as Program Manager, Contracts Office, Chief Financial Officer, Budget Director, and Assistant Director for approval prior to execution. Once the contract is fully executed, the services are monitored by the Contract Manager and may include the following control items determined by the contract risk assessment: periodic reporting, on-site reviews and observations, invoice and audit report reviews, customer surveys, and other periodic contact. DEL Fiscal compares all approved invoices to the contract budgets to ensure funds are available and payments are not duplicated. After payments have been processed through AFRS the expenditure reports are reviewed by Budget, Grants Manager and Program staff on a monthly basis.

DEL has a service level agreement with DSHS that sets out the requirements they will follow regarding CCDF grant funds. On a monthly basis, DSHS invoices DEL for the DEL share of the child care subsidy program costs and provides quarterly data for the 696 reports, TANF transfer, state matching, mandatory and maintenance of effort. DSHS includes Enterprise Reporting (ER) backup from the official state accounting system with all billings. The State Auditor's Office annually audits the CCDF grant in detail at both DEL and DSHS to ensure accuracy and accountability.

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:
  
  **Routine algorithms are run by the Health Care Authority that identify large amounts of payment errors, such as duplicate payments, duplicate social security numbers, and overbilling.**

- 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:
  
  **A system report is run to identify children with birthdays that will require a change in the child care rate.**

- Review of enrollment documents, attendance or billing records
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?

- [x] Require recovery after a minimum dollar amount in improper payment.

  Identify the minimum dollar amount:  **No minimum amount**

- [x] Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)

- [x] Recover through repayment plans

- [x] Reduce payments in subsequent months

- [x] Recover through State/Territory tax intercepts

- [x] Recover through other means

- [ ] Establish a unit to investigate and collect improper payments.

  Describe:
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: **No minimum amount**
  
  - Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
  - Recover through repayment plans
  - Reduce payments in subsequent months
  - Recover through State/Territory tax intercepts
  - Recover through other means
  - Establish a unit to investigate and collect improper payments.
    
    Describe composition of unit below

Other.  
Describe:

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:  No minimum amount

- Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- Recover through repayment plans
- Reduce payments in subsequent months
- Recover through State/Territory tax intercepts
- Recover through other means
- Establish a unit to investigate and collect improper payments.
  - Describe composition of unit below

- Other.
  - Describe:

- 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:
    Clients can be disqualified if they do not make their co-payment to the provider and fail to make arrangements with the provider to pay. If clients are discovered to commit fraud, it is referred to OFA for investigation and could be referred for criminal prosecution. Clients may appeal a disqualification through the administrative hearing process and may appeal the administrative order to a civil court with proper jurisdiction.
Disqualify provider.

If checked, please describe, including a description of the appeal process for providers who are disqualified:

All providers must follow program requirements and they do have an administrative review process available to them for appeals. The providers are informed of this appeal right at the time of the notification of disqualification. Licensed providers who commit a program violation are at risk of license revocation or summary suspension. Both actions have due process though supervisory review and can be appealed through administrative review process. Licensing actions also have a secondary review process in which either party can appeal an initial administrative decision to a review judge. The provider is also entitled to an appeal process though the civil court system after administrative rights have been exhausted.

Prosecute criminally

Other.

Describe: