

# Child Care and Development Fund (CCDF) Plan For Maine FFY 2019-2021

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## 1 Define CCDF Leadership and Coordination with Relevant Systems

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

### 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)). Note: An amendment to the CCDF State Plan is required if the Lead Agency changes or if the Lead Agency official changes.

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

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

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Department of Health and Human Services

Street Address: 11 State House Station

City: Augusta

State: Maine

ZIP Code: 04333

Web Address for Lead Agency: <http://www.maine.gov/dhhs/index.shtml>

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Ricker

Lead Agency Official Last Name: Hamilton

Title: Commissioner of the Department of Health and Human Services

Phone Number: (207)287-4223

Email Address: [Ricker.Hamilton@Maine.gov](mailto:Ricker.Hamilton@Maine.gov)

### 1.1.2 Who is the CCDF Administrator?

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the state's or territory's CCDF program. ACF will send programmatic communications, such as program announcements, program instructions, and data collection instructions, to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the Co-Administrator or the person with administrative responsibilities and include his or her contact information.

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Crystal

CCDF Administrator Last Name: Arbour

Title of the CCDF Administrator: Child Care Services Program Manager

Phone Number: (207)626-8683

Email Address: Crystal.Arbour@Maine.gov

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

Street Address: 2 Anthony Ave.

City: Augusta

State: Maine

ZIP Code: 04333

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

CCDF Co-Administrator First Name: Heather

CCDF Co-Administrator Last Name: Tyler

Title of the CCDF Co-Administrator: Acting Associate Director of Early Intervention and Prevention Services

Description of the role of the Co-Administrator: The co-administrator will oversee the implementation of the CCDF State Plan as it relates to the Child Care Subsidy Program.

Phone Number: (207)624-7919

Email Address: Heather.Tyler@maine.gov

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

Street Address: 2 Anthony Ave

City: Augusta

State: Maine

ZIP Code: 04333

## 1.2 CCDF Policy Decision Authority

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

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

- All program rules and policies are set or established at the state or territory level. If checked, skip to question 1.2.2.
- Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.

1. Eligibility rules and policies (e.g., income limits) are set by the:

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

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

- Other.

Describe:

2. Sliding-fee scale is set by the:

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

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

Other.

Describe:

3. Payment rates are set by the:

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

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

Other.

Describe:

4. Other. List and describe other program rules and policies and describe (e.g., quality rating and improvement systems [QRIS], payment practices):

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

a) Who conducts eligibility determinations?

- CCDF Lead Agency
- Temporary Assistance for Needy Families (TANF) agency
- Other state or territory agency
- Local government agencies, such as county welfare or social services departments

- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe

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

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

Describe

Maine Roads to Quality (MRTQ)/The Professional Development Network (PDN) is responsible for the Childcare Choices website, a resource for finding child care by address, city, or zip code in Maine. The Maine Department of Health and Human Services (DHHS) is partnered with the Opportunity Alliance Contact Center to supply an online directory and resource center with the website 2-1-1 Maine at <https://211maine.org/> or through text messaging capabilities.

c) Who issues payments?

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

## Describe

**1.2.3 Describe the processes the Lead Agency uses to monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.2, including written agreements, monitoring and auditing procedures, and indicators or measures to assess performance of those agencies (98.16(b)). Note : The contents of the written agreement may vary based on the role the agency is asked to assume or type of project, but must include at a minimum, tasks to be performed, schedule for completing tasks, budget which itemizes categorical expenditures in accordance with CCDF requirements, and indicators or measures to assess performance (98.11(a)(3)).**

The State of Maine has a contract with MRTQ/PDN that contains specifications of work to be performed that include mandatory performance measures monitored by the Lead Agency through required reporting.

**1.2.4 Lead Agencies must assure that, to the extent practicable and appropriate, any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop must be made available on request to other public agencies, including public agencies in other States, for their use in administering child care or related programs (98.15(a)(11)).**

**Assure by describing how the Lead Agency makes child care information systems available to public agencies in other states to the extent practicable and appropriate.**

Public agencies in any state can contact the Lead Agency and request information regarding Maine's Child Care information system. Contact can be made through the State's Internet sites, either Maine.gov, DHHS, or Office of Child and Family Services (OCFS). The DHHS site has a Contact Us electronic form to make a request. OCFS's website allows questions and requests to come through the webmaster question/comment or data information request with electronic forms. The Lead Agency also has a Central Office contact phone number on the OCFS Internet page. The URL's for the two sites are

<https://www1.maine.gov/dhhs/contactus.shtml> and <http://www.maine.gov/dhhs/ocfs/webmaster.shtml>. OCFS's Information Services Manager is a member of the ACF-Children's Bureau Child Welfare IT Managers, which is a connection between all the states for sharing information system development and use.

### **1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)).**

**Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally identifiable information.**

State of Maine employees sign a confidentiality agreement at the time of hire and complete New Hire Orientation training on Confidentiality. Authorization and Release forms must be signed by Parent to release information outside of Lead Agency. CCSP providers sign an agreement to maintain confidentiality of all records and other information concerning parents and/or children, except for authorized disclosures to staff of the Department of Health and Human Services or other authorized State or Federal agency staff in accordance with law.

### **1.3 Consultation in the Development of the CCDF Plan**

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

(1) Appropriate representatives of units of general purpose local government-(658D(b)(2); 98.10(c); 98.12(b); 98.14(b)). General purpose local governments are defined by the U.S.



Census at

[https://www.census.gov/newsroom/cspan/govts/20120301\\_cspan\\_govts\\_def\\_3.pdf](https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf).

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

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

### Consultation

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

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

a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments.

The Child Care Advisory Council (CCAC) holds at least four (4) meetings per year that are open to the general public. Members representing Maine State Departments include the Department of Education (DOE), the Head Start Collaboration Director, Children's Behavioral Health Services, the Fire Marshall's Office, and the Department of Economic and Community Development. Other members include representation of the Senate, the House of Representatives, Parents, Business Owners, Child Care Providers, Tribal, Head Start, PDN, and a Nonprofit Advocacy Organization. The CCDF Plan preprint, State Child Care Subsidy Rules, Market Rate Survey, and Table Rule for Clarification of the Child Care Development Block Grant (CCDBG) Final Rule were provided to the CCAC. Time was spent during meetings and a subcommittee was created to review and create recommendations to be given to the Lead Agency on the development of the CCDF Plan for consideration.

b) Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body.

The State Advisory Council is the Maine Children's Growth Council (MCGC) and includes several members that are also members of the CCAC. The State Agency discussed and provided the CCDF Plan Preprint and the Table Rule for Clarification of the CCDBG Final Rule to the MCGC members, encouraging discussion and recommendations to present to the State Agency.

c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for States to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many States and Tribes have consultation policies and procedures in place.

The State Administrator contacted each of the five tribes recognized in Maine; The Aroostook Band of Micmac Indians, The Houlton Band of Maliseet Indians, Penobscot Nation, Passamaquoddy Tribe at Indian Township and Passamaquoddy Tribe at Pleasant Point. Each of the tribal CCDF administrators was the primary point of contact. The State Administrator sent individual emails and USPS letters to each of the tribal Administrators. A phone conferences took place between the State Administrator and the Penobscot Nation Administrator and between the State Administrator and the Pleasant Point Passamaquoddy Administrator. Copies of the CCDF Plan Preprint and CCSP Rules were sent to each of the tribal administrators with an invitation for discussion and recommendations for the State Plan.

d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan.

The Lead Agency consulted with its Division of Environmental and Community Health (MeCDC), Children's Licensing and Investigation Unit on the CCDF Plan. MRTQ/PDN who is responsible for the Quality Rating and Improvement Scale (QRIS), also collaborated extensively with the Lead Agency on the development of the CCDF plan.

### **1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)).**

Reminder:

Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

a) Date of the public hearing. 06/18/2018

Reminder: Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g. the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).

b) Date of notice of public hearing (date for the notice of public hearing identified in (a)). 05/29/2018

*Reminder:* Must be at least 20 calendar days prior to the date of the public hearing. If more than one public hearing was held, enter one date of notice (e.g. the date of the first notice, the most recent notice or any date of notice that demonstrates this requirement).

c) How was the public notified about the public hearing? Please include specific website links if used to provide notice.

The public was notified through four major papers around the state. Emails were sent to all Child Care Providers. MRTQ/PDN placed the notice in their weekly flyer to all of their subscribers. The MCGC and CCAC were notified via email. The document was posted to the Lead Agency's Child Care webpage. <http://www.maine.gov/dhhs/ocfs/ec/occhs/child-care.html>

d) Hearing site or method, including how geographic regions of the state or territory were addressed. The public hearing was held at 2 Anthony Ave in Augusta and able to be viewed online video or telephone with Zoom.

e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.) The plan was available in multiple formats that include via email, hard copy requests, and online through the OCFS webpage.

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? All comments were reviewed and addressed and then posted to the Lead Agency's Child Care webpage.

**1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found here: <https://www.acf.hhs.gov/occ/resource/pi-2009-01>)**

a) Provide the website link to where the Plan, any Plan amendments, and/or waivers are available. Note: A Plan amendment is required if the website address where the Plan is posted is changed.

<http://www.maine.gov/dhhs/ocfs/ec/occhs/child-care.html>

b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe the strategies below, including any relevant website links as examples.

Working with advisory committees.

Describe:

The MCGC was sent notification and a copy of the State Plan.

Working with child care resource and referral agencies.

Describe:

Providing translation in other languages.

Describe:

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

Describe:

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

Describe:

The CCAC was sent notification and a copy of the State Plan. Licensing Specialists sent emails to all their licensed providers of the public notice with the OCFS webpage

link to the plan.

Other.

Describe:

## 1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

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

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

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

Include in the descriptions the goals of this coordination, such as:

- extending the day or year of services for families;
- smoothing transitions for children between programs or as they age into school;
- enhancing and aligning the quality of services for infants and toddlers through school-age children;
- linking comprehensive services to children in child care or school age settings; or
- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings

Check the agencies or programs the Lead Agency will coordinate with and describe all that apply.

- (REQUIRED) Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns.

Describe the coordination goals and process:

Coordination between the Lead Agency and other Maine State Departments that include DOE, the Head Start Collaborator, MeCDC, CDS, ASPIRE, and the Office for Family Independence (OFI) have taken place in the past. Plans to meet regularly and coordinate will continue to take place over the next 3 years to expand statewide accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full day services to assist Maine families.

- (REQUIRED) State Advisory Council on Early Childhood Education and Care (or similar coordinating body) (pursuant to 642B(b)(1)(A)(i) of the Head Start Act).

Describe the coordination goals and process:

MCGC operates as the State Advisory Council on Early Education and Care. The Lead Agency holds a seat on the MCGC. The MCGC's Statute 12004-J, subsection 16, role is to maintain and evaluate a plan for sustainable social and financial investment in the healthy development of State's young children and families. The Council meets every other month and works on goals and strategies to ensure access to family support and prevention programs. The MCGC has developed a Strategic Plan which is a working document with current and future goals of the Council on topics that include child care in the State.

- Check here if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.

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

Describe the coordination goals and process, including which tribe(s) was consulted:

The State Administrator contacted each of the five tribes recognized in Maine; The Aroostook Band of Micmac Indians, The Houlton Band of Maliseet Indians, Penobscot Nation, Passamaquoddy Tribe at Indian Township and Passamaquoddy Tribe at Pleasant Point. Each of the tribal CCDF administrators was the primary point of contact. The State Administrator sent individual emails and USPS letters to each of the tribal Administrators. Phone conferences took place between the State Administrator and the Penobscot Nation Administrator and one between the Pleasant

Point Passamaquoddy Administrator. The initial goal was to increase communication and increased awareness of dual eligibility The State Administrator will continue to learn about tribal CCDF programs and share information about the state CCDF administration to serve more dually eligible children. Coordination of a future in-person meeting between the State Administrator and tribal Administrators are being organized

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

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

Describe the coordination goals and process:

MRTQ/PDN and the Center for Community Inclusion and Disability Studies (CCDIS) developed the Maine Inclusion Credential, an advanced credential for practitioners serving children with special needs, the Inclusion Warm Line, providing email and phone support to assist practitioners with information and resources and district coordinators with specialty expertise in early childhood mental health consultation and inclusive practices. These ongoing training and technical assistance additions to PDN allow for the expansion of early childhood education providers who utilize the consistent and high-quality training practices offered by the MRTQ/PDN. MRTQ/PDN and CCDIS work with Maine's DOE, Children's Behavioral Health, Head Start, and MeCDC departments to ensure providers get needed support around serving children with special needs.

(REQUIRED) State/territory office/director for Head Start state collaboration.

Describe the coordination goals and process:

The Head Start Collaboration Director at DOE facilitates the use of funds with the Head Start grantees throughout the State by providing resources and clarifications of State policies. The Lead Agency and HS Collaboration director meet regularly to discuss and strategize about topics and goals on accessibility and continuity of care and changes of policies that are impacting areas throughout the State. MRTQ/PDN and the HS Collaboration director also coordinate services through the Maine Head Start State Collaboration Office (MHSSCO) This work will continue over the next three

years. The HS Collaboration Director holds seats as a member on the MCGC and the CCAC. In addition, the Lead Agency attends Head Start Directors meeting every other month to address the goals of the State, policies, and services provided through Head Start and examples being wrap-around care and extended hours of care.

- (REQUIRED) State agency responsible for public health, including the agency responsible for immunizations.

Describe the coordination goals and process:

The Lead Agency and MeCDC collaborate on health and safety topics including the CCDBG Final Rule requirements for Child Care Providers on the CCSP and licensing inspections and monitoring of Child Care Providers.

- (REQUIRED) State/territory agency responsible for employment services/workforce development.

Describe the coordination goals and process:

DHHS collaboration with DOL and OFI provides access to families by linking the services through Maine's Career Center. The Career Centers offer resources on job seeking, child care needs, and financial needs online, at Career Center events, and locations. DOL offers grant funding to Maine residents and assist workers to learn new skills. Maine businesses gain access to a qualified workforce to succeed in the changing economy with the Competitive Skills Scholarship Program. Grant money can be used to pay for child care. The Lead Agency and DOL communicate with each other on funding, rules, and child care options for grant recipients.

- (REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK).

Describe the coordination goals and process:

The Lead Agency and DOE meet regularly to discuss the goals of both departments around the topics of vulnerable populations throughout the State. Additionally, collaboration crosses over between the two departments with attendance of meeting of the MCGC, CCAC, and Professional Development Alignment Team (PDAT).

- (REQUIRED) State/territory agency responsible for child care licensing.

Describe the coordination goals and process:

The Child Care Licensing Unit at MeCDC a department of the Lead Agency work



closely together on coordinating goals and policies for Child Care Provider rules, meeting guidelines for CCDF Rules, and inspections and monitoring.

- (REQUIRED) State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs.

Describe the coordination goals and process:

DOE is now responsible for the Child and Adult Care Food Program (CACFP) and School Nutrition program. The Lead Agency was previously the charge of CACFP and assisted DOE in the transitioning of this program. The transition included training DOE staff on the billing system. Continued coordination will take place as the Departments share changes that occur with policy and procedure. Income guidelines for eligibility for CCSP is shared with the CACFP specialists. CACFP communicates potential eligibility to clients during site visits about CCSP.

- (REQUIRED) McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons.

Describe the coordination goals and process:

The Lead Agency is working with the DOE's Homeless Education Consultant (McKinney-Vento state coordinator) on the required training of all staff working with the CCSP on identifying and serving children experiencing homelessness and their families and specific outreach to families experiencing homelessness. In addition, discussions between the CCSP staff and Homeless Education Consultant on strategies for working with the homeless population and differences that occur within this population in the wide range of geographic locations across the State.

- (REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program.

Describe the coordination goals and process:

OFI is the State Agency which determines a family's financial eligibility for a wide range of public assistance program that include TANF, CCSP, MaineCare, Food Supplement, and Emergency Assistance. The Lead Agency and OFI's substantial coordination on policy and practice increases the assurance that families seeking assistance needs are met.

- ☑ (REQUIRED) Agency responsible for Medicaid and the state Children's Health Insurance Program.

Describe the coordination goals and process:

The Lead Agency is responsible for MaineCare and coordination within the Lead Agency's offices will continue over the next three years to keep abreast of policy changes that occur and to ensure the accessibility of the Department is consumer friendly. OFI is responsible for Medicaid and the state Children's Health Insurance Program.

- ☑ (REQUIRED) State/territory agency responsible for mental health

Describe the coordination goals and process:

The Lead Agency is responsible for mental health services with the Office of Substance Abuse and Mental Health, the Office Adult Mental Health Service, and the Office of Aging and Disability (OADS). The Lead Agency has a memorandum between the Maine Departments of Labor's Bureau of Rehabilitation Services (BRS) and OADS to align services and promote evidence-based practices. This coordination will continue over the next three years.

- ☑ (REQUIRED) Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development.

Describe the coordination goals and process:

Ongoing coordination with the Lead Agency and MRTQ/PDN takes place to reach goals pertaining to the website for locating Child Care Providers in Maine , child care consumer education organizations, and providers of early childhood education training and professional development. Recent goals have been to develop and provide access to trainings on Homelessness, Health and Safety topics, and access to statewide technical assistance (T/A) that include onsite consultation with the addition of District Early Childhood and Youth Coordinators (DCs) located in each Region of the State.

- ☑ (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable).

Describe the coordination goals and process:

The Lead Agency is partnered with Maine's After School Network. MRTQ/PDN and

the University of Southern Maine are also partnered with MASN as a primary collaborator as supports for trainings, technical assistance, and advocacy of out-of-school time programs across the State. MASN receives additional funding through the CS Mott Foundation grant that is used to increase the quality and accessibility of programs for children afterschool. This collaborative work between these entities will continue over the next three years.

(REQUIRED) Agency responsible for emergency management and response.

Describe the coordination goals and process:

The Lead Agency is responsible for emergency management and response for the State with coordination taking place between divisions of the Department that include the Division of Environmental and Community Health (DECH), Office of Children and Family Services (OCFS), Division of Support Enforcement and Recovery (DSER), Maine Center for Disease Control (MeCDC), Office of MaineCare Services, and the Office of Substance Abuse and Mental Health Services (SAMHS). Coordination continues to take place with monthly meetings with the Emergency Preparedness Work Group (EPWG) having representation from each of the above departments to ensure in the event of an emergency or disaster, service would continue or be implemented for those that are newly in need of services.

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

State/territory/local agencies with Early Head Start - Child Care Partnership grants.

Describe

The Lead Agency is partnered with eleven Head Start/Early Head Start programs in every region of the State to increase services provided by the programs that are also federally funded.

State/territory institutions for higher education, including community colleges

Describe

The Lead Agency is partnered with MRTQ/PDN that in turn is a partner of the University of Maine Systems.

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

Describe

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

Describe

- Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment.

Describe

The Lead Agency is responsible for child developmental monitoring and screening at the Centers for Disease Control and Prevention.

- State/territory agency responsible for child welfare.

Describe

: The Lead Agency is responsible for child welfare.

- State/territory liaison for military child care programs.

Describe

- Provider groups or associations.

Describe

- Parent groups or organizations.

Describe

- Other.

Describe

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

### Optional Use of Combined Funds:

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

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

[https://www.acf.hhs.gov/sites/default/files/occ/acf\\_im\\_ohs\\_15\\_03.pdf](https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf)  
).

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

No (If no, skip to question 1.5.2)

Yes. If yes, describe at a minimum:

a) How you define "combine"

b) Which funds you will combine

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

d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?

e) How are the funds tracked and method of oversight

### **1.5.2 Which of the following funds does the Lead Agency intend to use to meet the CCDF matching and MOE requirements described in 98.55(e) and 98.55(h)?**

Note:

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

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

Use of Private Funds for Match or Maintenance of Effort: Donated funds do not need to be

under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies do need to identify and designate in the state/territory Plan the donated funds given to public or private entities to implement the CCDF child care program (98.55(f)).

- N/A - The territory is not required to meet CCDF matching and MOE requirements
- Public funds are used to meet the CCDF matching fund requirement. Public funds may include any general revenue funds, county or other local public funds, state/territory-specific funds (tobacco tax, lottery), or any other public funds.

-- If checked, identify the source of funds:

State General Fund

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

- Private donated funds are used to meet the CCDF matching funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes (98.53(f)).

-- If checked, are those funds:

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

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

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

- State expenditures for preK programs are used to meet the CCDF matching funds requirement.

If checked, provide the estimated percentage of the matching fund requirement that will be met with preK expenditures (not to exceed 30 percent):

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

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: \$

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

State expenditures for preK programs are used to meet the CCDF maintenance-of-effort requirements. If checked,

-- The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.55(h)(1) and 98.15(6).

No

Yes

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

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

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

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

## 1.6 Public-Private Partnerships

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



for example, by implementing voluntary shared service alliance models (98.14(a)(4)).

**1.6.1 Identify and describe the entities with which and the levels at which the state/territory is partnering (level-state/territory, county/local, and/or programs), the goals of the partnerships, the ways that partnerships are expected to leverage existing service-delivery systems, the method of partnering, and examples of activities that have resulted from these partnerships (98.16(d)(2)).**

PDN and the State with a match obtained from the CS Mott Foundation grant funds the Maine Afterschool Network. Efforts are made through the Maine Afterschool Network to increase the supply and quality of out-of-school-time programming for children. Additionally, the Lead Agency is providing in-kind contributions in the form of CCDF-funded staff time and combining with, contingent upon funding award selection, Federal Grant Funds from the National Institute of Health and the Pennsylvania State's Center for the Protection of Children to conduct research on and implement the iLook Out for Child Abuse Project in Maine. iLook Out is an innovative free online learning module designed specifically for child care providers to learn about and meet the State requirements for mandated reporter training. Ultimately, Maine will have unlimited access to this groundbreaking training and child care providers will be prepared and confident in their mandated reporter requirements which aligns with the CCDBG reauthorization goals and requirements. Maine Shared Services Alliance is a statewide effort designed to strengthen the early care and education industry through the development of local or regional Shared Service Alliances. By participating in a shared services alliance, early care and education businesses seek to become stronger, more accountable, more financially sound and efficient, and better equipped to offer affordable, high-quality services for children and their families. MSSA has an Advisory Council made up of approximately 15 stakeholders, including staff from the PDN, providers and other community members. The Davis Family Foundation awarded the PDN a grant to fund the development of an online tool called Quality Improvement Toolkits (QITs). The goal is to create electronic toolkits in four key areas 1) Program evaluation 2) Professional development planning 3) Assessment of child learning 4) Creating a curriculum framework. These 4 key areas were identified as areas of need by Child Care programs working on Quality for ME, Maine's quality improvement rating system. The final toolkits will be made available online to all programs free of charge. There are toolkits specific to each ECE setting; center base, family child care, out-of-school time and preschool.

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

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

- If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency, provide parents in the State with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.
  
- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).
  
- Collect data and provide information on the coordination of services and supports, including services under Section 619 and Part C of the Individuals with Disabilities Education Act;
  
- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State;
  
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

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

Note: Use 1.7.1 to address if a state/territory funds a CCR&R organization, what services are provided and how it is structured and use section 7.6.1 to address the indicators of progress met by CCR&R organizations if they are funded by quality set-aside funds.

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

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

## 1.8 Disaster Preparedness and Response Plan

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

**1.8.1 Describe how the Statewide Child Care Disaster Plan was developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State**

### **Advisory Council on Early Childhood Education and Care or similar coordinating body:**

The Statewide Child Care Annex was developed in collaboration with Maine Emergency Management Agency (MEMA) and the Maine Public Health Emergency Preparedness Program (PHEP). The Child Care Annex will be part of the Maine Emergency Support Function (ESF) 6 and outlines the scope of work to be executed by the following DHHS Offices OFI, DLRS, DECH, and OCFS before, during, and after a disaster to support Maine's child care infrastructure. The Statewide Disaster Plan, overseen by the state administrators, outlines the duties of the three primary divisions within the Lead Agency that are to support the Child Care infrastructure. There is focus on preparation, response and recovery. The CCAC received the draft of the Statewide Disaster Plan. Comments and suggestions were welcomed and taken into consideration by the Lead Agency.

### **1.8.2 Describe how the Statewide Disaster Plan includes the Lead Agency's guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster and temporary operating standards for child care after a disaster:**

Various divisions of the Maine DHHS will have designated responsibilities to respond to a disaster impacting the Child Care infrastructure, Child Care Providers, Children, Parents and legal guardians, and the general public. Those Maine DHHS Divisions involved in support of the Child Care in Disasters annex include Office of Child and Family Services, MeCDC Public Health Emergency Preparedness Program, Division of Environmental and Community Health, Substance Abuse and Mental Health Services, Office of Aging and Disability Services, Office of MaineCare, Public Health Nursing, Maine DHHS field staff and other support functions. In the short term, the Maine DHHS will need to focus on providing emergency information and specific actions for Child Care Providers to ensure the children in their care are kept safely removed from any potential hazards. Each Child Care Provider will be expected to initiate their written emergency operations plans to include safe evacuations and how Parents and Children will be reunited following an evacuation. DHHS/OCFS will gather information about all Child Care Providers in the disaster area around their status and ability to function. This information will assess the initial needs of each Child Care program to resume operations, identify facility needs and check on the status of available childcare staff and volunteers. If the disaster and public health emergency is of a long-term nature, the

Maine DHHS supplies, equipment, trained and qualified staff and healthcare volunteer resources will become depleted. As it becomes obvious that the Maine DHHS will require additional resources to support the Child Care infrastructure and resumption of operations, the Maine DHHS/MeCDC will activate MOUs and MOAs to request resources from MEMA and other partners within the state, from adjacent states, U.S. Region I Office of Child Care and U.S. CDC, National Center for Missing and Exploited Children, Save the Children, SAMHSA-Disaster Technical Assistance Center and other federal agencies.

### **1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services:**

The following steps are required in the Child Care Annex for the coordination of post-disaster recovery of Child Care services: DHHS Call Centers, 2-1-1 Maine Information Line will continue to operate DHHS will send mobile Licensing staff to disaster impacted area Eligibility workers will accept applications and available documentation from families in the affected area. If verification is not available, workers will advise the families that will determine eligibility and authorize care on verbal information. A request will be made for the actual verification to be provided within 60 days. DHHS will follow current procedures for reporting possible fraudulent activities and actions Certification periods and authorizations for families without documentation will be approved for up to 60 consecutive days Parents will be informed that the families copayment and/or eligibility may change at recertification If Parents cannot provide the needed verification within the timeframe requested, the child care authorization will be closed on a case-by-case basis and they may be referred to MEMA Disaster Case Management Program If Parents provide the requested verification within the timeframe requested, the child care will be approved for a full 12 months Eligibility workers will refer families who are newly homeless because of the disaster to the MEMA/MEVOAD Disaster Case Management Program

**1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place-evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions:**

CCSP Providers except for Licensed-Exempt Relatives are required to have an emergency response plan as stated and signed in the Provider Agreements Section I(A)(1)(f), “All child care providers must have an Emergency Preparedness and Response Plan that is updated annually”. The proposed CCSP Rules Section 7.4. In addition, Individual Disaster Planning Guide, Y.I.K.E.S.: Your Inventory for Keeping Everyone Safe, is made available to providers online and in print.

**1.8.5 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place for child care staff and volunteers-emergency preparedness training and practice drills as required in 98.41(a)(1)(vii):**

Licensed CCSP Providers inspected annually by MeCDC Family Child Care Rules Section 1 A., Center Rules 2.14, CCSP Provider Agreements Section I(1)(f), and proposed CCSP Rules 7.11.1.

**1.8.6 Provide the link to the website where the statewide child care disaster plan is available:**

<http://www.maine.gov/dhhs/ocfs/ec/occhs/provider-subsidy.htm>

## 2 Promote Family Engagement through Outreach and Consumer Education

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

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

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

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

The Lead Agency is required to describe how it provides outreach and services to eligible families with limited English proficiency and persons with disabilities and to facilitate the participation of child care providers with limited English proficiency and disabilities in the CCDF

program (98.16(dd)). Lead Agencies are required to develop policies and procedures to clearly communicate program information, such as requirements, consumer education information, and eligibility information, to families and child care providers of all backgrounds (81 FR 67456).

**2.1.1 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families for whom English is not their first language. Check all that apply.**

- Application in other languages (application document, brochures, provider notices)
- Informational materials 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.

Describe:

The State of Maine provides all staff with Language Link, a telephone language line for assistance with translation. The State of Maine provides translators as needed. MRTQ has merged their MRTQ and Child Care Choices websites into one site. With this merge, their website now includes Google Translate that allows translation for more than 90 languages available to select from.

**2.1.2 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families with a person(s) with a disability. Check all that apply.**

- Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities
- Websites that are accessible (e.g. Section 508 of the Rehabilitation Act)
- Caseworkers with specialized training/experience in working with individuals with disabilities



- Ensuring accessibility of environments and activities for all children
- Partnerships with state and local programs and associations focused on disability-related topics and issues
- Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers
- Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies
- Availability and/or access to specialized services (e.g. mental health, behavioral specialists, therapists) to address the needs of all children
- Other.

Describe:

## 2.2 Parental Complaint Process

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

### **2.2.1 Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process:**

Complaints can be called into the statewide Child Protective Services Intake hotline. In addition, Child Care Licensing Specialists are assigned to the daily complaint intake on a rotating basis. Those calls come in to the main number for Child Care Licensing and are transferred to the Child Care Licensing Specialist assigned to the complaint intake. In addition, any parental complaints can be reported to the Department through means of phone, fax, or email.

**2.2.2 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring:**

All complaints that are received go to the Out of Home Supervisor to determine assignment. If the complaint rises to the level of abuse and neglect it is assigned to an Out of Home Investigator. All other complaints are assigned to the Child Care Licensing Specialist that is connected to the respective provider or program. If there is a preponderance of evidence that a rule violation has occurred the complaint is designated as founded and appropriate licensing action is taken depending on the nature of the rule violations and history of the provider or program. Ongoing monitoring occurs for all programs. The level of monitoring is increased when there is a founded complaint.

**2.2.3 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring:**

All complaints that are received go to the Out of Home Supervisor to determine assignment. If the complaint rises to the level of abuse and neglect it is assigned to an Out of Home Investigator. All other complaints are assigned to the Child Care Licensing Specialist that is connected to the respective provider or program. If there is a preponderance of evidence that a rule violation has occurred the complaint is designated as founded and appropriate licensing action is taken depending on the nature of the rule violations and history of the provider or program. Ongoing monitoring occurs for all programs. The level of monitoring is increased when there is a founded complaint.

**2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints:**

The record of substantiated complaint is documented in MeCDC's data base system in each

provider's or programs record.

**2.2.5 Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3:**

The Lead Agency ensures that its website is consumer-friendly and easily accessible by providing information and resource links to all topics covered under Child Care on its home page with headings of General Information, Information for Parents, and Information for Providers. The Lead Agency has an Accessibility Policy in place to ensure the widest range of access to its consumers. In addition, the public can contact their local licensing specialist for substantiated complaints.

**2.2.6 Provide the citation to the Lead Agency's policy and process related to parental complaints:**

Child Care Subsidy Program Rules 11.03: Termination of Child Care Provider for Alleged Licensing Violations and the Lead Agency's webpage address Parent's Rights and Responsibilities as well: <http://www.maine.gov/dhhs/ocfs/ec/occhs/rights.htm>

**2.3 Consumer Education Website**

States and Territories are required to provide information to parents, the general public, and when applicable, child care providers through a State website, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III)). The website must include information to assist families in understanding the policies and procedures for licensing child care providers. The website information must also include provider-specific information, monitoring and inspection reports

for the provider, the quality of each provider (if such information is available for the provider), and the availability of the provider (658E(c)(2)(D); 98.33(a)). The website should also provide access to a yearly statewide report on deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To assist families with any additional questions, the website should provide contact information for local child care resource and referral organizations and any other agencies that can assist families in better understanding the information on the website.

To certify, respond to questions 2.3.1 through 2.3.10 by describing how the Lead Agency meets these requirements and provide the link in 2.3.11. If the Lead Agency has not fully implemented the Consumer Education website elements identified in Section 2.3, then respond to question 2.3.12. Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved will require a CCDF Plan amendment.

### **2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible:**

The Lead Agency ensures that its website is consumer-friendly and easily accessible by providing information and resource links to all topics covered under Child Care on its home page with headings of General Information, Information for Parents, and Information for Providers. The Lead Agency has an Accessibility Policy in place to ensure the widest range of access to its consumers, "State Executive Branch agencies are responsible for ensuring that its communications with individuals with disabilities are as effective as communications with others. This policy requires that all electronic *documents and materials*, transmitted to communicate information, are available in accessible, appropriate and alternative formats and to provide accessible phone service, consistent with the Standards and Best Practices for Accessible Information and Effective Communication (Appendix A)1."

### **2.3.2 Describe how the website ensures the widest possible access to services for families that speak languages other than English (98.33(a)):**

The website ensures the widest possible access to services for families that speak languages other than English by providing interpretation services for the general public and State of Maine Employees through a link on each of the site's pages.

### **2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities:**

The website ensures the widest possible access to services for persons with Disabilities through Maine State's Web Accessibility and Usability Policy located through the link, <https://www.maine.gov/oit/policies/WebAccessibilityUsabilityPolicy.pdf> . The policy complies with all Federal and State statutes: Section 508 of the Rehabilitation Act Standards, Americans with Disabilities Act Regulations, and Maine Human Rights Act

### **2.3.4 Lead Agency processes related to child care.**

A required component of the consumer education website is a description of Lead Agency policies and procedures relating to child care (98.33(a) (1)). This information includes a description of how the state/territory licenses child care, a rationale for exempting providers from licensing requirements, the procedure for conducting monitoring and inspections of providers, and the policies and procedures related to criminal background checks.

a) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6:

<http://www.maine.gov/dhhs/ocfs/ec/occhs/cclicensing.htm>

b) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2:

Family Child Care Rules Section 4(A)(2), Child Care Center Rules 2.14. Revisions to the Child Care Center and Nursery School Rules will include language to mirror the Family Child Care Licensing Rule. CCSP Provider Agreements Section I(1)(f) and CCSP proposed rule 7.11.1. Licensing rules are located through the following link:

<http://www.maine.gov/dhhs/ocfs/ec/occhs/cclicensing.htm>

c) Provide the link to the policies and procedures related to criminal background checks for staff members of child care providers and the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in sections 5.4.1 and 5.4.11:

Child Care Center Rules 2.21, Nursery School Rules Section III (9) and Section XIII(A), and the Family Child Care Rules Section 6. Revisions to the Child Care Center and Nursery School Rules in the next year will occur. The revised language will include language to mirror the Family Child Care Licensing Rule. CCSP proposed rule 7.2 address this requirement for all CCSP providers within the next six months for completion and currently with the CCSP Provider Application Section I(c).

<http://www.maine.gov/dhhs/ocfs/ec/occhs/cclicensing.htm>

### 2.3.5 List of providers

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

a) Provide the website link to the searchable list of child care providers:

[earlycaremaine.org](http://earlycaremaine.org)

b) In addition to the licensed providers that are required to be included in your searchable list, which additional providers are included in the Lead Agency's searchable list of child care providers (please check all that apply):

- License-exempt center-based CCDF providers
- License-exempt family child care (FCC) CCDF providers
- License-exempt non-CCDF providers
- Relative CCDF child care providers
- Other.

Describe

Only providers that are required to be included in the searchable list are included on the website.

c) Identify what informational elements, if any, are available in the searchable results.

Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

Licensed Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

Ages served if available and directions

License-Exempt, non-CCDF Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

License-Exempt CCDF Center Based Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

#### License-Exempt CCDF Family Child Care

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

#### Relative CCDF Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:



Other.

Describe:

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

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

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

- Quality rating and improvement system
- National accreditation
- Enhanced licensing system
- Meeting Head Start/Early Head Start requirements
- Meeting prekindergarten quality requirements
- School-age standards, where applicable
- Other.

Describe

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

Licensed CCDF providers.

Describe the quality information:

It is a requirement of CCSP to have all Licensed Providers to be enrolled in Quality for

ME

Licensed non-CCDF providers.

Describe the quality information:

Quality rating and improvement system

National accreditation

Meeting Head Start/Early Head Start Program Performance Standards.

License-exempt center-based CCDF providers.

Describe the quality information:

License-exempt FCC CCDF providers.

Describe the quality information:

License-exempt non-CCDF providers.

Describe the quality information:

Relative child care providers.

Describe the quality information:

Other.

Describe

**2.3.7 Lead Agencies are required to post monitoring and inspection reports on the consumer education website for each licensed provider and for each non-relative provider eligible to provide CCDF services on the consumer education website. These reports must include results of required annual monitoring visits and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. The reports must be in plain language and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of reports when available, going forward (not retrospectively), beginning October 1, 2018.**

Certify by responding to the questions below:

a) What is the Lead Agency's definition of plain language and describe the process for receiving feedback from parents and the public about readability of reports.

The Lead Agency defines plain language as communication that is understood the first time it is read or heard. The Lead Agency's webpage, <http://www.maine.gov/dhhs/ocfs/ec/occhs/rights.htm> , contains the following: " If you feel that your issues or concerns have not been addressed appropriately, you may call the Office of Child Care Licensing at 207-287-9300 (TTY: Maine relay 711 to speak with the licenser for the program in question regarding regulations and whether you wish to file a complaint."

b) Are monitoring and inspection reports in plain language?

If yes,

include a website link to a sample monitoring report.

If no,

describe how plain language summaries are used to meet the regulatory requirements and include a link to a sample summary.

c) Check to certify what the monitoring and inspection reports and/or their plain language summaries include:

- Date of inspection
- Health and safety violations, including those violations that resulted in fatalities or serious injuries.

Describe how these health and safety violations are prominently displayed.

Reports identify rule violations with a specific evidence statement describing how the provider failed to be in compliance with each rule violation.

- Corrective action plans taken by the State and/or child care provider.

Describe

Action plans for violations are posted each provider's "Licensing Details" on the Child Care Choices webpage, under the subtitle "Licensing Action"

<https://search.childcarechoices.me/>

d) The process for correcting inaccuracies in reports.

Informal dispute resolution. If the licensee wishes to dispute any licensing violations identified during an inspection or investigation, the licensee must submit a written request for an informal conference to the Department within ten business days of the inspection, or receipt of written notification of licensing violations.

1. The written request must identify all disputed rule violations.

2. Upon receipt of the request, the Department will review the request and determine whether it meets the criteria for an informal conference within ten business days. The Department will consider the following criteria to determine if an informal conference will be held:

be held:

1. Timeliness of filing;
2. Sufficient evidence for contesting each disputed finding; and
3. Evidence presented after-the-fact was not required by rule or statute to be available at the time of the inspection.

3. The Department may determine that an informal conference is not necessary when:

1. A paper review supports the licensee's case, and the violations will be removed; or
2. The evidence submitted by the licensee does not meet the criteria of Section 4(F)(2) above.

4. The Department will inform the licensee of the date, time and location of the informal conference within ten business days if the licensee's request for an informal conference is granted.

1. During the informal conference, the licensee will be able to introduce additional evidence to support changes to a violation.
2. The Department will receive the evidence and decide after the conclusion of the informal conference.

5. The Department will issue a written decision to the licensee within ten business days of either the informal conference or the Department's review of the licensee's request. The decision will state whether any disputed violations will be amended or removed and may include an amended plan of action.

6. The Department may take further action, in accordance with Section 20 of this rule, if the licensee fails to comply with any plan of action in effect.

e) The process for providers to appeal the findings in reports, including the time requirements, timeframes for filing the appeal, for the investigation, and for removal of any violations from the website determined on appeal to be unfounded.

1. from the website determined on appeal to be unfounded.

Informal dispute resolution. If the licensee wishes to dispute any licensing violations identified during an inspection or investigation, the licensee must submit a written request for an informal conference to the Department within ten business days of the inspection, or receipt of written notification of licensing violations.

1. The written request must identify all disputed rule violations.

2. Upon receipt of the request, the Department will review the request and determine whether it meets the criteria for an informal conference within ten business days. The Department will consider the following criteria to determine if an informal conference will be held:

1. Timeliness of filing;
2. Sufficient evidence for contesting each disputed finding; and
3. Evidence presented after-the-fact was not required by rule or statute to be available at the time of the inspection.

3. The Department may determine that an informal conference is not necessary when:

1. A paper review supports the licensee's case, and the violations will be removed; or
2. The evidence submitted by the licensee does not meet the criteria of Section 4(F)(2) above.

4. The Department will inform the licensee of the date, time and location of the informal conference within ten business days if the licensee's request for an informal conference

is granted.

1. During the informal conference, the licensee will be able to introduce additional evidence to support changes to a violation.
2. The Department will receive the evidence and decide after the conclusion of the informal conference.

5. The Department will issue a written decision to the licensee within ten business days of either the informal conference or the Department's review of the licensee's request. The decision will state whether any disputed violations will be amended or removed and may include an amended plan of action.

6. The Department may take further action, in accordance with Section 20 of this rule, if the licensee fails to comply with any plan of action in effect.

f) How reports are posted in a timely manner. Specifically, provide the Lead Agency's definition of 'timely' and describe how it ensures that reports are posted within its timeframe. Note: While Lead Agencies define 'timely,' we recommend Lead Agencies update results as soon as possible and no later than 90 days after an inspection or corrective action is taken

The results of licensing inspections are not currently posted on the Child Care Choices website. Licensing action taken due to non - compliance is posted to the website after the timeframe for an appeal has been exhausted which is 30 days following the date of receipt by the licensee. If the licensee requests and meets the criteria for informal dispute resolution the Department will issue a written decision to the licensee within 10 business days of the informal conference. Should the licensing action be upheld it will be posted to the Child Care Choices website within a week of the decision. If the licensee requests an administrative hearing to dispute licensing action, it will be held in conformance with the Department's Administrative Hearings Regulations and Maine's Administrative Procedure Act. Upon resolution of appeal(s) that are not upheld, licensing action will be posted to the Child Care Choices website.

g) Describe the process for maintaining monitoring reports on the website. Specifically, provide the minimum number of years reports are posted and the policy for removing reports (98.33(a)(4)(iv)).

There is notation of licensing action taken dating back to January 1, 2014 and is available for review upon request. Notice of licensing action is posted indefinitely and

details may be requested by the public at any time.

h) Any additional providers on which the Lead Agency chooses to include reports. Note - Licensed providers and CCDF providers must have monitoring and inspection reports posted on their consumer education website.

License-exempt non-CCDF providers

Relative child care providers

Other.

Describe

**2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted on the consumer education website. This aggregate information on serious injuries and deaths must be organized by category of care (e.g., center, FCC, etc.) and licensing status for all eligible CCDF provider categories in the state. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. The aggregate report should not list individual provider-specific information or names.**

Certify by providing:

a) The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care (98.16 (ff)) and describe how the Lead Agency obtains the aggregate data from the entity.

Licensed Providers must provide notification to the Lead Agency within 24 hours of an occurrence. Data set is retrieved from Maine Department of Health and Human Services, Office of Child and Family Services, Child Welfare Division and posted to the Child Care Choices website.

b) The definition of "substantiated child abuse" used by the Lead Agency for this requirement.

The Lead Agency defines substantiated child abuse as, it is more likely than not that high severity abuse or neglect did happen.

c) The definition of "serious injury" used by the Lead Agency for this requirement.

Serious physical injury or impairment as defined in 22 M.R.S.A. § 4002(11). Examples of serious injuries to be considered for this internal review procedure include: an injury resulting from Shaken Baby Syndrome, any injury to a child under six (6) months of age, abusive head trauma, skull fracture, inflicted head injury, subdural hematoma, multiple fractures, severe beating resulting in extensive contusions or welts, any injury resulting from Munchausen Syndrome by Proxy, drowning, non-organic failure to thrive, and other significant injuries which may have been inflicted by a person responsible for the child and /or are not consistent with the explanation offered.

d) The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted.

Maine's aggregated data is posted on the website link: [earlycaremaine.org](http://earlycaremaine.org)

**2.3.9 The consumer education website should include contact information on referrals to local child care resource and referral organizations. How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information:**

Child Care Choices, the Lead Agency's resource to locating and choosing child care, information about Providers, and QRIS. [earlycaremaine.org](http://earlycaremaine.org)

**2.3.10 The consumer education website should include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website. Describe and include a website link to this information:**

Information on how parents can contact the Lead Agency is found on the homepage of Child Care Choices website. [earlycaremaine.org](http://earlycaremaine.org)



**2.3.11 Provide the website link to the Lead Agency's consumer education website. Note: An amendment is required if this website changes.**

[earlycaremaine.org](http://earlycaremaine.org)

**2.3.12 Other. Identify and describe the components that are still pending per the instructions on CCDF Plan Response Options for Areas where Implementation is Still in Progress in the Introduction.**

Lead Agency's plan is to update the computer system to include all CCDF requirements of monitoring and inspections. A plan to have fully installed within the next six months. The Child Care Choices website will reflect these updated changes. Until the new computer system is in place, MeCDC Licensing Specialist will be required to submit summaries in plain language that include all components required on under "licensing details" on the Child Care Choices website. The plan is to have a separate tab for License-Exempt Providers to post monitoring reports and a beginning date within the next 30 days.

## 2.4 Additional Consumer and Provider Education

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

In questions 2.4.1 through 2.4.5, certify by describing:

**2.4.1 How the Lead Agency shares information with eligible parents, the general public, and where applicable, child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible, such as state preK, as well as the availability of financial assistance to obtain child care services. At a minimum, describe what is provided (e.g., such methods as written materials, the website, and direct communications) and how information is tailored for these audiences.**

The Lead Agency shares information with eligible parents, the general public, and to Child Care Providers about programs and availability on the DHHS website. Links are provided to programs and services. Written materials can be requested from the Lead Agency through the website, telephone, or e-mail. Information is tailored for the audience by linking Providers to Provider specific webpages and linking programs and services tailored specifically for families, children, teens, adults, elders, or health.

**2.4.2 The partnerships formed to make information about the availability of child care services available to families.**

Partnerships have been formed across the State's Departments, the Lead Agency's departments, and MRTQ/PDN to make information available to families on child care services. Continues communication takes place to ensure the most updated information is being disseminated.

**2.4.3 How the Lead Agency provides the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers. In the description include, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners who assist in providing this information.**

Temporary Assistance for Needy Families program:

At OFI, a family applying for CCSP are screened and given information regarding TANF, ASPIRE, SNAP and other public assistance programs. The information is also located on the Lead Agency's website and provides the contact and resource information for TANF and other public assistance programs

**Head Start and Early Head Start programs:**

The Lead Agency provides the link to Head Start programs that include a Head Start Locator by zip code.

**Low Income Home Energy Assistance Program (LIHEAP):**

The information regarding LIHEAP is also located on the Lead Agency's website and provides the contact and resource information for the LIHEAP and several other public assistance programs.

**Supplemental Nutrition Assistance Programs (SNAP) Program:**

At OFI, a family applying for CCSP are screened and given information regarding SNAP and other public assistance programs. The information is also located on the Lead Agency's website and provides the contact and resource information for SNAP and several other public assistance programs.

**Women, Infants, and Children Program (WIC) program:**

The Lead Agency's website includes the spectrum of resource information for Maine families in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. WIC program screening and referral information is available on the Lead Agency's website to support family independence

**Child and Adult Care Food Program(CACFP):**

CACFP is overseen by DOE. The Lead Agency's webpage for Providers include the link to the CACFP on the DOE webpage.

**Medicaid and Children's Health Insurance Program (CHIP):**

OFI is a department under the Lead Agency in which a family applying for CCSP are screened and given information regarding WIC, TANF, ASPIRE, SNAP and other public assistance programs. The information is also located on the Lead Agency's website and provides the contact and resource information for WIC and other public assistance programs.

**Programs carried out under IDEA Part B, Section 619 and Part C:**

The Lead Agency's website includes the spectrum of resource information for Maine families in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. In addition, links to 2-1-1 Maine is provided and MRTQ that offers resources and T/A to providers

**2.4.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children's development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners in providing this information.**

The Lead Agency's website provides information and resources through links, contact information, and documents on children's development. Information provided includes health and safety topics on a variety of subjects from diabetes, asthma, to oral health. The 2-1-1 Maine website is also included that leads to an array of information and needs for a variety of audiences. <http://www.maine.gov/dhhs/ocfs/ec/occhs/cclinks.htm>

**2.4.5 Describe how information on the Lead Agency's policies regarding the social-emotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models based on research and**

**best practices for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include what information is provided, how the information is provided, and how information is tailored to a variety of audiences and include any partners in providing this information.**

The Lead Agency is partnered with PDN/MRTQ whose training and technical assistance include the topics of socialemotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models for those from birth to school age. MRTQ provides an Inclusion Warm Line and onsite T/A on these topics. The Lead Agency provides the link and contact information to MRTQ on both website pages for parents and providers. The CCSP Parent Agreement provides link to developmental screenings. The CCSP Provider Agreement provides a link to MRTQ's Inclusion Warm Line. CCSP staff provide the link and contact information for MRTQ when an individual inquires.

**2.4.6 Describe the Lead Agency's policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds (98.16(ee)), including how those policies are shared with families, providers, and the general public.**

The Lead Agency's policy is to provide information on suspension and expulsion through the partnership with MRTQ. MRTQ provides an Inclusion Warm Line and onsite T/A on these topics. The Lead Agency provides the link and contact information to MRTQ on both website pages for parents and providers. The CCSP Parent Agreement provides link to developmental screenings. The CCSP Provider Agreement provides a link to MRTQ's Inclusion Warm Line. CCSP staff provide the link and contact information for MRTQ when an individual inquires.

## 2.5 Procedures for Providing Information on Developmental Screenings

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

### **2.5.1 Certify by describing:**

a) How the Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF parents, the general public, and where applicable, child care providers (98.15(b)(3)).

The Lead Agency's CCSP application provides the link to developmental screenings, the CCSP staff have the links and resources to give out, and it is in the Staff Procedure Manual.

b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program - carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) - and developmental screening services available under Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.). MRTQ/PDN DC's, Staff and website have resource information about and processes to share information with child care providers to help them support families if there are questions about development and the need for screenings. They also respond to families and child care providers with these questions through the Inclusion Warm Line.

Information about Maine resources including family pediatricians and guidance in how to talk with families about concerns is provided. In certain PDN trainings, information about resources to support families is provided. The PDN regularly distributes information from the Maine ACT Early contact (Maine Developmental Disabilities Council) and the MeCDC information from the Learn the Signs Act Early website

<https://www.MeCDC.gov/ncbddd/actearly/index.html> . The Department's webpage provides resources for information on developmental screenings.

<http://www.maine.gov/dhhs/children.shtml>

c) How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work.

The CCSP Parent Agreement provides link to developmental screenings. The CCSP Provider Agreement provides a link to MRTQ's Inclusion Warm Line. CCSP staff provide the link and contact information for MRTQ when an individual inquires.

d) How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays.

The CCDF families or providers can contact MRTQ's Inclusion Warm Line by phone or online and will be led to resources or T/A that is needed.

e) How child care providers receive this information through training and professional development.

. MRTQ offers trainings to registered members monthly that include these topics. People contacting the Inclusion Warm Line or the DC's will be directed to resources or T/A as needed.

f) Provide the citation for this policy and procedure related to providing information on developmental screenings.

The following is the information provided on Program Applications:If you would like information on developmental screenings, please go to the following link:

<https://www.MeCDC.gov/ncbddd/childdevelopment/screening.html>

## 2.6 Consumer Statement for Parents Receiving CCDF Funds

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

### **2.6.1 Certify by describing:**

a) How the Lead Agency provides parents receiving CCDF funds with a consumer statement.

The consumer statement is provided through the link to Child Care Choices located on the Award Letter sent to Parents at the start of 12-month eligibility or when the Parent changes Providers.

b) What is included in the statement, including when the consumer statement is provided to families.

The following information is provided on the Child Care Choice's website on the Consumer Education Page: The child care subsidy information, CCSP guidelines, Income guidelines, Resources for Families, Services for Children and Families, How to find Child Care in Maine, Mandated Reporting guidelines, child developmental services, criminal background check guidelines and requirements, child care licensing, How to make a complaint about a provider, health and safety requirements, monitoring statements, Maine's Data on deaths and serious injuries in a child care setting, and quality rating system. Award Letter to parents after becoming program eligible have the



link on it.

c) Provide a link to a sample consumer statement or a description if a link is not available.

The sample consumer statement, "To access Maine child care providers' information, please call (888) 900-0055 or visit: <https://www.earlycaremaine.org/>. The financial application provides information on TANF, LIHEAP, SNAP, CACFP, and Medicaid. The Child Care Choices website is [earlycaremaine.org](http://earlycaremaine.org)

### 3 Provide Stable Child Care Financial Assistance to Families

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

Note: Lead Agencies are not prohibited from establishing policies that extend eligibility beyond 12 months to align program requirements. For example, Lead Agencies can allow children enrolled in Head Start, Early Head Start, state or local prekindergarten, and other collaborative programs to finish the program year. This type of policy promotes continuity for families receiving services through multiple benefit programs.

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

### 3.1 Eligible Children and Families

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

#### **3.1.1 Eligibility criteria based on a child's age**

a) The CCDF program serves children

from 6 weeks

(weeks/months/years)

through 13

years (under age 13). . Note: Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).

b) Does the Lead Agency allow CCDF-funded child care for children 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))

No

Yes,

and the upper age is 18

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity: Child with Special Needs refers to a Child up to thirteen (13) years of age, for whom it has been determined and documented by a qualified professional, that the Child has a disability as defined in section 602 of the Individuals with Disabilities Education Act (20 U.S.C. 1401); is eligible for early intervention services under part C of the Individuals

with Disabilities Education Act (20 U.S.C. 1431 et seq.); is eligible for services under section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794); meets the definition of disability under the Americans with Disabilities Act (ADA) (P.L. 110-325); is considered at-risk for health and/or developmental problems as a result of established biological Risk Factors, and/or as a result of identified environmental Risk Factors including, but not limited to, Homelessness, abuse and/or neglect, lead poisoning, and prenatal drug or alcohol exposure; or b) a Child who is between thirteen (13) years of age and eighteen (18) years of age, inclusive, who is physically or mentally incapable of caring for him or herself, or is under court supervision.

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))

No.

Yes

and the upper age is

(may not equal or exceed age 19)

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

"residing with":

Residing with refers to either (a) a Child and the related and/or non-related adult(s) who are living together and who are in a legally binding relationship to the Child either by blood, marriage, adoption, or registered domestic partnership; or (b) the Child and an adult acting In-loco Parentis.

"in loco parentis":

In-loco Parentis refers to any individual who assumes custody and responsibility for the care of a Child (whether or not court-ordered)

### 3.1.2 Eligibility criteria based on reason for care

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

"Working":

Employed refers to participation in gainful work that produces earned income from: wages, salaries, commissions, fees, tips, and/or piece-rate payments.

"Job training":

Educational Program refers to a program which is required for completion of a secondary diploma, High School Equivalency Test (HISSET), or other Department-approved high school equivalency test; Department-approved vocational program; or post-secondary undergraduate program in which the parent is earning credits toward a degree; or another Department-approved Educational Program. Parents must be enrolled in at least six (6) credit hours per semester and attend classes either in person or online. Parents attending Graduate or Doctorate-level Educational Programs are not eligible to receive Child Care Subsidy.

"Education":

Educational Program refers to a program which is required for completion of a secondary diploma, High School Equivalency Test (HISSET), or other Department-approved high school equivalency test; Department-approved vocational program; or post-secondary undergraduate program in which the parent is earning credits toward a degree; or another Department-approved Educational Program. Parents must be enrolled in at least six (6) credit hours per semester and attend classes either in person or online. Parents attending Graduate or Doctorate-level Educational Programs are not eligible to receive Child Care Subsidy.

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

Educational Program refers to a program which is required for completion of a secondary diploma, High School Equivalency Test (HISSET), or other Department-approved high school equivalency test; Department-approved vocational program; or post-secondary undergraduate program in which the parent is earning credits toward a degree; or another Department-approved Educational Program. Parents must be enrolled in at least six (6) credit hours per semester and attend classes either in person or online. Parents attending Graduate or Doctorate-level Educational Programs are not eligible to receive Child Care Subsidy.

### 3.1.2 Eligibility criteria based on reason for care

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

No.

If no, describe the additional work requirements:

Yes.

If yes, describe the policy or procedure:

The policy and procedures are located in CCSP Rule 3.01.1 "The Parents are employed and/or attending job training or an educational program and in the CCSP FRS Desk Manual Section 'Instructions for Determining Enrollment Hours'"

### 3.1.2 Eligibility criteria based on reason for care

c) Does the Lead Agency consider seeking employment (engaging in a job search) an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of three months of job search)

No.

Yes.

If yes, describe the policy or procedure. (including any differences in eligibility at initial eligibility determination vs. redetermination of eligibility):

### 3.1.2 Eligibility criteria based on reason for care

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

No.

Yes. If yes:

i. Please provide the Lead Agency's definition of "protective services":

Protective Services (CPS) refers to a specialized casework service provided by the Department to neglected or abused Child(ren) and their families. For the purposes of these rules the following families and Children qualify as involved with Child

Protective Services (CPS): At-risk Children, Children involved in Open Child Protective Cases, and Children in Care and Custody.

*Note:* Federal requirements allow other vulnerable children identified by the Lead Agency not formally in child protection to be included in the Lead Agency's definition of protective services for CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are not working or are not in education/training activities, but this provision should be included in the protective services definition above.

ii. Are children in foster care considered to be in protective services for the purposes of eligibility at determination?

No

Yes

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

No

Yes

iv. Does the Lead Agency provide respite care to custodial parents of children in protective services?

No

Yes

**3.1.3 Eligibility criteria based on family income. Note: The question in 3.1.3 relates to initial determination. Redetermination is addressed in 3.1.7.**

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

Gross Income refers to the sum of all money, earned and unearned, already received, or reasonably anticipated to be received, by all Family members during the service eligibility period

b) Provide the CCDF income eligibility limits in the table below at the time of initial

determination. Complete columns (a) and (b) based on maximum eligibility at initial entry into CCDF. Complete columns (c) and (d) *only if* the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. Fill in the chart based on the most populous area of the state (the area serving the highest number of CCDF children). If the income eligibility limits are not statewide, please respond to c) below the table.

	(a)	(b)	(c)	(d)
Family Size	100% of SMI(\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	\$3,356.34	\$2,918.56		
2	\$4,389.07	\$3,816.58		
3	\$5,421.79	\$4,714.60		
4	\$6,454.51	\$5,612.62		
5	\$7,487.24	\$6,510.64		

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

Statewide

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

d) SMI source and year. Liheap 2017

e) Identify the most populous area of the State used to complete the chart above.

Cumberland County

f) What was the date (mm/dd/yyyy) that these eligibility limits in column (c) became effective? 04/01/2018

g) Provide the citation or link, if available, for the income eligibility limits. SMI data is

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

a) Describe how the family member certifies that family assets do not exceed \$1,000,000 (e.g., a checkoff on the CCDF application).

Check off on application

b) Does the Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?

No.

Yes.

If yes, describe the policy or procedure and provide citation:

**3.1.5 Describe any additional eligibility conditions or priority rules applied by the Lead Agency during eligibility determination or redetermination (98.20(b)).**

N/A

**3.1.6 Lead Agencies are required to take into consideration children's development and promote continuity of care when authorizing child care services (98.21(f); 98.16(h)(6)). Check the approaches, if applicable, that the Lead Agency uses when considering children's development and promoting continuity of care when authorizing child care services.**

Coordinating with Head Start, prekindergarten, or other early learning programs to create a package of arrangements that accommodates parents' work schedules



- Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)
- Establishing minimum eligibility periods greater than 12 months
- Using cross-enrollment or referrals to other public benefits
- Working with IDEA Part B, Section 619 and Part C staff to explore how services included in a child's IEP or IFSP can be supported and/or provided onsite and in collaboration with child care services
- Providing more intensive case management for families with children with multiple risk factors;
- Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities
- Other.

Describe:

The Lead Agency provides parents with resources on developmental screening. The Program Application allows to provide information regarding any disabilities or special needs of their child. In addition, MRTQ's website provides an Inclusion Warm Line for parents and providers to get T/A on a variety of topics.

### 3.1.7 Policies and processes for graduated phase-out of assistance at redetermination.

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

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

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

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

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

At redetermination, a child shall be considered eligible if his or her parents are working or attending a job training or educational program even if their income exceeds the Lead Agency's income limit to initially qualify for assistance as long as their income does not exceed the second tier of eligibility (98.21(a); 98.21(b)(1)). Note that once deemed eligible, the family shall be considered eligible for a full minimum 12-month eligibility period, even if their income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

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

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

N/A - The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.

N/A - The Lead Agency sets its exit eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.

The Lead Agency sets the second tier of eligibility at 85 percent of SMI.  
Describe the policies and procedures.

Provide the citation for this policy or procedure.

The Lead Agency sets the second tier of eligibility at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold.

Provide the second tier of eligibility for a family of three.

Describe how the second eligibility threshold:

i. Takes into account the typical household budget of a low-income family:

ii. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:

iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption:

iv. Provide the citation for this policy or procedure:

Other.

Identify and describe the components that are still pending per the instructions on *CCDF Plan Response Options for Areas where Implementation is Still in Progress* in the Introduction.

3.1.7 b) To help families transition from assistance, does the Lead Agency gradually adjust copays for families eligible under the graduated phase-out period?

No

Yes

i. If yes, describe how the Lead Agency gradually adjusts copays for families under a graduated phase-out.

ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? (*Note: Additional reporting requirements are also discussed in section 3.3.3 of the plan.*)

No.

Yes.

Describe:

### 3.1.8 Fluctuation in earnings.

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

- Average the family's earnings over a period of time (i.e. 12 months).

Describe:

CCSP Rule 5.13.11 If income fluctuates to the extent that a four-week period does not provide accurate information to calculate income for the future eligibility period, the Department can use information covering a longer period.

- Request earning statements that are most representative of the family's monthly income.

Describe:

CCSP Rule 5.14 Calculate the average monthly income as follows: a. Weekly income is converted to monthly income by multiplying the weekly amount by 4.3. b. Biweekly income is converted to monthly income by multiplying the biweekly amount by 2.15. c. Average monthly income from self-employment is added to all other earned and unearned income.

- Deduct temporary or irregular increases in wages from the family's standard income level.

Describe:

CCSP Rule 5.13.10d Determine if any of the income received is not expected to be representative of the future. Sporadic fluctuations in income are not used in the calculation. (Example: Christmas bonus or a one-week plant shutdown)

Other.

Describe:

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

Applicant identity.

Describe:

Proof of identity and residency is required at time of application, and shall be established by showing a valid photo ID and proof of residency, selected from the following list. If applicants do not have proof of identity, they shall be given ten calendar days to provide it. Acceptable forms of proof of identity include;

An original, valid, current Maine driver's license, permit, Maine State ID, or ID card with a photograph

An original, valid, current, unexpired Certificate of U. S. Citizenship (INS Form N-560) with a photograph

An original, valid, current, unexpired Certificate of Naturalization (INS Form 550 or INS Form 570) with a photograph

An original, valid, current, unexpired U. S. Military ID Card

U. S. Military Retiree Card or Uniform Service Identification Privilege Card (DD 1173) with a current photograph

An original, valid, current, unexpired or legally extended United States passport with a current photograph.

Applicant's relationship to the child.

Describe:

Self-certification of the applicant's relationship to the child on the program application is accepted at initial application and recertification. In instances where a child is in a kinship/relative caretaker situation information from Child Protective/placement worker/family plan is required to verify official kinship/relative caretaker status. Court

documentation or notarized agreements re accepted for Legal Guardians

- Child's information for determining eligibility (e.g., identity, age, citizen/immigration status).

Describe:

Identity and ages are reported on the program application and are verified by birth certificate and/or social security card at initial application.

- Work.

Describe:

: Income and eligibility will be verified at initial application and recertification. One of the following is required to document work schedule; 4 weeks of current, consecutive pay stubs showing hours worked, Employment information sheet completed and signed by supervisor/Human Resources followed by submitting 4 weeks' consecutive pay stubs as soon as they are available, for self-employment-current federal income taxes (Form 1040 and all schedules).

- Job training or educational program.

Describe:

Enrollment in an educational or job training program can be verified through a class schedule or letter from the instructor at initial application and recertification.

- Family income.

Describe:

Acceptable verification of earned income includes one or more of the following:

Four weeks of current, consecutive and complete pay stubs

Four weeks of current, consecutive and complete pay envelopes

W-2 Form (if representative of current and future earnings)

State and/or Federal Income Tax Return

Self-employment bookkeeping records or profit and loss statement

Sales and expenditure records

Statement of employment and expected gross earnings, signed and dated by the employer on company letterhead to be followed up by paystubs once they are available

Employer's wage record

Employment Security Office records

Verbal verification from caseworker for care and custody Department/Tribal referrals

A signed release of information from the applicant which authorizes the Department to pursue verification or further clarification.

Acceptable verification of unearned income includes, but is not limited to, the following:

Benefit check (viewed and photocopied by the Department)

All types of award letters

Signed income tax records (interest income, dividends, royalties, estates, trusts, deferred compensation plans, capital gains, etc.)

Support and alimony payments evidenced by court order, divorce or separation papers, or check copies

Social Security Query Card Response

Social Security District Office verification

Bank statement

Maine Employment Security Commission verification

Worker's Compensation verification

Insurance company verification

Verbal verification from Caseworker for Care and Custody Department/Tribal referrals

A signed release of information from the applicant which authorizes the Department to pursue verification or further clarification

**Household composition.**

**Describe:**

Self-certification of the applicant's household composition is accepted on the program application at initial application and recertification.

**Applicant residence.**

**Describe:**

Acceptable proofs of residence must show, at initial application, the parent's current physical address. Post Office Box addresses are not accepted as proof of Maine residency. Current Maine driver's license showing a Maine residence address, Maine utility bills with service at a Maine residence address, Maine property tax bill or receipt

indicating a Maine residence address, Maine mortgage documents or homeowner insurance documents for a Maine residence or proof of Maine home ownership with a Maine residence address, Maine W-2 Form not more than eighteen months old with the applicant's name and Maine residence address, current Maine individual income tax return indicating Maine Resident status, Maine Voter's registration card with a Maine residence address, Maine school enrollment form if applicant is under age 18 with the applicant's Maine residence address, residential rental and/or lease agreement with a Maine address, current Maine hunting/fishing license with a Maine residence address, proof of undergraduate student in-state tuition payment, two signed affidavits by two different individuals who can prove the applicant's Maine residency. Other. Describe Documentation of Maine residency includes a Maine home address where the applicant lives and one or more of the following items: current Maine individual income tax return indicating Maine Resident status, valid Maine driver's license, Maine State ID, current Maine motor vehicle registration, current Maine hunting/fishing license, proof of undergraduate Student in state tuition payment, and other reasonable verification. Exception: Homeless individuals must provide a self-declaration of residence

Other.

Describe:

### **3.1.10 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:

CCSP will make eligibility determinations within 30 days of receipt from a completed program application.

Track and monitor the eligibility determination process

Other.



Describe:

None

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

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

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

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

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

a) **Identify the TANF agency that established these criteria or definitions:** The State of Maine Department of Health and Human Services Office for Family Independence is the agency responsible for the administration of the TANF block grant.

b) **Provide the following definitions established by the TANF agency:**

"Appropriate child care":

Appropriate child care is affordable child care furnished by a child care provider who has passed background checks as required by State law and regulations.

"Reasonable distance":

Reasonable distance means that the ASPIRE participant is required to commute no more than 20 additional miles between home and work activity in order to transport the child to the child care provider.

"Unsuitability of informal child care":

Unsuitable child care is that provided by an individual who cannot pass a required background check or is unaffordable or would require the ASPIRE participant to travel an unreasonable distance.

"Affordable child care arrangements":

Affordable child care arrangements are those for which the participant incurs no cost or is reimbursed by another program such as ASPIRE or through a deduction for child care from income by the TANF program or by any combination of these methods.

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

In writing

Verbally

Other.

Describe:

d) Provide the citation for the TANF policy or procedure:

<http://www.maine.gov/sos/cec/rules/10/ch331.htm> Chapter II, Eligibility Requirements (Non-Financial); ASPIRE-TANF Exemptions

### 3.2 Increasing Access for Vulnerable Children and Families

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

Note:

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

### 3.2.1 Describe how the Lead Agency defines:

#### a) "Children with special needs":

Child with Special Needs refers to a) a Child up to thirteen (13) years of age, for whom it has been determined and documented by a qualified professional, that the Child has a disability as defined in section 602 of the Individuals with Disabilities Education Act (20 U.S.C. 1401); is eligible for early intervention services under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.); is eligible for services under section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794); meets the definition of disability under the Americans with Disabilities Act (ADA) (P.L. 110-325); is considered at-risk for health and/or developmental problems as a result of established biological Risk Factors, and/or as a result of identified environmental Risk Factors including, but not limited to, Homelessness , abuse and/or neglect, lead poisoning, and prenatal drug or alcohol exposure; or b) a Child who is between thirteen (13) years of age and eighteen (18) years of age, inclusive, who is physically or mentally incapable of caring for him or herself, or is under court supervision. Children with special needs, who are homeless or who are from a family with very low income must be given priority over all other children on the CCSP waiting list. Among these three priority groups, children are selected for services on a first-come, first-served basis by county based on the date of application.

#### b) "Families with very low incomes":

Very Low Income refers to when the Gross Income or Allowable Net Income, adjusted to Family size, does not exceed one-hundred percent (100%) of the Federal Poverty Guidelines. Children with special needs, who are homeless or who are from a family with very low income must be given priority over all other children on the CCSP waiting list. Among these three priority groups, children are selected for services on a first-come, first-served basis by county based on the date of application.

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

a) Identify how services are prioritized for children with special needs. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

b) Identify how services are prioritized for families with very low incomes. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

c) Identify how services are prioritized for children experiencing homelessness, as defined by the CCDF. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

d) Identify how services are prioritized, if applicable, for families receiving TANF program funds, those attempting to transition off TANF through work activities, and those at risk of

becoming dependent on TANF (98.16(i)(4)). Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

### **3.2.3 List and define any other priority groups established by the Lead Agency.**

N/A

### **3.2.4 Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.2.3.**

N/A

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

a) Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained.

1. A ninety-day (90) grace period shall be granted while Parents are taking the necessary actions to comply with required documentation.

b) Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness (as defined by CCDF Rule) and their families.

- Lead Agency accepts applications at local community-based locations
- Partnerships with community-based organizations
- Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care
- Other

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

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

Note:

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

a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:

Children experiencing homelessness (as defined by Lead Agency's CCDF)

CCSP Rule 7.03.2: "ninety-day (90) grace period shall be granted while Parents are taking the necessary actions to comply with the immunization requirement. Child Care Center Rules 17.1.1, and Family Child Care Rules Section 12: Health and Medical (A) allow for a 30-day grace period.

[Provide the citation for this policy and procedure.](#)

CCSP Rule 7.03.2 and the proposed CCSP rule allows for a ninety-day (90) grace period shall be granted while Parents are taking the necessary actions to comply with the immunization requirement. The following may be exempted from the immunization requirement: Children who receive care in his/her own home; Children whose Parents object to immunizations on religious grounds; and Children whose medical condition contraindicates immunization A ninety-day (90) grace period shall be granted while Parents are taking the necessary actions to comply with the immunization requirement. The following may be exempted from the immunization requirement: Children who receive care in his/her own home; Children whose Parents object to immunizations on religious grounds; and Children whose medical condition contraindicates immunization. Child Care Center Rules 17.1.1: " Certificate of immunization for children. For each child who is not attending public or private school, the facility must require and have on file, within thirty (30) days of the child's first admission to the facility, and updated annually thereafter, a Certificate of Immunization that clearly illustrates each child's present immunization status. Each child's record must reflect an up-to-date status according to the Day Care Immunization Standards, developed by the Maine Center for Disease Control and Prevention." Family Child Care Rules Sec. 12 (A): "A. Immunization. Immunization records must be maintained to ensure proper medical treatment is determined and given in the event of a disease outbreak or public health emergency. 1. The licensee must have a current record of immunization on file for each child who is not attending public or private school, which clearly documents each child's present immunization status based on the Department's Day Care Immunization Standards (available at <http://www.maine.gov/dhhs/mecdc/infectious-disease/immunization/family/> and published in September 2011), within 30 days of the child's first admission to the child care."

[Children who are in foster care.](#)

A ninety-day (90) grace period shall be granted while Parents are taking the necessary actions to comply with the immunization requirement.

[Provide the citation for this policy and procedure.](#)

CCSP Rule 7.03.2 and the proposed ruleCCSP rules 7.11.2 allow for a ninety-day (90) grace period shall be granted while Parents are taking the necessary actions to

comply with the immunization requirement. The following may be exempted from the immunization requirement: Children who receive care in his/her own home; Children whose Parents object to immunizations on religious grounds; and Children whose medical condition contraindicates immunization A ninety-day (90) grace period shall be granted while Parents are taking the necessary actions to comply with the immunization requirement. The following may be exempted from the immunization requirement: Children who receive care in his/her own home; Children whose Parents object to immunizations on religious grounds; and Children whose medical condition contraindicates immunization.

b) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements (98.41(a)(1)(i)(C)(4)).

The Lead Agency coordinates with DECH Licensing Unit to assist families' immunization and other health and safety requirements by informing providers and parents on the grace periods and options for completing. The Lead Administrator also sits on the DSI: SAIEL Steering Subcommittee that is comprised of CDS, CDC, MaineCare, Maine Quality Counts, 2-1-1 Maine, Maine Families, Autism Society of Maine, Maine Developmental Disabilities Council, Maine Parent Federation, Maine Child Alliance, MCGC, and Edwin Ervin Pediatric Center whose work and coordination is to link families to early childhood services and supports.

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

No.

Yes.

Describe:

CCSP Rule 7.03.2: "ninety-day (90) grace period shall be granted while Parents are taking the necessary actions to comply with the immunization requirement. Child Care Center Rules 17.1.1, and Family Child Care Rules Section 12: Health and Medical (A) allow for a 30-day grace period. Provide the citation for this policy and procedure. CCSP Rule 7.03.2 and the proposed CCSP rule allows for a ninety-day (90) grace period shall be granted while Parents are taking the necessary actions



to comply with the immunization requirement. The following may be exempted from the immunization requirement: Children who receive care in his/her own home; Children whose Parents object to immunizations on religious grounds; and Children whose medical condition contraindicates immunization A ninety-day (90) grace period shall be granted while Parents are taking the necessary actions to comply with the immunization requirement. The following may be exempted from the immunization requirement: Children who receive care in his/her own home; Children whose Parents object to immunizations on religious grounds; and Children whose medical condition contraindicates immunization. Child Care Center Rules 17.1.1: "Certificate of immunization for children. For each child who is not attending public or private school, the facility must require and have on file, within thirty (30) days of the child's first admission to the facility, and updated annually thereafter, a Certificate of Immunization that clearly illustrates each child's present immunization status. Each child's record must reflect an up-to-date status according to the Day Care Immunization Standards, developed by the Maine Center for Disease Control and Prevention." Family Child Care Rules Sec. 12 (A): "A. Immunization. Immunization records must be maintained to ensure proper medical treatment is determined and given in the event of a disease outbreak or public health emergency. 1. The licensee must have a current record of immunization on file for each child who is not attending public or private school, which clearly documents each child's present immunization status based on the Department's Day Care Immunization Standards (available at <http://www.maine.gov/dhhs/mecdc/infectious-disease/immunization/family/> and published in September 2011), within 30 days of the child's first admission to the child care."

### 3.3 Protection for Working Families

#### **3.3.1 12-Month eligibility.**

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period, regardless of changes in income (as long as the income does not exceed the federal threshold of 85 percent of the state median income) or temporary changes in participation in

work, training, or educational activities (658E(c)(2)(N)(i) and (ii)).

This change means that a Lead Agency may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the state's income eligibility threshold, but not the federal threshold of 85 percent of SMI. The Lead Agency may not terminate assistance prior to the end of the 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. A temporary change in eligible activity includes, at a minimum, any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working; any student holiday or break for a parent participating in a training or educational program; any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program; any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency; a child turning 13 years old during the 12-month eligibility period (except as described in 3.1.1); and any changes in residency within the state, territory, or tribal service area.

a) Describe the Lead Agency's policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements, including when a family experiences a temporary change in activity.

The Department's policies are to re-determine eligibility of all Parents receiving Child Care Subsidy no sooner than every twelve (12) months, including when a family experiences a temporary change in activity. When possible, re-determinations for Child Care Subsidy will be aligned with the re-determination(s) of other State assistance benefit program(s) the Parent is receiving.

b) How does the Lead Agency define "temporary change?"

Temporary Change refers to any time-limited absence from work for an Employed Parent due to reasons including but not limited to: Parent's medical leave or maternity/paternity leave; need to care for a Family member with an illness; any interruption in work for a seasonal worker who is not working between regular industry work seasons; any Student holiday or break for a Parent participating in a Job Training or Educational Program; any reduction in work, training, or education hours, as long as the Parent is still working or attending Job Training or Educational Program. Non-temporary Change refers to a permanent loss of job that exceed 3 months or a longer period of time established by the Lead Agency; any changes in age, including turning 13 years old during the 12-month eligibility period; and any changes in residency within the state.

c) Provide the citation for this policy and/or procedure.

CCSP's FRS's Desk Level Procedure Manual Section "Instructions for Determining Parent Enrollment Hours" and the CCSP Award Letter describes the 12-month eligibility period. The proposed CCSP Rule 1.81 Temporary Change has been implemented to reflect CCDF requirement of the CCDBG.

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

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

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

a) Does the Lead Agency choose to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss or cessation of eligible activity and offer a minimum 3-month period to allow parents to engage in a job search and to resume participation in an eligible activity?

No, the state/territory does not allow this option to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program.

Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:

i. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change:

Job loss is a ten (10) day required reporting to the Department. Job search begins the date of the job loss. If after a 12-week job search has occurred and no job or educational training has begun, a Parent and Provider will be given a two (2) week notice that Child Care will end due to a non-temporary change.

ii. Describe what specific actions/changes trigger the job-search period.

Parent is a 10-day reporter for job loss. The twelve (12) week period starts the first day the Parent is no longer Employed or attending a Job Training or Educational Program. There is not a limit to how many 12-week job searches a Parent can have while utilizing CCSP.

iii. How long is the job-search period (must be at least 3 months)?

12 weeks

iv. Provide the citation for this policy or procedure.

The proposed CCSP Rules Policy 1.54 Non-temporary Change refers to any cessation of work or attendance at a Job Training or Educational Program. Child Care Subsidy will continue as documented in the Award Letter, for a period of up to twelve (12) weeks after the cessation of work or attendance at a Job Training or Educational Program. The twelve (12) week period starts the first day the Parent is no longer Employed or attending a Job Training or Educational Program.

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

Not applicable.

Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

i. Define the number of unexplained absences identified as excessive:

Parent(s) Ineligible or Disqualified for Child Care Subsidy

A Parent will be determined to be ineligible for Child Care Subsidy if: A Child Care Provider reports to the Department the Parent's a Child had twenty-five (25) or more Unacceptable Absences within the previous twelve (12) months.

ii. Provide the citation for this policy or procedure:

CCSP Rules 11.01.7, When a Child Care Provider reports a child had twenty-five (25) unexcused absences within one (1) year, a Notification of Termination of the Parent will be sent to the Parent and the Child Care Provider. All notices sent to the last documented address for the Parents and not returned will be considered received, and as such the Department will consider the Parents notified."

A change in residency outside of the state, territory, or tribal service area.

Provide the citation for this policy or procedure:

CCSP Rules 1.27, 'Documentation of Maine residency includes a Maine home address where the Parent lives and one or more of the following: a current Maine individual income tax return indicating Maine Resident status, valid Maine driver's license, Maine State ID, current Maine motor vehicle registration, current Maine hunting/fishing license, proof of undergraduate Student in-State tuition payment, and other Department-approved verification."

Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility.

Describe the violations that lead to discontinued assistance and provide the citation for this policy or procedure.

CCSP Rules, " 12.09 Disqualification Penalties for Program Violations: 12.09.1 Parents or Child Care Providers who are found to have committed a program violation must be referred to the DHHS Fraud Investigation Unit pursuant to Title 22 M.R.S.A. §13. 12.09.2 The Department shall impose a disqualification penalty of up to one year if the Parent is found to have committed a program violation in connection with obtaining Child Care Subsidy benefits. A penalty shall be imposed after issuance of an Administrative Decision which determines that a Program Violation occurred or the Parent waives an Administrative Hearing. 12.09.3 Parents are disqualified for up to a year for a Child Care Subsidy if they had their Child Care Subsidy services terminated for a Program Violation related to Family income, Family size, or other eligibility criteria in order to be found eligible for services. 12.09.4 Parents and/or Child Care Providers convicted of Theft as a Class B or Class C crime by a court of competent jurisdiction regarding the funds administered by the Department through the Child

Care Subsidy program, TANF or other cash program shall be permanently disqualified from participation in the Child Care Subsidy program.

### 3.3.3 Change reporting during the 12-month eligibility period.

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

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

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

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

No

Yes

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

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

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

Describe:

- Changes that impact the Lead Agency's ability to contact the family.

Describe:

1. CCSP Rule 1.27: Maine Resident

- Changes that impact the Lead Agency's ability to pay child care providers.

Describe:

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

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

- Phone
- Email
- Online forms
- Extended submission hours
- Postal Mail
- FAX
- In-person submission
- Other.

Describe:

d) Families must have the option to voluntarily report changes on an ongoing basis during the 12-month eligibility period. Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in

income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

i. Describe any other changes that the Lead Agency allows families to report.

If the Gross Income or Allowable Net Income decreases; the parent fee can be lowered. A parent may report the following: change in hours, change in wages other than over 85% SMI, changes in employer, changes in number of hours needed, or change of Child Care Provider.

ii. Provide the citation for this policy or procedure.

CCSP Staff Manual: A parent may report the following: Change in hours, change in wages other than over 85% SMI, Changes in employer, Changes in number of hours needed, or Change of Child Care Provider.

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

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

Examples include developing strategies to inform families and their providers of an upcoming redetermination and the information that will be required of the family, pre-populating subsidy renewal forms, having parents confirm that the information is accurate, and/or asking only for the information necessary to make an eligibility redetermination. In addition, states and territories can offer a variety of family-friendly methods for submitting documentation for eligibility redetermination that considers the range of needs for families in accessing support (e.g. use of languages other than English, access to transportation, accommodation of parents working non-traditional hours, etc.).

a) Identify, where applicable, the Lead Agency's procedures and policies to ensure that parents (especially parents receiving TANF program funds) do not have their employment, education, or job training unduly disrupted to comply with the state/territory's or designated local entity's requirements for the redetermination of eligibility.



- Advance notice to parents of pending redetermination
- Advance notice to providers of pending redetermination
- Pre-populated subsidy renewal form
- Online documentation submission
- Cross-program redeterminations
- Extended office hours (evenings and/or weekends)
- Other.

Describe:

b) How are families allowed to submit documentation, described in 3.1.9, for redetermination? Check all that apply.

- Postal Mail
- Email
- Online forms
- FAX
- In-person submission
- Extended submission hours
- Other.

Describe:

### 3.4 Family Contribution to Payments

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

Note: To help families transition off of child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. However, section 3.4 applies only to families in their initial/entry eligibility period. See section 3.1.7 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

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

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

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?	The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?	Highest Initial or First Tier Income Level Before a Family Is No Longer Eligible	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?	The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?
1	\$215	\$4.00	2%	\$2,918	\$291	10%
2	\$215	\$4.00	2%	\$3,816	\$381	10%
3	\$215	\$4.00	2%	\$4,714	\$471	10%
4	\$215	\$4.00	2%	\$5,612	\$561	10%
5	\$215	\$4.00	2%	\$6,510	\$651	10%

b) What is the effective date of the sliding-fee scale(s)? 02/02/2018

c) Identify the most populous area of the state used to complete the chart above.

Cumberland County

d) Provide the link to the sliding-fee scale:

<http://www.maine.gov/dhhs/ocfs/ec/occhs/step.htm>

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

N/A

### 3.4.2 How will the family's contribution be calculated, and to whom will it be applied?

Check all that apply.

The fee is a dollar amount and:

- The fee is per child, with the same fee for each child.
- The fee is per child and is discounted for two or more children.
- The fee is per child up to a maximum per family.
- No additional fee is charged after certain number of children.
- The fee is per family.
- The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

Other.

Describe:

The fee is a percent of income and:

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

Describe:

Other.

Describe:

**3.4.3 Does the Lead Agency use other factors in addition to income and family size to determine each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT use cost of care or amount of subsidy payment in determining copayments (98.45(k)(2)).**

- No.
- Yes, check and describe those additional factors below.

- Number of hours the child is in care.

Describe:

- Lower co-payments for a higher quality of care, as defined by the state/territory.

Describe:

- Other.

Describe:

**3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.45(k)) or for families who are receiving or needing to receive protective services, as determined for purposes of CCDF eligibility, or who meet other criteria established by the Lead Agency (98.45(k)(4)). Does the Lead Agency waive family contributions/co-payments for any of the following? Check all that apply.**

- No, the Lead Agency does not waive family contributions/co-payments.
- Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the poverty level for families of the same size.
- Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility.

Describe the policy and provide the policy citation.

- Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency.

Describe the policy and provide the policy citation.

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

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care or care provided in the child's own home. In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each State/Territory identifies and defines its own categories and types of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

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

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

(98.15 (a)(5)).

**4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)).**

The Lead Agency allows the parent to select a Provider that has an agreement with CCSP after a Provider has been selected. If a provider is chosen by the parent that is not currently enrolled a packet that includes a Provider Agreement is sent to the chosen Provider to enroll. On the Parent Award Letter, the following is included, the award start and end dates, the parent fee amount, the names of the children the award is for, the Child Care Provider's name, authorized hours, and all consumer statement information.

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

**Check all that apply.**

- Certificate that provides information about the choice of providers
- Certificate that provides information about the quality of providers
- Certificate not linked to a specific provider, so parents can choose any provider
- Consumer education materials on choosing child care
- Referral to child care resource and referral agencies
- Co-located resource and referral in eligibility offices
- Verbal communication at the time of the application
- Community outreach, workshops, or other in-person activities
- Other.

Describe:

N/A

### 4.1.3 Child care services available through grants or contracts.

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

No. If no, skip to 4.1.4.

Yes, in some jurisdictions but not statewide.

If yes, describe how many jurisdictions use grants or contracts for child care slots.

Yes, statewide. If yes, describe:

i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:

ii. The type(s) of child care services available through grants or contracts:

iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers):

iv. The process for accessing grants or contracts:

v. How rates for contracted slots are set through grants and contracts:

vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality:

vii. If contracts are offered statewide and/or locally:

### 4.1.3 Child care services available through grants or contracts.

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

- Programs to serve children with disabilities
- Programs to serve infants and toddlers
- Programs to serve school-age children
- Programs to serve children needing non-traditional hour care
- Programs to serve children experiencing homelessness
- 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
  - N/A

4.1.3 Child care services available through grants or contracts.

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

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



**4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds (658E(c)(2)(B); 98.16(t)).**

The following is from the three licensed types of providers. Rules for the Licensing of Child Care Facilities: Responsibility to encourage parents to visit. The facility shall permit and encourage parents to visit the child, to observe the program at any time that the child is present and provide opportunities to participate in activities. Rules for the Licensing of Nursery Schools: Responsibility to encourage parents to visit. The Nursery School shall permit and encourage parents/legal guardians to visit the child, to observe the program at any time that the child is present and provide opportunities to participate in activities. State of Maine Family Child Care Licensing Rule: Visits. The provider must allow parents to visit and observe any time during the hours of operation. The CCSP Provider Agreement for License-Exempt Providers and Licensed Providers states “allow unlimited parental access”.

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

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

Describe:

Restricted based on minimum the number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements. CCSP only allows a License-Exempt Provider to provide child care in the parents' home for up to six (6) children. The Parent must pay the State hourly minimum wage to the Provider if subsidy does not equal that amount per hour.

- Restricted based on the provider meeting a minimum age requirement. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2).

Describe:

The Provider must be at least 18 years of age.

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

Describe:

- Restricted to care by relatives.

Describe:

- Restricted to care for children with special needs or a medical condition.

Describe:

- Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF.

Describe:

- Other.

Describe:

## 4.2 Assessing Market Rates and Child Care Costs

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

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

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

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

MRS

Alternative methodology.

Describe:

N/A

Both.

Describe:

N/A

**4.2.2 Prior to developing and conducting the MRS or alternative methodology, the Lead Agency is required to consult with the (1) State Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities and (2) organizations representing caregivers, teachers, and directors (98.45 (e)).**

Describe how the Lead Agency consulted with the:

a) State Advisory Council or similar coordinating body:

The Lead Agency did a presentation on the MRS with the CCAC at their monthly meeting and had a guest speaker from ICF, the company conducting the survey for the State. Questions and concerns were addressed on the survey and data collection. In addition, information was provided to the members on how the survey would be disseminated to Providers in the State.

b) Local child care program administrators:

Members of the CCAC include local child care program administrators.

c) Local child care resource and referral agencies:

MRTQ that oversees the Child Care Choices website has two members on the CCAC.

d) Organizations representing caregivers, teachers, and directors:

CCAC has members representing caregivers, teachers, and directors.

e) Other. Describe:

N/A

**4.2.3 Describe how the market rate survey is statistically valid and reliable. To be considered valid and reliable, the MRS must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variations, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data, such as child care resource and referral data, if they are representative of the market. If an alternative methodology, such as cost modeling, is used, demonstrate that the methodology used reliable methods.**

The Market Rate Survey (MRS) is conducted with licensed and CCDF unlicensed child care providers in Maine. To maximize representation, all child care providers are invited to conduct the survey via multiple modes, including the internet, postal survey, or by phone. The source of the contact information comes from Maine's licensing and Child Care Subsidy database and includes mailing address, emails, and telephone numbers. Data collection is based on a multi-mode strategy guided by the Tailored Design Method (Dillman, 2014) Contact with the providers is initiated with a prenotification letter that describes the purpose and importance of the survey. Following this initial contact, the data collection is conducted in multiple phases to maximize response. . 1,972 child care providers were sent surveys. 1,224 providers responded to the surveys.

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

a) Geographic area (e.g., statewide or local markets). Describe:

The market rate survey reflects variation in the price or cost of child care services by Geographic area by breaking down rates by the 16 counties in Maine.

b) Type of provider. Describe:

The market rate survey reflects variation in the price or cost of child care services by type of Provider as either Center, Family, or License-Exempt.

c) Age of child. Describe:

The market rate survey reflects variation in the price or cost of child care services by age of child as either infant, toddler, preschool, or school-age child.

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

N/A

**4.2.5 After conducting the market rate survey or alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or alternative methodology. The detailed report must also include the estimated cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, pre-K standards, Head Start performance standards, or State defined quality measures.)**

Describe how the Lead Agency made the results of the market rate survey or alternative methodology report widely available to the public (98.45(f)(1)). by responding to the questions below.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). 06/22/2018

b) Date the report containing results was made widely available - no later than 30 days after the completion of the report. 07/06/2018

c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted.

The Lead Agency posted the results of the MRS on their website and sent a copy of the report to the MCGC and CCAC. In addition, Licensing Specialists sent an email copy to all Licensed Providers. The link to the Lead Agency's webpage with the posted report was put on paper and online billing forms.

<https://www.maine.gov/dhhs/ocfs/ec/occhs/child-care.html>

d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report.

The Lead Agency viewed and replied to each comment sent on the report and took it into consideration.

### 4.3 Setting Payment Rates

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

**4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS) for the following categories below. Percentiles are not required if the Lead Agency conducted an alternative methodology only (with pre-approval from ACF), but must be reported if the Lead Agency conducted an MRS alone or in combination with an**

alternative methodology. The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. Please use the most populous geographic region (area serving highest number of CCDF children) to report base payment rates below, if they are not statewide. Note: If the Lead Agency obtained approval to conduct an alternative methodology, then reporting of percentiles is not required.

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

Rate \$ 303.00 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

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

Rate \$ 220.00 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

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

Rate \$ 279.00 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

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

Rate \$ 200.00 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

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

Rate \$ 259.00 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

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

Rate \$ 185.00 per weekly unit of time (e.g., daily, weekly, monthly)



Percentile of most recent MRS: 75th

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

Rate \$ 150.00 per weekly unit of time (e.g., daily, weekly, monthly, etc.)

Percentile of most recent MRS: 75th

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

Rate \$ 140.00 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

i) Describe how part-time and full-time care were defined and calculated.

Market rates in the report are provided on a daily and weekly basis. Using the information provided by respondents, the full-time rates were converted into daily and weekly rates based on the hourly rate times total weekly operating hours for hourly rate and daily rates times number of operating hours. These conversion formulas are similar to those used in the 2013 and 2015 analysis. For missing daily rates, ICF calculated daily conversions from the provider's hourly, weekly, and monthly rates. When a provider responded to more than one rate category, ICF evaluated each converted rate based on how close it was to the median daily rate from the survey responses. The converted rate that is closest to the median was selected. Similarly, for missing weekly rates, ICF calculated weekly conversions from the provider's hourly, daily, and monthly rates. In addition, when the provider included a part-time weekly rate, ICF converted it to full-time based on an adjustment factor (see below). When a provider responded to more than one rate category, ICF evaluated each converted rate based on how close it was to the median weekly rate from the survey responses. The converted rate closest to the median was selected.

j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). 06/30/2018

k) Identify the most populous area of the state used to complete the responses above.  
Cumberland County

l) Provide the citation or link, if available, to the payment rates.

<http://www.maine.gov/dhhs/ocfs/ec/occhs/provider-subsidy.htm>

m) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).

N/A

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

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

Differential rate for *non-traditional hours*.

Describe:

Non-traditional hours give 35% for 6PM-6AM and weekends

Differential rate for *children with special needs*, as defined by the state/territory.

Describe:

N/A

Differential rate for *infants and toddlers*. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:

N/A

- Differential rate for *school-age programs*. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

N/A

- Differential rate for higher quality, as defined by the state/territory.

Describe:

Maine provides a percentage increase in payments on behalf of families utilizing the Child Care Subsidy Program for providers who are at various steps on the Quality Rating and Improvement System. The higher quality the program is, the more incentive or quality bump funds they receive. Providers at a step 2 receive 2% quality bump in payment. Providers at a step 3 receive a 5% quality bump and providers at the highest level, 4, receive 10% quality bump. This incentivizes programs to move up the QRIS and provides increased funding to allow the program to sustain their high-quality program.

- Other differential rates or tiered rates.

Describe:

- Tiered or differential rates are not implemented.

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

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

a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and

practices.

The Lead Agency has conducted a 2018 market rate survey and reflected areas with higher rates than the prior Market Rate Survey. While LEH providers are not typically included in child care market rate surveys in other states, this survey includes LEH providers and analyzes the data separately from Center and Family providers to provided added detail for OCFS to consider for LEH providers. Reimbursement rates were raised to the 75% rate across all age groups for licensed providers. For the FFY 2018 the total number of CCSP new providers added to the program was increased by 187.

b) Describe how payment rates are adequate and have been established based on the **most recent MRS or alternative methodology** . Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

Payment rates are based on the MRS's results that are directly collected from Providers that are in different geographic locations, types of Providers, and multiple ages. In addition, Providers on a Step 2 or higher receive the 2, 5, 10% quality bump in reimbursement pay. The 2018 Market Rates reimburse at the 75% rate for all licensed providers after raising the rates to 75% the year prior for Center school-age and Family providers all age group. For a sense of perspective, as of 2017, only two states were reported to set reimbursement rates at the 75th percentile.

c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF.

Currently most CCSP Providers are not charging above the market rate and 38% of CCSP providers are above a Step 1 on QRIS receiving a bump in pay. In addition to the 75% reimbursement rate increase, the Lead Agency provides for free the required health and safety training to all providers in the state. Over the past eight months the percentage of providers having taken the training increased by 70%.

d) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, Pre-K standards, Head Start performance standards, or State defined quality measures).

Maine provides a percentage increase in payments on behalf of families utilizing the Child Care Subsidy Program for providers who are at various steps on the Quality Rating and Improvement System. The higher quality the program is, the more incentive or quality bump funds they receive. Providers at a step 2 receive 2% quality bump in payment. Providers at a step 3 receive a 5% quality bump and providers at the highest level, 4, receive 10% quality bump. This incentivizes programs to move up the QRIS and provides increased funding to allow the program to sustain their high-quality program. In 2015 MRTQ conducted a Quality for ME Revision Project. The Final Report included the following analysis compiled from key stakeholders of the benefits and strengths of the Quality for ME QRIS: "The benefit most frequently cited by providers was that *Quality for ME* provides standards, goals, monitoring and accountability. Other frequently mentioned benefits: incentivizes programs to improve quality, helps parents find a quality program, encourages and provides training/professional development." The 2018 Market Rates reimburse at the 75% rate for all licensed providers. For a sense of perspective, as of 2017, only two states were reported to set reimbursement rates at the 75th percentile. With the 2018 Market Rates going to the 75% percent reimbursement rate the amount of reimbursement received for higher levels of quality have increased with those rates. No changes to the rates per level were made based on these increases and to maintain a budget that would not require the need for a wait list.

e) How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds (98.16 (k))? Check all that apply.

Limit the maximum co-payment per family.

Describe: .

The sliding fee scale is based on a Parents' income and is 2-10% of gross income.

Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and

N/A

Minimize the abrupt termination of assistance before a family can afford the full cost of care ('the cliff effect') as part of the graduated phase-out of assistance discussed in 3.1.7.

N/A

Other.

Describe:

N/A

f) To support parental choice and equal access to the full range of child care options, does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

No

Yes. If yes:

i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families.

N/A

ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.

N/A

iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees.

N/A

g) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers.

The Lead Agency's payment practices are the same for all provider types and through several options for payment to be received to ensure that families a not limited to the range of access to providers.

h) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.

Geographic area.

Describe:

The Lead Agency differentiates payment rates by geographic area by the 16 different Maine counties.

Type of provider.

Describe:

The Lead Agency differentiates payment rates by Provider based on Center, Family, or Licensed-Exempt.

Age of child.

Describe:

The Lead Agency differentiates payment rates by age of child as infant, toddler, preschool, or school-age.

Quality level.

Describe:

The Lead Agency differentiates payment rates by quality level as A Step 1,2,3, or 4.

Other.

Describe:

N/A

i) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access. Check all that apply and describe:

Payment rates are set at the 75th percentile benchmark or higher of the most recent MRS.

Describe:

The Lead Agency's payment rates are at the 75 percentiles for Family Child Care and for Center school-age child care.

Based on the approved alternative methodology, payments rates ensure equal access.

Describe:

N/A

- Feedback from parents, including parent surveys or parental complaints.

Describe:

The Lead Agency takes feedback from parents into consideration through means of contacting OCFS through multiple means email, postal mail, fax, or by calling the office and speaking to their area Financial Resources Specialist (FRS), FRS supervisor, or the Lead Administrator.

- Other.

Describe:

N/A

## 4.5 Payment Practices and the Timeliness of Payments

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

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



In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(l)(4) through (6); 658E(c)(2)(S)(ii); 98.45(l)(4); 98.45(l)(5); 98.45(l)(6)).

**4.5.1 Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.**

a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

Paying prospectively prior to the delivery of services.

Describe the policy or procedure.

N/A

Paying within no more than 21 calendar days of the receipt of a complete invoice for services.

Describe the policy or procedure.

The Lead Agency's policy is to reimburse Providers within 21 calendar days.

b) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):

Paying based on a child's enrollment rather than attendance.

Describe the policy or procedure.

N/A

Providing full payment if a child attends at least 85 percent of the authorized time.

Describe the policy or procedure.

N/A

- Providing full payment if a child is absent for five or fewer days in a month.

Describe the policy or procedure.

N/A

- Use an alternative approach for which the Lead Agency provides a justification in its Plan.

If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

The Lead Agency's policy is to reimburse for unlimited acceptable absences. The Lead Agency pays for all acceptable absences which include Federal/State holidays; Parental vacation days; inclement weather defined by a snow day when local schools are closed; illness of the Child or other immediate Family member; transportation issues that affect the Parent's ability to transport the Child to care; Family emergencies, including, but not limited to, surgery, medical treatments, or accidents; or catastrophic events affecting the Family, including but not limited to fires, storms, or accidents.

c) The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).

- i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time).

Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time).

The Lead Agency's CCSP Provider Agreement requires the Provider to list all private rates charged. The following breakdown is for hourly time increments

Infant/Toddler/Preschool: full-time is 30 + hours per week, part-time is 20-29 hours per week, half-time 10-19 hours, and quarter-time is 0-9 hours per week. School age: full-time is 30 + hours per week, part-time is 11-29 hours per week, half-time is 6-10 hours per week, and quarter-time is 0-5 hours per week."

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.

Describe the policy or procedure.

The Lead Agency's policy on registration fees is that it will pay registration fees. Beginning 11/05/2018, data will be collected to determine how many Providers are charging a registration fee. Based on that data, a decision will be made to reflect if it is a common practice requiring the department to cover the cost or if not a common practice to require parents to pay the registration fee.

d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe:

The Lead Agency's policy is based on hours a child attended and includes acceptable absences. The Lead Agency pays for all acceptable absences which include Federal/State holidays; Parental vacation days; inclement weather defined by a snow day when local schools are closed; illness of the Child or other immediate Family member; transportation issues that affect the Parent's ability to transport the Child to care; Family emergencies, including, but not limited to, surgery, medical treatments, or accidents; or catastrophic events affecting the Family, including but not limited to fires, storms, or accidents.

e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur.

Describe:

The Lead Agency provides notice prior to a change occurring. Typically, a two-week notice is sent via mail and when possible email at the same time.

f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

CCSP Providers are given a ten day notice to appeal any payment inaccuracies.

g) Other. Describe:

N/A

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

No, the practices do not vary across areas.

Yes, the practices vary across areas.

Describe:

N/A

### 4.6 Supply-Building Strategies to Meet the Needs of Certain Populations

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

**4.6.1 Lead Agencies must identify shortages in the supply of high-quality child care providers. List the data sources used to identify shortages, and describe the method of tracking progress to support equal access and parental choice.**

In licensed family child care.

Currently all CCSP Parents have been able to access care with a CCSP Provider. CCSP Licensed Providers must be at minimum a Step 1 on the QRIS. Currently Cumberland County has nearly 50% more licensed-exempt providers, indicating a parental choice for higher quality care maybe limited in this county. Currently MeCDC reports the Licensing Specialists are finding two factors contributing to child care shortages across the state. The first being parents unable to find infant care and be put on wait lists. The two counties with the highest amounts of shortages are Cumberland and York. Recently there has been a significant increase in licensed family child cares in Aroostook County

that had been underserved.

**In licensed child care centers.**

Currently all CCSP Parents have been able to access care with a CCSP Provider. CCSP Licensed Providers must be at minimum a Step 1 on the QRIS. Androscoggin County has 46% more license-exempt providers. indicating a parental choice for higher quality care maybe limited in this county. Currently MeCDC reports the Licensing Specialists are finding two factors contributing to child care shortages across the state. The first being parents unable to find infant care and be put on wait lists. The two counties with the highest amounts of shortages are Cumberland and York. The second being Maine's staffing. In some child care's there are issues with the capacity of children not being met due to not having enough providers and leaving classrooms empty.

**Other.**

N/A

#### **4.6.2 Describe what method(s) is used to increase supply and to improve quality for the following.**

a) Children in underserved areas. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

Family child care networks.

Describe:

Start-up funding.

Describe:

Technical assistance support.

Describe:

MRTQ/PDN, offers technical assistance (T/A) to programs in all settings.

Recruitment of providers.

Describe:

Tiered payment rates (as discussed in 4.3.2).

Describe:

CCSP providers receive a quality bump in reimbursement for child care.

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

CCSP providers are able to charge for up to four paid training days and five days' worth of sick or vacation.

Accreditation supports.

Describe:

MRTQ/PDN, offers T/A to programs in all settings for a program seeking accreditation for NAFCC, NAEYC, and COA. This is done through a program's request.

Child Care Health Consultation.

Describe:

Mental Health Consultation.

Describe:

MRTQ/PDN, offers T/A to programs for mental health consultation.

Other.

Describe:

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

b) Infants and toddlers. Check and describe all that apply.

- Grants and contracts (as discussed in 4.1.3).

Describe:

- Family child care networks.

Describe:

- Start-up funding.

Describe:

- Technical assistance support.

Describe:

MRTQ/PDN, offers T/A to programs in all setting.

- Recruitment of providers.

Describe:

- Tiered payment rates (as discussed in 4.3.2) .

Describe:

CCSP providers receive a quality bump in reimbursement for child care.

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

CCSP providers are able to charge for up to four paid training days and five days' worth of sick or vacation

- Accreditation supports.

Describe:

MRTQ/PDN, offers T/A to programs in all settings for a program seeking accreditation for NAFCC, NAEYC, and COA. This is done through a program's request.

- Child Care Health Consultation.

Describe:

- Mental Health Consultation.

Describe:

MRTQ/PDN, offers T/A to programs for mental health consultation.

- Other.

Describe:

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

c) Children with disabilities. Check and describe all that apply.

- Grants and contracts (as discussed in 4.1.3).

Describe:

- Family child care networks.

Describe:

- Start-up funding.

Describe:

- Technical assistance support.

Describe:

MRTQ/PDN, offers T/A to programs in all setting.

- Recruitment of providers.

Describe:

- Tiered payment rates (as discussed in 4.3.2).

Describe:

CCSP providers receive a quality bump in reimbursement for child care.



- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

CCSP providers are able to charge for up to four paid training days and five days' worth of sick or vacation

- Accreditation supports.

Describe:

MRTQ/PDN, offers T/A to programs in all settings for a program seeking accreditation for NAFCC, NAEYC, and COA. This is done through a program's request.

- Child Care Health Consultation.

Describe:

- Mental Health Consultation.

Describe:

MRTQ/PDN, offers T/A to programs for mental health consultation.

- Other.

Describe:

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

d) Children who receive care during non-traditional hours. Check and describe all that apply

- Grants and contracts (as discussed in 4.1.3).

Describe:

- Family child care networks.

Describe:

Start-up funding.

Describe:

Technical assistance support.

Describe:

MRTQ/PDN, offers T/A to programs in all setting.

Recruitment of providers.

Describe:

Tiered payment rates (as discussed in 4.3.2) .

Describe:

CCSP providers receive a quality bump in reimbursement for child care.

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

CCSP providers are able to charge for up to four paid training days and five days' worth of sick or vacation.

Accreditation supports.

Describe:

MRTQ/PDN, offers T/A to programs in all settings for a program seeking accreditation for NAFCC, NAEYC, and COA. This is done through a program's request.

Child Care Health Consultation.

Describe:

Mental Health Consultation.

Describe:

MRTQ/PDN, offers T/A to programs for mental health consultation.

Other.

Describe:

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

e) Other. Check and describe all that apply:

Grants and contracts (as discussed in 4.1.3).

Describe:

Family child care networks.

Describe:

Start-up funding.

Describe:

Technical assistance support.

Describe:

Recruitment of providers.

Describe:

Tiered payment rates (as discussed in 4.3.2).

Describe:

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Accreditation supports.

Describe:

Child Care Health Consultation.

Describe:

Mental Health Consultation.

Describe:

Other.

Describe:

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

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment?

The Lead Agency defines areas with significant concentration of poverty as areas with clusters of families below 100 percent of the federal poverty level. The Lead Agency defines areas with significant concentration of unemployment would be counties in the State that are above the current National average for unemployment.

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs CCSP families with children who are homeless, who come from low income families, or who have special needs receive a priority on the waiting list to ensure children who are at-risk have access to high-quality programs. Currently there is no waiting list for CCSP.

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

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children, whether they are licensed or license-exempt. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for providers of child care in a state or territory and then moves to focus in on CCDF providers who may be licensed, exempt from licensing, or relative providers. The section then covers the health and safety requirements and training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Lead Agencies are also asked to describe any exemptions for relative providers (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children.

Note: When responding to questions in this section, the OCC recognizes that each State/Territory identifies and defines its own categories of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important to note that these requirements are in effect for all child care staff members that are licensed, regulated or registered under state/territory law and all other providers eligible to deliver CCDF services.

## 5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

**5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check all that apply and provide a citation to the licensing rule.**

Center-based child care.

Describe and Provide the citation:

Rules for the Licensing of Child Care Facilities 1.5: "a house or other place in which a person maintains or otherwise carries out a regular program, for consideration, for any part of a day providing care and protection for three (3) or more children under thirteen (13) years of age. Any program for children under 5 years of age that is located in a private school and programs that contract with one or more Child Development Services System sites are required to be licensed as a Child Care Facility.

Family child care.

Describe and Provide the citation:

Family Child Care Provider Licensing Rule Definition 14: licensee means the person who has been issued a license by the Department to operate a family child care. A licensee means a "family child care provider" as defined at 22 M.R.S. §8301-A (1-A) (C).

In-home care (care in the child's own home).

Describe and provide the citation (if applicable):

**5.1.2 Describe if any providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)).**

Note: Additional information about exemptions related to CCDF providers is required in 5.1.3. The rules are implemented through DHHS, Maine MeCDC, Child Care Licensing. Current statutes make exempt any individual caring for fewer than three unrelated children from certification. The limited number of children in this license-exempt setting results in a high level of adult supervision resulting in low levels of risk to children. A summer camp established solely for recreational and educational purposes are licensed by the Maine Center for Disease Control which assures the health and safety of children in those settings. Additionally, recreational programs are eligible to receive CCDF but are not required to be licensed or certified. These programs are staffed by trained professionals and instruction occurs in controlled settings under close supervision, and for limited periods of time, which results in low levels of risk to children.

**5.1.3 Check and describe any CCDF providers in your state/territory who are exempt from licensing (98.40(2)(i) through (iv))? Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care or any other factors applicable to the exemption**

Center-based child care.

If checked, describe the exemptions.

Family child care.

If checked, describe the exemptions.

In-home care.

If checked, describe the exemptions.

A License-Exempt Child Care Provider who is eighteen (18) years of age or older, provides Child Care Services to no more than two (2) un-Related Children or no more than six (6) Children total, including the Child Care Provider's Children in the Parent's home. Relative who is a License-Exempt Child Care Provider, eighteen (18) years of age or older, who provides Child Care Services to no more than six (6) Children total, including the Child Care Provider's Child(ren).

## 5.2 Health and Safety Standards and Requirements for CCDF Providers

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

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

#### a) Licensed CCDF center-based care

##### 1. Infant

-- How does the State/territory define infant (age range):

6 weeks to 1 year

-- Ratio:

1: 4

-- Group size:

8



-- **Teacher/caregiver qualifications:**

All staff shall be at least eighteen (18) years old. All staff shall have a high school diploma or equivalent or be attending high school or be enrolled in a GED (General Educational Development) preparation program. Group leader. The group leader or person having the primary responsibility for a group of children in a facility with thirteen (13) or more children shall be at least eighteen (18) years of age and meet one of the following: 1. Credential. Child Development Associate (CDA) as awarded by the CDA National Credentialing Program. 2. Experience. Six (6) months experience working in a Child Care Facility licensed for 13 or more children. 3. College credits. One year (30 credit hours) of college work including a course in a child related subject.

**2. Toddler**

-- **How does the State/territory define toddler (age range):**

1 to 2 ½ years old

-- **Ratio:**

1:4 or 1:5

-- **Group size:**

10 or 12

-- **Teacher/caregiver qualifications:**

All staff shall be at least eighteen (18) years old. All staff shall have a high school diploma or equivalent or be attending high school or be enrolled in a GED (General Educational Development) preparation program. Group leader. The group leader or person having the primary responsibility for a group of children in a facility with thirteen (13) or more children shall be at least eighteen (18) years of age and meet one of the following: 1. Credential. Child Development Associate (CDA) as awarded by the CDA National Credentialing Program. 2. Experience. Six (6) months experience working in a Child Care Facility licensed for 13 or more children. 3. College credits. One year (30 credit hours) of college work including a course in a child related subject.

### 3. Preschool

-- How does the State/territory define preschool (age range):

2 ½-3 ½ & 3 ½ -Not yet school-age 5

-- Ratio:

1:7 and 1:8 or 1:10

-- Group size:

21 and 24 or 20

-- Teacher/caregiver qualifications:

All staff shall be at least eighteen (18) years old. All staff shall have a high school diploma or equivalent or be attending high school or be enrolled in a GED (General Educational Development) preparation program. Kindergarten. If the Child Care Facility provides a kindergarten program, it must be staffed by a certified teacher. Group leader. The group leader or person having the primary responsibility for a group of children in a facility with thirteen (13) or more children shall be at least eighteen (18) years of age and meet one of the following: 1. Credential. Child Development Associate (CDA) as awarded by the CDA National Credentialing Program. 2. Experience. Six (6) months experience working in a Child Care Facility licensed for 13 or more children. 3. College credits. One year (30 credit hours) of college work including a course in a child related subject.

### 4. School-age

-- How does the State/territory define school-age (age range):

5 to 15 years old

-- Ratio:

1:13

-- Group size:

N/A

-- Teacher/caregiver qualifications:

All staff shall have a high school diploma or equivalent or be attending high school or be enrolled in a GED (General Educational Development) preparation program. Kindergarten. If the Child Care Facility provides a kindergarten program, it must be staffed by a certified teacher. Group leader. The group leader or person having the primary responsibility for a group of children in a facility with thirteen (13) or more children shall be at least eighteen (18) years of age and meet one of the following:

1. Credential. Child Development Associate (CDA) as awarded by the CDA National Credentialing Program.
2. Experience. Six (6) months experience working in a Child Care Facility licensed for 13 or more children.
3. College credits. One year (30 credit hours) of college work including a course in a child related subject.

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers

The State of Maine does not have exempt child centers

6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups.

Ratios and group sizes are determined by the youngest child in the mixed age group.

7. Describe the director qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care.

Facilities licensed for 13-20 children: Director and/or Head Teacher qualifications. The director and/or head teacher shall be at least twenty-one (21) years of age and meet one of the following: 1. High school. Graduation from an accredited high school or its equivalent and twelve (12) months of employment in a licensed Child Care Facility licensed for thirteen (13) or more children or twelve (12) months experience as the operator of a Child Care Facility licensed for three to twelve (3-12) (including Family Child Care), and twelve (12) hours training in healthy, safe environments; child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development, childcare, early childhood education, topics related to operating a Child Care Facility, or other subjects related to the age or characteristics of children for whom care is planned. 2. College courses. Thirty (30) credit hours of college courses including six (6) credit hours in childcare, child development, childcare

administration, behavioral sciences or closely related subjects and six (6) months experience (employment or college practicum) in a Child Care Facility licensed for 13 or more children) or six (6) months experience (employment or college practicum) operating a Child Care Facility for three (3) to twelve (12) children. 3. Credential. Child Development Associate (CDA) as awarded by the CDA National Credentialing Program. Director or Head Teacher. The facility must employ a minimum of one (1) director or head teacher. The director/head teacher may be the operator or licensee.

Facilities licensed for 21 - 49 children: Director and/or Head Teacher qualifications. The director and/or head teacher shall be at least twenty-one (21) years of age and meet one of the following: 1. Associate degree. An Associate in Arts/Associate in Science (AA/AS) in Early Childhood Education; or 2. AA/AS in related field. An AA/AS with twelve (12) credits in Early Childhood Education or a related field and two (2) years direct childcare experience; or 3. College credit and experience. Thirty (30) college credits in Early Childhood Education with one (1) year direct childcare experience; or 4. Credential and experience. Child Development Associate (CDA) as awarded by the CDA National Credentialing Program with three (3) years direct childcare experience; or 5. Experience and training. Five (5) years direct childcare experience and one hundred and thirty-five (135) hours of training in healthy, safe environments; child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development; childcare, early childhood education, topics related to operating a Child Care Facility; or other subjects related to the age or characteristics of children for whom care is planned. 6. Program Directors. Directors and/or head teachers of School-Age Childcare Programs (Section 23) shall have an AA/AS in Early Childhood Education or a closely related field such as elementary education, youth development, or recreation management or thirty (30) college credits in Early Childhood Education or a closely related field, such as elementary education, youth development, or recreation management or Section 27.3.1.4 or Section 27.3.1.5 above. Facilities licensed for 50 or more children: Director and/or Head Teacher qualifications. The director and/or head teacher shall be at least twenty-one (21) years of age and meet one of the following: 1. Degree in Early Childhood Education. A Bachelor of Science/Bachelor of Arts (BA/BS) in Early Childhood Education; or 2. Degree and experience. An Associate in Arts/Associate in Science (AA/AS) in Early Childhood Education and three (3) years direct childcare experience; or 3. AA/AS and experience. AA/AS in a related field with eighteen (18)

credit hours in Early Childhood Education and three (3) years direct childcare experience; or 4. BA/BS and experience. BA/BS in a related field with eighteen (18) credit hours in Early Childhood Education and three (3) years direct childcare experience; or 5. Credential and experience. Child Development Associate (CDA) as awarded by the CDA National Credentialing Program with five (5) years direct childcare experience; or 6. Experience and training. Seven (7) years' experience and one hundred and eighty (180) hours of training in healthy, safe environments, child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development; childcare, early childhood education, topics related to operating a Child Care Facility; or other subjects related to the age or characteristics of children for whom care is planned. 7. School-Age Childcare Programs. Directors and/or head teachers of School-Age Childcare Programs (Section 23) will have a BA/BS in Early Childhood Education or a closely related field such as elementary education, youth development, or recreation management or an AA/AS in Early Childhood Education or a closely related field, such as elementary education, youth development, or recreation management and two (2) years' experience or meet requirements in Section 27.4.1.5 and Section 27.4.1.6 above.

## b) Licensed CCDF family child care provider

### 1. Infant

-- How does the State/territory define infant (age range):

6 weeks to 1 years old

-- Ratio:

One provider may care for four infants or one provider may care for three infants, three preschoolers and two school age children. Two providers may care for eight infants, or three providers can care for twelve children.

-- Group size:

4,8,12

-- Teacher/caregiver qualifications:

The applicant must be at least 18 years old. A provider must be at least 16 years old, and, if younger than 18 years old, must be under the direct supervision of an adult.

## 2. Toddler

-- How does the State/territory define toddler (age range):

1 to 3 years old

-- Ratio:

One provider may care for three toddlers, three preschoolers and two school age children, two providers can care for six toddlers and six preschoolers.

-- Group size:

8 or 12

-- Teacher/caregiver qualifications:

The applicant must be at least 18 years old. A provider must be at least 16 years old, and, if younger than 18 years old, must be under the direct supervision of an adult.

## 3. Preschool

-- How does the State/territory define preschool (age range):

3 to 5 years old

-- Ratio:

One provider may care for eight preschoolers and two school age children, two providers may care for twelve preschoolers.

-- Group size:

8, 10, or 12

-- Teacher/caregiver qualifications:

The applicant must be at least 18 years old. A provider must be at least 16 years old, and, if younger than 18 years old, must be under the direct supervision of an adult.

4. School-age

-- How does the State/territory define school-age (age range):

5 years and under 13 years

-- Ratio:

One provider may care for 12 children.

-- Group size:

12

-- Teacher/caregiver qualifications:

The applicant must be at least 18 years old. A provider must be at least 16 years old, and, if younger than 18 years old, must be under the direct supervision of an adult.

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes

There are no rules established for exempt providers with the exception that a License-Exempt Provider may not care for more than two children that do not reside in the home.

c) In-home CCDF providers:

1. Describe the ratios

The State of Maine does not have separate regulations for In-home CCDF providers. In-home providers may not care for more than two children that do not reside in the home without a Family Child Care license.

2. Describe the group size

In-home providers may not care for more than two children that do not reside in the home without a Family Child Care license

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

. In-home providers may not care for more than two children that do not reside in the home without a Family Child Care license.

4. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size

N/A

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

N/A

## 5.2 Health and Safety Standards and Requirements for CCDF Providers

### 5.2.2 Health and safety standards for CCDF providers.

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

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



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

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

Prevention and control of infectious diseases and immunizations standards is defined by following proper handwashing procedures, through proper methods of cleaning and sanitizing, and disinfecting surface areas, bedding, and toys/objects, getting daily outdoor fresh air as available, proper dental hygiene, by not attending child care when ill, and to have children stay current on vaccinations with nationally recommended vaccines by a licensed healthcare provider.

-- List all citations for these requirements, including those for licensed and license-exempt programs

CCSP Provider Agreement Section "Health and Safety" and proposed CCSP Rules:"7.7 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.1 Prevention and Control of Infectious Diseases;"

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations for category of care.

-- Describe any variations based on the age of the children in care

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

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

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

Prevention of sudden infant death syndrome (SIDS) and the use of safe-sleep practices is standard is defined as following practices to reduce the risk of SIDS by placing baby to sleep on his or her back, on a firm mattress and safety-approved crib, removal of any loose bedding, while sleeping make sure head stays uncovered, and the baby does not get overheated.

-- List all citations for these requirements, including those for licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules, 7.7 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.2 Prevention of Sudden Infant Death Syndrome and the use of Safe-Sleep Practices;"

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations for category of care.

-- Describe any variations based on the age of the children in care

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

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

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

Administration of medication, consistent with standards for parental consent standard is defined as Child Care Providers and staff must be aware of and follow state

regulations, laws, and program policies and procedures. Directors, supervisors, and owner/operators are responsible to prepare and enforce policies for accurate medication administration procedures. They must also make sure that identified staff are well trained to administer medication to children by following state approved medication administration training guidelines. Medicines administered in child care centers, family group homes, and family child care programs should be limited to prescription or nonprescription (over-the-counter or OTC) medications. All medication administration must include parental/guardian written, documented permission, and medication logs. Medications must be ordered by a prescribing health professional for a specific child. Orders from the prescribing health professional should specify the medical need, medication, dosage, and length of time to give medication.

-- List all citations for these requirements, including those for licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.3. Administration of medication, consistent with parental consent;"

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations for category of care.

-- Describe any variations based on the age of the children in care

There are no variations for category of care.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

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

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

Prevention of and response to emergencies due to food and allergic reactions standard is defined by having classroom procedures for policies, food preparation and food label reading, food services, cleaning and sanitizing, field trips, and recognizing symptoms. By also having a food allergy action plan or emergency care plan in place for a child with severe food allergies.

-- List all citations for these requirements, including those for licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.4 Prevention of and response to emergencies due to food and allergic reactions;"

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations for category of care.

-- Describe any variations based on the age of the children in care

There are no variations for category of care.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic

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

Building and physical premises safety, including the identification of and protection from hazards that cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic is defined as a safe space where age appropriate planning and checks take place inside and outside for toys, furniture, materials, and equipment. Proper supervision takes place even during naptime. Prepare and prevent to ensure children in care are able to move around the space and explore.

-- List all citations for these requirements, including those for licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.5 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;"

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations based on the age of the children in care.

-- Describe any variations based on the age of the children in care

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

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

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

The standard for prevention of Shaken Baby Syndrome, Abusive Head Trauma, and Child maltreatment is defined as "All child care facilities should have a policy and

procedure to identify and prevent shaken baby syndrome/abusive head trauma. All caregivers/teachers who are in direct contact with children including substitute caregivers/teachers and volunteers, should receive training on how to prevent shaken baby syndrome/abusive head trauma, recognize the potential signs and symptoms of shaken baby syndrome/abusive head trauma, learn strategies for coping with a crying, fussing or distraught child, and learn the development and vulnerabilities of the brain in infancy and early childhood."

-- List all citations for these requirements, including those for licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.6. Prevention of Shaken Baby Syndrome, Abusive Head Trauma, and Child maltreatment;"

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations for category of care.

-- Describe any variations based on the age of the children in care

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and

practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

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

Emergency preparedness and response planning for emergencies resulting from a natural disaster or a humancaused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelterinplace and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions standard is defined as every child care facility needs a written plan for emergencies. Every person who works in a child care facility, every early care and education (ECE) professional, should know his or her role in emergency situations, and how to follow the plan to keep children and adults safe if an emergency occurs. A written emergency preparedness plan should include step-by-step procedures for evacuation, relocation, shelter-in-place, lockdown, communication and reunification with families, and planning for vulnerable children.

-- List all citations for these requirements, including those for licensed and license-exempt providers

PCCSP Provider Agreement Section "Health and Safety". roposed CCSP Rules: "7.7 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.7 Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event"

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations for category of care.

-- Describe any variations based on the age of the children in care

There are no variations for age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

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

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

Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants standard is defined as any material that either contains poison or is poisonous, and possibly can cause serious problems or even death. Exposure can take place through inhalation, skin contact, or ingestion. When not in use, all hazardous materials should be stored in the original container in a locked cabinet or room that has a child-resistant lock and is not accessible to children. Chemicals should be stored separately from food and medications. All hazardous materials should be used per the manufacturer's instructions on the label. Pesticides and other chemicals should not be used when children are present. Chemicals used to treat lawns should be restricted to chemicals that are approved for use in areas where children will be present.

-- List all citations for these requirements, including those for licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.8 Handling and storage of hazardous materials and appropriate disposal of bio-contaminants"



-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations for category of care.

-- Describe any variations based on the age of the children in care

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

#### 9. Precautions in transporting children (if applicable)

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

Precautions in transporting children is defined as all providers and staff follow state laws and regulations, program polices, liability, and insurance. Written transportation policies should be in place and should address the safe transport of children by vehicle to and from the facility, home pickups and deliveries, and special outings such as field trips. Policies should also address the safe care of children around vehicles, such as during drop-off and pickup times, in parking lots, or anywhere that children may be exposed to moving vehicles.

-- List all citations for these requirements, including those for licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.9 Appropriate precautions in transporting children."

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations for category of care.

-- Describe any variations based on the age of the children in care

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

#### 10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification

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

Pediatric first aid and cardiopulmonary resuscitation (CPR) certification standard is defined as Providers have learned the priorities, roles, and responsibilities of a rescuer providing first aid or CPR to a child or an infant. Included is how to help when a child or infant is choking. Proper certification is gained through training on CPR with compressions and breaths.

-- List all citations for these requirements, including those for licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.10 Pediatric first-aid and cardiopulmonary resuscitation (CPR);"

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations for category of care.

-- Describe any variations based on the age of the children in care

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

#### 11. Recognition and reporting of child abuse and neglect

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

Recognition and reporting of child abuse and neglect standard is defined as Abuse or neglect means a threat to a child's health or welfare by physical, mental or emotional injury or impairment, sexual abuse or exploitation, deprivation of essential needs or lack of protection from these, by a person responsible for the child. Any provider suspecting abuse and/or neglect must report this information to Child Protective Intake Services, which is staffed 24 hours a day, 7 days a week. The provider must maintain documentation that a report has been made.

-- List all citations for these requirements, including those for licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.11 Recognition and reporting of child abuse and neglect."

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations for category of care.

-- Describe any variations based on the age of the children in care

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

b) Does the Lead Agency include any of the following optional standards?

No, if no, skip to 5.2.3.

Yes, if yes provide the information related to the optional standards addressed.

#### 1. Nutrition

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

-- List all citations for these requirements, including those for licensed and license-exempt providers

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

-- Describe any variations based on the age of the children in care.

--Describe if relatives are exempt from this requirement

#### 2. Access to physical activity

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

-- List all citations for these requirements, including those for licensed and license-exempt providers

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

-- Describe any variations based on the age of the children in care.

--Describe if relatives are exempt from this requirement

### 3. Caring for children with special needs

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

-- List all citations for these requirements, including those for licensed and license-exempt providers

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

-- Describe any variations based on the age of the children in care.

--Describe if relatives are exempt from this requirement

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

Describe:

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

-- List all citations for these requirements, including those for licensed and license-exempt providers

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

-- Describe any variations based on the age of the children in care.

--Describe if relatives are exempt from this requirement

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

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

#### Pre-Service or Orientation Training Requirements

a) Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:

1. Licensed child care centers:

6 hours

2. Licensed FCC homes:

6 hours

3. In-home care:

6 hours

4. Variations for exempt provider settings:

6 hours

b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer)

90 days from beginning of the CCSP Provider Agreement being signed or date of hire under a CCSP Provider.

c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served

N/A

d) Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered

The training is offered via computer and can be completed individually or in a group setting.

e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).

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

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7. All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: Prevention and Control of Infectious Diseases; "

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

### 5.2.3e 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7. All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.2. Prevention of Sudden Infant Death Syndrome and use of Safe Sleep Practices:"

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

### 5.2.3e 3. Administration of medication, consistent with standards for parental consent

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers



CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7. All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.3. Administration of medication, consistent with parental consent;"

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

. Relatives are exempt from this requirement.

#### 5.2.3e 4. Prevention and response to emergencies due to food and allergic reactions

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7. All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.4. Prevention and response to emergencies due to food and allergic reactions;"

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

#### 5.2.3e 5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7. All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.5. Building and physical premise safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic;"

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

#### 5.2.3e 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7. All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.6. Prevention of Shaken Baby Syndrome, Abusive Head Trauma, and Child maltreatment;"

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

5.2.3e 7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7. All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.7. Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event;"

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

5.2.3e 8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7. All Child Care Providers, Teachers, and directors associated with Child Care

Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants;"

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

#### 5.2.3e 9. Appropriate precautions in transporting children (if applicable)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7. All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.9. Appropriate precautions in transporting Children;"

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care

for children unsupervised?

- Yes  
 No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes  
 No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

#### 5.2.3e 10. Pediatric first aid and CPR certification

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7. All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.10. Pediatric first-aid and cardiopulmonary resuscitation (CPR);"

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- Yes  
 No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

#### 5.2.3e 11. Recognition and reporting of child abuse and neglect

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules: "7.7. All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must have attained a Step Four (4) quality rating from Maine Roads to Quality OR successfully completed the Department-approved orientation training that includes, at a minimum, the Health and Safety Standards below, within ninety (90) calendar days of beginning his/her work with Children: 7.7.11. Recognition and reporting of child abuse and neglect"

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

#### 5.2.3e 12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety". Proposed CCSP Rules:

"All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below"

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

5.2.3e 13.

Describe other training requirements, such as nutrition, physical activities, caring for children with special needs, etc..

N/A

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?



- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

## Ongoing Training Requirements

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

#### a) Licensed child care centers:

MRTQ/PDN has developed a 1.5-hour health and safety annual training module for all CCSP Providers, caregivers, teachers, and staff. The training will be at no cost and the same for all CCSP Providers.

#### b) Licensed FCC homes:

MRTQ/PDN has developed a 1.5-hour health and safety annual training module for all CCSP Providers, caregivers, teachers, and staff. The training will be at no cost and the same for all CCSP Providers.

#### c) In-home care:

MRTQ/PDN has developed a 1.5-hour health and safety annual training module for all CCSP Providers, caregivers, teachers, and staff. The training will be at no cost and the same for all CCSP Providers.

#### d) Variations for exempt provider settings:

The training will be the same for all CCSP Providers.

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

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety ". Proposed CCSP Rules: "7.8 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below: Prevention and Control of Infectious Diseases; "

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety ". Proposed CCSP Rules: "7.8 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below: Prevention of Sudden Infant Death Syndrome and use of Safe Sleep Practices;"

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety ". Proposed CCSP Rules: "7.8 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS),

inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below: Administration of medication, consistent with the standards for parental consent;"

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety ". Proposed CCSP Rules: "7.8 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below: Prevention and response to emergencies due to food and allergic reactions;"

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety ". Proposed CCSP Rules: "7.8 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below: 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;"

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

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

caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety ". Proposed CCSP Rules: "7.8 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below: Prevention of Shaken Baby Syndrome, Abusive Head Trauma, and child maltreatment;"

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety ". Proposed CCSP Rules: "7.8 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below: Emergency preparedness and response planning for emergencies resulting from a natural disaster, or man-caused event;"

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety ". CCSP Provider Agreement Section "Health and Safety ". Proposed CCSP Rules: "7.8 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-

emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below: Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants;"

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

9. Appropriate precautions in transporting children (if applicable)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety".. Proposed CCSP Rules: "7.8 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below: Appropriate precautions in transporting Children 9if applicable);"

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



caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

#### 10. Pediatric first aid and CPR certification

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety ". Proposed CCSP Rules: "7.8 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below: Pediatric first-aid and cardiopulmonary resuscitation (CPR);"

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

#### 11. Recognition and reporting of child abuse and neglect

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety ". Proposed CCSP Rules: "7.8 All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below: Recognition and reporting of child abuse and neglect."

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

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

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

CCSP Provider Agreement Section "Health and Safety ". Proposed CCSP Rules: "7.8

All Child Care Providers, Teachers, and directors associated with Child Care Providers (excluding Relative Child Care Providers) must successfully complete the Department-approved annual training, that includes, at a minimum, the major domains of child development, social-emotional behavioral intervention models, knowledge and application of the Maine Early Learning and Development Standards (MELDS), inclusion of Children with Special Needs, Homelessness, and the minimum Health and Safety Standards listed below."

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

13. Describe other requirements such as nutrition, physical activities, caring for children with special needs, etc..

N/A

Provide the citation for other training requirements, including citations for both licensed and license-exempt providers

N/A

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

## 5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

### **5.3.1 Enforcement of licensing and health and safety requirements**

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

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements

MRTQ/PDN oversees the certifications of completion of the initial and annual health and safety training. MeCDC the department overseeing the Children's Licensing and Investigation Unit oversees the monitoring and documentation required to be maintained by child care providers.

### **5.3.2 Inspections for licensed CCDF providers.**

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

a) Licensed CCDF center-based child care

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed child care center providers for compliance with health, safety, and fire standards

All applicants for a child care center license receive a pre-licensure inspection which comprises of meeting health, safety and fire standards prior to a license being issued

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers

Child Care providers are inspected based on a differential monitoring system.

Providers receive unannounced inspections based on their compliance history in 1, 3, 6 month or 1 year intervals. The frequency of inspections changes based on the results of inspections, complaint investigations and any subsequent licensing action.

3. Identify the frequency of unannounced inspections:

Once a year

More than once a year

Describe:

Child Care providers are inspected based on a differential monitoring system.

Providers receive unannounced inspections based on their compliance history in 1, 3, 6 month or 1 year intervals. The frequency of inspections changes based on the results of inspections, complaint investigations and any subsequent licensing action.

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards.

Annually providers have a comprehensive inspection to ensure that child care center providers are complying with the applicable licensing standards which includes health, safety and fire standards. In addition to the annual inspection providers are inspected based on a differential monitoring system at 1, 3 or 6 month intervals based on the provider's history of compliance.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers

Maine Center for Disease Control and Prevention Division of Environmental and Community Health Standard Operating Procedure # 9 Differential Monitoring'  
"POLICY & PROCEDURE: A. Scheduling: Each CCLS will develop and maintain a visitation schedule for all assigned providers, based upon their history, including the factors of complaints received, history of licensing action, and observed compliance with rules. The following general guidelines for the frequency of visits shall be observed: 1. Biennial visits (every six months): Provider is operating with a demonstrated excellent history of understanding of and compliance with relevant rules. 2. Triennial visits (every four months): Provider is generally operating within compliance; past inspections resulted in the identification of some areas of non-compliance. 3. Quarterly visits (every three months): Provider was issued a Statement of Deficiencies following the last inspection, shown patterns of non-compliance or the provider has entered into a consent agreement with the Department. 4. Monthly visits (every month): Provider is operating on a conditional license. 5. The frequency of visitations may be changed, concurrent with and reflective of provider performance: visits will increase or decrease in frequency contingent upon improvements or decline in compliance with the relevant rule. 6. The frequency of visits to providers operating under a provisional license shall generally be conducted every three months. This frequency may be varied at the discretion of the CCLS, contingent upon the provider's performance and prior experience." Statute and rule governing licensed child care providers are not specific to CCDF providers. All statute, rule and procedures apply to all licensed providers. 22 M.R.S.A. §8301-A, §8302-A and §8402-A and Child Care Licensing Rule Section 2.14: Inspections.

b) Licensed CCDF family child care home

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed family child care providers for compliance with health, safety, and fire standards

All applicants for a child care center license receive a pre-licensure inspection which comprises of meeting health, safety and fire standards prior to a license being issued.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF family child care providers

Child Care providers are inspected based on a differential monitoring system.

Providers receive unannounced inspections based on their compliance history in 1, 3, 6 month or 1 year intervals. The frequency of inspections changes based on the results of inspections, complaint investigations and any subsequent licensing action.

3. Identify the frequency of unannounced inspections:

Once a year

More than once a year

Describe:

Providers receive unannounced inspections based on their compliance history in 1, 3, 6 month or 1 year intervals. The frequency of inspections changes based on the results of inspections, complaint investigations and any subsequent licensing action.

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

Annually providers have a comprehensive inspection to ensure that child care center providers are complying with the applicable licensing standards which includes health, safety and fire standards. In addition to the annual inspection providers are inspected based on a differential monitoring system at 1, 3 or 6 month intervals based on the provider's history of compliance.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers

Statute and rule governing licensed child care providers are not specific to CCDF providers. All statute, rule and procedures apply to all licensed providers, *Life Safety Code* (16-219 C.M.R. Chapters 2, 5, 6, 17 and 20) and Family Child Care Licensing Rule Section 4: Inspections and Investigations.

c) Licensed in-home CCDF child care

N/A. In-home CCDF child care (care in the child's own home) is not licensed in the State/Territory. Skip to 5.3.2 (d).

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF in-home child providers

3. Identify the frequency of unannounced inspections:

Once a year

More than once a year

Describe:

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers

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

MeCDC the department overseeing the Children's Licensing and Investigation Unit .



### 5.3.3 Inspections for license-exempt CCDF providers

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

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

There are no license-exempt centers in the State.

Provide the citation(s) for this policy or procedure

N/A

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

There are no license-exempt family child cares in the State.

Provide the citation(s) for this policy or procedure

N/A

- c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used

Waiver until 9/30/2018. License-exempt providers in-home will be monitored annually and unannounced on a differentiated system prior to the waiver end date. Relatives are exempt from monitoring.

Provide the citation(s) for this policy or procedure

The CCSP Provider Agreements for License-Exempt Providers section I(f) and the proposed CCSP Rules: "Additional rules specific to License-Exempt Child Care Providers (excluding Relative Child Care Providers) Allow the Department to perform an annual health and safety monitoring visit." The License-Exempt Provider Agreements state "Allow for site visits by Department of Health and Human Services staff. Site visits may include random unannounced visits and planned visits'.

d) Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home (98.42(b)(2)(iv)(B)). Does your state use alternate monitoring procedures for monitoring in-home care?

No

Yes. If yes,

describe:

The Lead Agency and MeCDC the department overseeing the Children's Licensing and Investigation Unit has created a monitoring checklist for license-exempt providers for meeting CCDF health and safety guidelines.

e) List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers

MeCDC the department overseeing the Children's Licensing and Investigation Unit.

### 5.3.4 Licensing inspectors.

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

a) To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers and that those inspectors have received training on health and

safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

Child Care Licensing Specialists receive licensing certification training to include National Association for Regulatory Administration's credential and required health and safety training within the 90 days of hire. The SSPS II - Child Care Licensing, Children's Licensing Supervisor reviews all training s are complete during the three-month employee review.

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

State of Maine new employee orientation and training is conducted for all employees at time of hire. Managers and Supervisors utilize the State of Maine Bureau of Human resources 3 Month Probation Report Forms during each review. " Federal Requirement for DHHS, Division of Licensing and Certification, Child Care Licensing Specialist ONLY. Has this employee completed health and safety training which includes all required CCDF components?"

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

a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

The State of Maine currently has seventeen Child Care Licensing Specialists with caseloads that average 100 to 130 providers based on geographic location. While the statutory requirement is one unannounced inspection per year, MeCDC is currently utilizing a risk based differential monitoring algorithm to ensure the ratio is sufficient to conduct inspections on a timely basis. The MeCDC Child Care Licensing management team comprised of the Children's Licensing & Investigation Manager and the Children's Licensing Supervisors meet monthly to review a monthly report on each Licensing

Specialist's caseload and move or add cases as needed to ensure they can meet the needs.

b) Provide the policy citation and state/territory ratio of licensing inspectors

MeCDC is currently utilizing a risk based differential monitoring algorithm to ensure the ratio is sufficient to conduct inspections on a timely basis. The Child Care Licensing Monthly Report reflects each licensing specialist's current caseload.

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

Yes, relatives are exempt from all inspection requirements.

If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care.

The Lead Agency's Provider Agreements provide access to health and safety trainings free of charge and MRTQ website for information on child development and T/A.

Yes, relatives are exempt from some inspection requirements.

If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.

No, relatives are not exempt from inspection requirements.

## 5.4 Criminal Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct criminal background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services

(e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For FCC homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)).

A criminal background check must include 8 specific components (98.43(2)(b)), which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks

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

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met by responding to questions 5.4.1 through 5.4.4 and then apply for the time-limited waiver by completing the questions in Appendix A: Background Check Waiver Request Form. By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be

conducting those checks for all new (prospective) child care staff, in accordance with 98.43 and 98.16(o):

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

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

Components	New (Prospective) Staff	Existing Staff
1. Criminal registry or repository using fingerprints in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
2. Sex offender registry or repository check in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
3. Child abuse and neglect registry and database check in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
4. FBI fingerprint check	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	

Use the questions below to describe the status of the requirements, policies and procedures for background check requirements. These descriptions must provide sufficient information

to demonstrate how the milestone prerequisites are being met and the status of the other components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form, for components not included in the milestones. Approval of these waiver requests will be subject to verification that the milestone components have been met as part of the CCDF Plan review and approval process.

## In-state Background Check Requirements

### **5.4.1 In-State Criminal Registry or Repository Checks with Fingerprints Requirements (98.43(b)(3)(i)).**

Note: A search of a general public facing judicial website does not satisfy this requirement. This check is required in addition to the national FBI criminal history check (5.4.4 below) to mitigate any gaps that may exist between the two sources.

a) Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The Lead Agency continues to work towards meeting the fingerprinting requirement. State law LD 274 requiring fingerprints has passed.

<https://legislature.maine.gov/legis/bills/getPDF.asp?paper=HP0207&item=11&snum=128>

-

The Lead Agency is working with the Department of Public Safety, Maine State Police: State Bureau of Identification to provide background checks that include the fingerprinting requirements. A request for approval from the Maine State Police has been made to the Federal Bureau of Investigation to conduct background checks for Child Care Providers. A process that can take up to three months for approval. A MOU between the Lead Agency and State Police will be created. Children's Licensing and Investigation Services has Family Child Care Rule Section 6 E which includes the requirement of finger printing promulgated. The Lead Agency's plan is to update the

computer system to include all CCDF requirements of monitoring and inspections. CCSP proposed rules 7.2.8 includes all components of the federal background check requirement.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The Lead Agency continues to work towards meeting the fingerprinting requirement. Children's Licensing and Investigation Services promulgated Family Child Care Rule which includes the requirement of finger printing. Facility and Nursery School Rules are in the early stages of revision with plans to establish one set of rules to include updated definitions and in statute. The timeline for promulgation is late summer/early fall 2019. CCSP proposed rules are currently in the law-making process with plans to have promulgated within the next six months.

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

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The Lead Agency continues to work towards meeting the fingerprinting requirement.

State law requiring fingerprints has passed. Children's Licensing and Investigation



Services has recently promulgated a new Family Child Care Rule Section 6 E, which includes the requirement of finger printing. However, the Maine Background Check System does not currently have the capacity to process biometric results. The Children's Licensing and Investigation Services' proposal for a new computer system is in review process with the lead agency.

#### **5.4.2 In-State Sex Offender Registry Requirements (98.43(b)(3)(B)(ii)).**

Note: This check must be completed in addition to the national NCIC sex offender registry check (5.4.5 below) to mitigate any gaps that may exist between the two sources. Use of fingerprints is optional to conduct this check.

a) Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state sex offender registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Family Child Care Provider Licensing Rule Section 6 E requires an in-state sex offender registry check for Family Child Care Providers and any individuals who have unsupervised contact with children. Revisions to the Licensing of Child Care Facility Rules to include nursery schools will contain language to reflect the Family Child Care rules. Currently Child Care Center owners and directors have the state sex offender registry check.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

License-exempt providers and all adults 18 years of age or older are currently having in-state and national sex offender checks by signing an authorization of release to the Department. CCSP proposed rules 7.2 will apply to all CCSP providers.

b) Has the search of the in-state sex offender registry been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

National and State sex offender registry checks are conducted under the Family Child Care Provider Licensing Rule Section 6 E for any individuals 18 or older who have unsupervised contact with children. Revisions to the Licensing of Child Care Facility Rules to include nursery schools will contain language to reflect the Family Child Care rules. CCSP proposed rule 7.2 will apply to all CCSP Providers.

#### **5.4.3 In-State Child Abuse and Neglect Registry Requirements (98.43(b)(3)(B)(iii)).**

Note: This is a name-based search.

a) Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state child abuse and neglect registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and

98.16(o). Describe and provide citations

Child abuse and neglect registry checks are completed by Children's Licensing and Investigation Services for Family Child Care providers and for individual's residing in the home 18 years of age or older under the Family Child Care Provider Licensing Rule Section 6 E. Revisions to the Licensing of Child Care Facility Rules to include nursery schools will contain language to reflect the Family Child Care rules. CCSP proposed rule 7.2 will apply to all CCSP Providers including license-exempt providers.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The Lead Agency conducts background checks for License-Exempt CCDF eligible Providers under CCSP rules 7.04.3 and the proposed CCSP Rules 7.2.

b) Has the search of the in-state child abuse and neglect registry been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

Child abuse and neglect registry checks have been completed for current (existing) staff Family Child Care providers, adults 18 years of age and older residing in the home, or individuals frequenting the family child care home and for owners, directors, and staff of child care facilities and nursery schools. Proposed CCSP Rule 7.2, Family Child Care Provider Licensing Rule Section 6E, Nursery School Rules Section III D, and Rules for the Licensing of Child Care Facilities 2.4.1.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state child abuse and neglect registry for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

## National Background Check Requirements

### **5.4.4 National FBI Criminal Fingerprint Search Requirements (98.43(b)(1)).**

Note: The in-state (5.4.1 above) and the inter-state (5.4.6 below) criminal history check must be completed in addition to the FBI fingerprint check because there could be state crimes that do not appear in the national repository. Also note, that an FBI fingerprint check satisfies the requirement to perform an interstate check of another State's criminal history records repository if the responding state (where the child care staff member has resided within the past five years) participates in the National Fingerprint File program (CCDF-ACF-PIQ-2017-01).

a) Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies and procedures for the search of the National FBI fingerprint check.

- Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The Lead Agency continues to work with Children's Licensing and Investigation Services towards meeting the fingerprinting requirement as the Maine Background Check System does not currently have the capacity to process biometric results.

- Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The Lead Agency continues to work with Children's Licensing and Investigation Services towards meeting the fingerprinting requirement as the Maine Background Check System does not currently have the capacity to process biometric results.

b) For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The Department is not currently meeting the fingerprinting requirement as the Maine Background Check System does not currently have the capacity to process biometric results.

## National Background Check Requirements

### **5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).**

Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the in-state (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

a) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The Lead Agency is currently working with the Maine Background Check Center to build the system capacity to meet this requirement. National and State sex offender registry checks are conducted for Family Child Care providers and any individuals who have unsupervised contact with children with the Family Child Care Licensing Rule Section 6 E. Checks are also conducted for Child Care Center (2.4.1 of the Child Care Facilities Rule) and Nursery School (Section III D of the Nursery School Rules) Directors and owners. It is at the discretion of Child Care Centers and Nursery Schools to conduct sex offender registry checks for their staff members. CCSP Proposed Rule 7.2 will apply to all CCSP providers.

b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The Lead Agency is currently working with the Maine Background Check Center to build the system capacity to meet this requirement. National and State sex offender registry checks are conducted for Family Child Care providers and any individuals who have unsupervised contact with children with the Family Child Care Licensing Rule Section 6 E. Checks are also conducted for Child Care Center (2.4.1 of the Child Care Facilities Rule) and Nursery School (Section III D of the Nursery School Rules) Directors and owners. It is at the discretion of Child Care Centers and Nursery Schools to conduct sex offender registry checks for their staff members. CCSP Proposed Rule 7.2 will apply to all CCSP providers.

## Inter-state Background Check Requirements

Checking a potential employee's history in any state other than that in which the provider's services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43(b)(3). For example, an inter-state check would include situations when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resides and each state where the staff member resided during the previous 5 years. Background checks in the state where the staff member is employed may be advisable, but are not strictly required.

**5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).**

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check (5.4.4 above) to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

a) Has the interstate criminal registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the interstate criminal registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The Lead Agency continues its efforts for obtaining interstate criminal registry or repository checks with revisions to the Children's Licensing Unit's the Child Care Center and Nursery School Rules in the next year. The revised language will include language



to mirror the Family Child Care Licensing Rule. CCSP proposed rule 7.2 address this requirement for all CCSP providers within the next six months for completion.

b) Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate criminal registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The Lead Agency continues its efforts for obtaining interstate criminal registry or repository checks with revisions to the Children's Licensing Unit's the Child Care Center and Nursery School Rules in the next year. The revised language will include language to mirror the Family Child Care Licensing Rule. CCSP proposed rule 7.2 address this requirement for all CCSP providers within the next six months for completion.

#### **5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).**

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

a) Has the interstate sex offender registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Children's Licensing and Investigation Services is working towards development of policies and procedures for obtaining interstate criminal registry or repository checks.

b) Has the interstate sex offender registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for current

(existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

Children's Licensing and Investigation Services is working towards development of policies and procedures for obtaining interstate criminal registry or repository checks.

#### **5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).**

Note: This is a name-based search.

a) Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

The State of Maine is not currently meeting the requirement for completion of interstate child abuse and neglect checks. Children's Licensing and Investigation Services is working towards development of policies and procedures for obtaining interstate child abuse and neglect checks and have recently promulgated Family Child Care rule which includes this requirement. Facility and Nursery School rules are in the early stages of revision and will include this requirement.

b) Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

The State of Maine is not currently meeting the requirement for completion of interstate child abuse and neglect checks. Children's Licensing and Investigation Services is working towards development of policies and procedures for obtaining interstate child

abuse and neglect checks and have recently promulgated Family Child Care rule which includes this requirement. Facility and Nursery School rules are in the early stages of revision and will include this requirement.

## **Provisional Employment**

The CCDF final rule states 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 staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2)). A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF final rule, OCC will allow states and territories to request time-limited waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

1. the state requires the provider to submit the background check requests before the staff person begins working; and
2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

**5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below. (Waiver request allowed. See Appendix A). Check all that apply.**

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides.

Describe and include a citation:

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but

before receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A).

Describe and include a citation:

Other.

Describe:

Fingerprinting has not yet been implemented. The future intent is to allow provisional employment under direct supervision of someone who has met this requirement pending acceptable name and date of birth, checks of state criminal, state child protective and web based national sex offender registry checks through revisions to the Family Licensing Rule and the Center/Nursery School. Currently, all licensed providers and staff follow Title 22 Chapter 1691 Section 9054.

<https://legislature.maine.gov/statutes/22/title22ch1691.pdf>.

CCSP propose rule 7.2.8 requires staff members to be supervised at all times until all components of the required background check (CCSP proposed rule 1.11) have been received.

**5.4.10 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.**

Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)).

The Lead Agency's current requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45 day timeframe, including any agencies/entities

responsible for responding to requests from other states is in statute to respond to a request within 48 hours and the results will be mailed through the US Postal Service.

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

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

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

No

Yes.

Describe other disqualifying crimes and provide citation:

**5.4.12 The state/territory has a process for a child care staff member to appeal the the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3).**

Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2-4)).

State law LD 274 requires providers to use the future program Maine Background Check Center which has an appeal process outlined in statute and rule. Currently the appeal process in place is under Title 5: Administrative Procedures and Services.

<http://legislature.maine.gov/statutes/5/title5sec1825-E.html> OCFS conducts the following components for license-exempt providers and all adults living in the home; Child Protective Services (CPS), State Bureau of Identification (SBI), Department of Motor Vehicles (DMV), State Sex Offender Registry, NSOPW National Sex Offender Registry. The Children's Licensing Unit provides Child Protective Services (CPS), State Bureau of Identification (SBI), Department of Motor Vehicles (DMV), State Sex Offender Registry checks, and NCOR are conducted for Child Care Center directors, owners, and staff and for Family Child Care providers and any individuals who have unsupervised contact with children under Section 6 E of the Family Child Care Provider Rules. At this time, Child Care Centers conduct sex offender registry checks for their staff members. However, revisions to the Licensing of Child Care Facility Rules to include nursery schools will contain language to reflect the Family Child Care rules. CCSP proposed rule 7.2 will apply to all CCSP Providers.

#### **5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)).**

Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. Lead Agencies can report that no fees are charged if applicable (98.43(f)).

The Lead Agency has not changed the fee for completing background checks for several years and currently remains at \$15 to ensure that the cost does not exceed the actual cost of processing and administration. Once the Maine Background Check System is complete, the Lead Agency will cover the cost of the background checks with law LD



**5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider.**

Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

- No, relatives are not exempt from background check requirements.
- Yes, relatives are exempt from all background check requirements.
- Yes, relatives are exempt from some background check requirements. If the state/territory exempts relatives from some background check requirements, describe which background check requirements do not apply to relative providers.

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

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

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with

disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

## 6.1 Professional Development Framework

**6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.**

a) Describe how the state/territory's framework for training and professional development addresses the following required elements:

-- State/territory professional standards and competencies. Describe:

Maine Roads to Quality Professional Development Network (MRTQPDN) offers professional development (PD) to ECE practitioners in Maine. Professional development as defined by NAEYC and NACCRRA is "a continuum of learning and support activities designed to prepare individuals for work with and on behalf of young children and their families, as well as ongoing experiences to enhance this work. Professional Development encompasses education, training, and technical assistance." (NAEYC & NACCRRA, Early Childhood, 2011). The framework that MRTQ/PDN uses is that of Education, Training and Technical assistance where the focus is on using all three for more positive outcomes. Beginning in 1992, the Maine Department of Health and Human Services (DHHS), through its Early Childhood Division, convened 100 stakeholders in a two-year process that resulted in the development of recommendations for a career development system for early childhood professional. The recommendations were published in 1994 in a document titled Pathways to Quality: Toward the Development of a Comprehensive Training Plan for Child Care Practitioners in Maine. From this point, the Department put several initiatives in place, core knowledge curriculum, and a

professional Registry and Career Lattice. In 1999, the Department's Office of Child Care and Head Start contracted with the Muskie School of Public Service, University of Southern Maine to establish Maine Roads to Quality, a new program tasked to manage the comprehensive, coordinated career development system.: Each curriculum that has been created for the MRTQ Core Knowledge training is based on standards and competencies. The authors of the training were early childhood higher education personnel. Each were created, piloted, and revised based on a group of stakeholders. As the years progressed, and revisions were needed, those revisions are made by authors who hold ECE Master's degrees. MRTQ uses current standards and practices that are vetted by NAEYC, NAFCC, COA, Head Start and uses the national centers resources. The Professional Development Registry will continue to support providers' ongoing professional development by tracking education, training, and experience and recognizing advancement along the Career Lattices. Any early childhood education provider, public school educator, administration/management professional, or family education and support professional may participate in the Maine Roads to Quality Registry.

**-- Career pathways. Describe:**

The MRTQ Registry and Career Lattices provide a clear pathway for providers to advance and document their professional development. Any professional wishing to participate in the MRTQ Registry will submit an application form; both paper and online forms will be available. There is no fee to join the MRTQ Registry. All applications will be logged as they are received and will be reviewed and entered on a timely basis. All providers submitting a complete application will be assigned placement on the Career Lattice that reflects their education, training, and experience in the field. Applicants will choose one Career Lattice from the following options: Legal unregulated providers, Direct Care (for center-based staff, family child care, and school age providers), Administrative/Management/Coordination, Family Support Professional, or Public Preschool. MRTQ/PDN revises and updates the Career Lattices regularly to ensure that they are responsive to the needs of professionals in the field. The MRTQ registry tracks education, training, and experiences and recognizes advancement along the Career Lattice. Any early childhood education provider including legal unregulated providers, public preschool educators, administration/management professionals or family education and support provider may participant in the MRTQ Registry.

-- Advisory structure. Describe:

MRTQ/PDN has an advisory council which meets quarterly and reviews the work of the PDN. The membership is comprised of representatives from FCC, Center based, School Age programs, Inclusion and Disabilities, Head Start, Cooperative Extension, private schools, department of education, and the Office of Child and Family Services.

-- Articulation. Describe:

The MRTQ core knowledge 180-hour program is articulated into all eight (8) Maine community college ECE programs. Current work is being done to articulate the MRTQ credentials. MRTQ/PDN staffs the Higher Education Committee which is comprised of all the ECE department chairs around the state.

-- Workforce information. Describe:

MRTQ/PDN registry houses data on all the MRTQ registry members. This would include all subsidy providers but does not include the entire ECE workforce in Maine.

-- Financing. Describe:

MRTQ/PDN trainings range from free to \$1 per training hour. Technical assistance for support for a practitioner to obtain a credential is free. Registry is free to all. The MRTQ/PDN trainings are articulated into the Community College system and the cost for a practitioner to articulate into college coursework is free.

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

- Continuing education unit trainings and credit-bearing professional development to the extent practicable

Describe:

The MRTQ/PDN articulation agreements allow a practitioner to take MRTQ/PDN training and turn that into credit-bearing professional development at the community colleges in Maine. MRTQ/PDN staff can assist ECE practitioners in the process for doing this and MRTQ/PDN staffs the ECE Higher Education committee where discussions lead to better communications and systems for articulation.

- Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework

Describe:

Beginning in 1992, the Maine Department of Health and Human Services (DHHS), through its Early Childhood Division, convened 100 stakeholders in a two-year process that resulted in the development of recommendations for a career development system for early childhood professional. These participants included direct care practitioners, management level and Higher Education staff. Currently the Professional Development Alignment Team strengthens the alignment of the training and professional development opportunities offered in Maine.

- Other

Describe:

**6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.**

. Since 1999 MRTQ has held seats and attended meetings at the Maine Child Care Advisory Council as well as at the Children's Growth Council. Both groups are cross-agency bodies. MRTQ sits on the Professional Development Alignment Team (PDAT) that is a subcommittee of the MCGC. This committee's work is charged to integrate the early childhood professional development systems in Maine birth through age 8. Professional Development as defined by the National Association for the Education of Young Children (NAEYC) combines education, training and technical assistance.

**6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).**

Through partnerships with community and state colleges as well as high schools,

MRTQ/PDN can increase and improve quality, diversity, stability, and retention of caregivers, teachers, and directors. MRTQ/PDN has been working in partnership with Maine Share Services to create a pilot apprenticeship program which is housed under Maine Department of Labor. This pilot is planned to begin in Fall of 2018. In 2017 MRTQ/PDN had reached out to the high school technical school ECE programs. In two school systems, a pilot is being discussed to determine the viability of the high school ECE programs using MRTQ/PDN curricula which would allow the graduating students to enter the workforce and/or continue onto higher education using the articulated pathways that MRTQ/PDN has paved. MRTQ/PDN with its partner the Center for Community Inclusion and Disability Studies offers an Inclusion staff member who is trained in mental health consultation. Training is offered to all Maine providers on topics such as: Infant Mental Health, Positive Supports, Social Emotional learning. Practitioners in Maine can request TA from MRTQ/PDN on this topic. The MRTQ/PDN DCs can also assist caregivers in their individual professional needs plans for development upon request.

## 6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

**6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and**

**professional development framework (98.44(b)).**

The MRTQ/PDN district coordinators have been or will be trained on Relationship Based Consultation, Communities of Practice facilitation, Adult Learning Practices, Coaching and Mentoring. They have also been trained on the Quality for ME system. All trainings and TA incorporate the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models in the training and professional development framework and are ongoing. All TA activities and trainings are aligned with the Quality for ME standards to move a program toward quality improvement at each step.

**6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).**

MRTQ/PDN has eight (8) District Coordinators (DCs) assigned to each of the eight (8) regions and can provide resources and onsite TA. Outreach is taking place by the DCs to every Provider in their region. Currently there are three licensed Child Care Centers that are associated with three different Indian tribes or tribal organizations registered at MRTQ and on the QRIS.

**6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers:**

**a) with limited English proficiency**

MRTQ/PDN works with all practitioners and offers specialized supports to all to be successful. French and English are the primary languages in Maine. However, some pockets of Maine have over 16 different languages. MRTQ/PDN works individually with programs and practitioners needing assistance. Interpreters are available on an as needed basis. The new

MRTQ/PDN website can be read in multiple languages. Interpreters are utilized as needed during trains in person or on demand.

**b) who have disabilities**

The Center for Community Inclusion and Disability Studies (CCIDS) is a partner of the PDN. There work is specific to Inclusion. The DCs workplans include outreach to all providers and will assist with obtaining resources or additional support as needed for any provider who has a disability in order to help assist with meeting their needs.

**6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii--iv)).**

French and English are the primary languages in Maine. However, some pockets of Maine have over 16 different languages. MRTQ/PDN works individually with programs and practitioners needing assistance. Interpreters are available on an as needed basis. The new MRTQ/PDN website will can be read in multiple languages. The website is planned to become live in the summer of 2018. The system of PD supports from MRTQ/PDN include, training, technical assistance and education. The MRTQ/PDN training can be taken to obtain setting and age specific credentials. Currently those credentials are: Child Development Associates, Infant Toddler Credential, Youth Development Credential, Director Credential, and Inclusion Credential. The training to meet the credential requirements are offered through the yearly offerings at MRTQ/PDN. Technical assistance in the form or phone and email, on site consultation, peer to peer groups are offered to support practitioners. MRTQ/PDN's Logic Model includes activities that "demonstrate competency in working with diverse families" and Early educators in every setting have access to differentiated TA that meets the unique needs of their setting, community culture, and family (client) needs "The MRTQ's Technical Assistance Competencies for Maine's Early Childhood Workforce Self-Assessment Checklist and Maine QRIS Inclusive Practices Checklist are utilized. Communities of Practice (CoP) around the state include a diverse group of practitioners and



include members that are English-language learners or Native American.

**6.2.5 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).**

a) Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).

MRTQ/PDN works closely with the Head Start (HS) programs in Maine. HS has been training and working with homeless families for many years. MRTQ/PDN has created a training appropriate for child care practitioners on the topic of homelessness. This training is available to all. MRTQ/PDN technical assistance staff are trained on the components of homelessness as it pertains to ECE settings. They are available upon request to offer TA to practitioners who request it.

b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.2.2).

MRTQ/PDN technical assistance staff are trained on the components of homelessness as it pertains to ECE settings.

**6.2.6 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply**

- Issue policy change notices
- Issue new policy manual
- Staff training

- Orientations
- Onsite training
- Online training
- Regular check-ins to monitor the implementation of CCDF policies

Describe the type of check-ins, including the frequency.

Inspections are based on a differential monitoring system.

Other

Describe:

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

a) Describe the strategies that the state/territory is developing and implementing for training and TA.

The MRTQ/PDN technical assistance program is designed such that all practitioners in Maine can request TA on the topics listed below. One form of TA, Communities of Practice, are in all Districts of Maine this is one venue where practitioners can discuss and obtain resources on the business practices needed to run a successful business. MRTQ/PDN works closely with the national affiliates in Maine to increase the availability of supports. The NAFCC affiliate in Maine is the Family Child Care Association of Maine (FCCAM), The NAEYC affiliate in Maine is Maine Association for the Education of Young Children (MeAEYC) and the NAA affiliate in Maine is Maine Afterschool Network (MASN). New Ventures Maine is an organization that offers training on business practices. MRTQ/PDN has worked with them in some areas of the state.

b) Check the topics addressed in the state/territory's strategies. Check all that apply.

- Fiscal management
- Budgeting

- Recordkeeping
- Hiring, developing, and retaining qualified staff
- Risk management
- Community relationships
- Marketing and public relations
- Parent-provider communications, including who delivers the training, education, and/or technical assistance
- Other

Describe:

## 6.3 Early Learning and Developmental Guidelines

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

a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry

The Maine Early Learning and Development Standards (MELDS) were developed by a cross sector stakeholder group. The MELDS are intended to enhance the collaboration and consistency across systems by aligning practices across all early childhood settings, as well as serve as a resource to parents who are a child's first and most important teacher. The document shows the continuum of development from the end of

toddlerhood to the end of kindergarten as the preschool standards have been aligned to both the Supporting Maine's Infants and Toddlers: Guidelines for Learning and Development and Maine's College and Career Ready Standards (the Maine Learning Results) which begin in Kindergarten." The Supporting Infant Toddler Guidelines were created and finalized in 2006. When a program or practitioner request technical assistance from MRTQ PDN they consultant uses a partnering strategy with the consultee. During this time the consultee is explains the culture of the program and of the children/families. The TA process is one of collaboration and is driven by the needs of the program and practitioners/children. When the MELDS and/or the Infant/Toddler guidelines are implemented, the above needs are taken into consideration.

b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry.

The two documents, The Supporting Infant Toddler Guidelines (I/TGs) and Maine Early Learning and Development Standards were created by large state and national stakeholder groups to ensure the validity of the content.

c) Verify by checking the domains included in the state/territory's early learning and developmental guidelines. Responses for "other" is optional

- Cognition, including language arts and mathematics
- Social development
- Emotional development
- Physical development
- Approaches toward learning
- Other

Describe:

d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.

The I/TGs and the MELDS training is offered to ECE practitioners through the MRTQ/PDN training program. The MRTQ/PDN District Coordinators offer technical assistance to programs seeking assistance. MRTQ/PDN is a member of the Professional Development Alignment Team (PDAT) that is charged to integrate the early childhood

professional development systems in Maine birth through age 8. Professional Development as defined by the National Association for the Education of Young Children (NAEYC) combines Education, Training and Technical Assistance. Members include CCDIS, DOE, HS, OCFS, CDS, and CDC.

e) Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates

The Supporting Maine's Infants and Toddlers was created in 2006. The Maine Early Learning Standards created in 2015 and replaced the Maine Early Learning Guidelines. When the guidelines/standards are revised, a stakeholder group is convened and national technical assistance is requested.

f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards

N/A

g) Provide the Web link to the state/territory's early learning and developmental guidelines.

<http://www.maine.gov/dhhs/ocfs/ec/occhs/infantstoddlers.pdf>

<http://www.maine.gov/doe/publicpreschool/documents/Maine-ELDS.pdf>

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

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

-- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,

-- Will be used as the primary or sole method for assessing program effectiveness,

-- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used.

The early learning guidelines are imbedded into Maine's quality rating system. The following are links describing these guidelines,

[http://www.maine.gov/dhhs/ocfs/ec/occhs/infantstoddlers .pdf](http://www.maine.gov/dhhs/ocfs/ec/occhs/infantstoddlers.pdf)

<http://www.maine.gov/doe/publicpreschool/documents/Maine-ELDS.pdf>

## 7 Support Continuous Quality Improvement

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

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

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

- Supporting the training and professional development of the child care workforce
- Improving on the development or implementation of early learning and developmental guidelines

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

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

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

## 7.1 Quality Activities Needs Assessment for Child Care Services

**7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)).**

MRTQ/PDN conducts a Training Needs Assessment every 2 years. MRTQ PDN conducts a biennial Professional Development Needs Assessment. The survey is conducted primarily online. In addition to demographic questions (county of residence, type of program, job title, years of experience), questions are asked about individuals' knowledge and training and technical assistance activities offered by MRTQ PDN, where individuals access training (including why they do not access training from MRTQ PDN, if applicable), and their interest in receiving training on various topics. The survey link is sent out to all MRTQ registry members with web access. It is publicized in MRTQ PDN publications (newsletters and social media). Postcards are sent to all licensed programs that do not have a Registry member on staff. The link is shared with child care licensing and other partners. The last Training Needs Assessment was conducted in spring 2018.

### **7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.**

MRTQ/PDN needs assessment revealed the majority of practitioners in all settings requesting more supports for children with behavior management concerns, social emotional supports.

## 7.2 Use of Quality Funds

### **7.2.1 Check the quality improvement activities in which the state/territory is investing**

- Supporting the training and professional development of the child care workforce If checked, respond to section 7.3 and indicate which funds will be used for this activity. Check all that apply.
  - CCDF funds
  - Other funds



Describe:

- Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

- Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

- Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply

CCDF funds

Other funds

Describe:

- Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

- Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply

CCDF funds

Other funds

Describe:

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

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

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

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

- Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies

Describe:

MRTQ/PDN offers training, technical assistance, an Inclusion Warmline, and has credentials specific to the needs of the ECE workforce. Many MRTQ PDN Core Knowledge Trainings address the domains of child development. Examples include "Caring for Infants, Toddlers, and Their Families" (30 hours), "Fostering the Social Emotional Development of Children" (30 hours), and "Foundations of Health, Wellness, and Safety" (18 hours). On-site consultation is available from MRTQ PDN for programs around any of these areas. MRTQ PDN is funded with CCDBG funds from Maine DHHS OCFS.

- Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.5.)

Describe:

MRTQ/PDN offers training to practitioners and onsite consultation to support programs in these areasMRTQ PDN offers a series of trainings - that can lead to the Maine

Inclusion Credential - around the dimensions of inclusion, namely access, participation, and supports. Trainings include "Inclusive Child Care" (30 hours), "Positive Supports for Challenging Behavior" (15 hours), "Foundations of Inclusion: Relevant Laws" (6 hours), "Collaborating with Others to Support Inclusion" (12 hours), and "Foundations of Universal Design" (12 hours). Phone, email, and on-site consultation support is also available around these topics, including support from an on-staff Early Childhood Mental Health Consultant. MRTQ PDN is funded with CCDBG funds from Maine DHHS OCFS.

- 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:

MRTQ PDN offers a 12-hour training called "Partners in Caring: Families and Caregivers." Support for working with families is also available through MRTQ PDN's Warm Line and on-site consultation. MRTQ PDN is funded with CCDBG funds from Maine DHHS OCFS.

- Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards.

Describe:

Professional development (PD) as defined by NAEYC and NACCRRA is "a continuum of learning and support activities designed to prepare individuals for work with and on behalf of young children and their families, as well as ongoing experiences to enhance this work. Professional Development encompasses education, training, and technical assistance." (NAEYC & NACCRRA, Early Childhood, 2011). The framework that MRTQ/PDN uses is that of Education, Training and Technical assistance where the focus is on using all three for more positive outcomes. MRTQ PDN has 30-hour trainings that cover an introduction to and implementation of the various state guidelines: *Supporting Maine's Infants and Toddlers: Guidelines for Learning and Development*, *Maine's Early Learning and Development Standards*, and *Links to Learning* (for out-of-school time practitioners, total contact hours are 45). On-site consultation and phone and email support are available to complement the trainings.

MRTQ PDN is funded with CCDBG funds from Maine DHHS OCFS.

- Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development

Describe:

MRTQ/PDN has District Coordinators who are training and available to offer TA to programs and who build community partnerships. The District Coordinators offer onsite and virtual consultation to Child Care centers, Family Child Care homes, Out of School time programs, legal exempt and Head Start. The consultation is aligned with QRIS standards. In addition, they offer community based peer to peer networks, and participate in community partnerships that support quality programming for children and families.

- Using data to guide program evaluation to ensure continuous improvement

Describe:

Evaluation of Training: Each Core Knowledge and Elective Training is evaluated by participants at completion. MRTQ staff review the compiled results and develops a plan if revisions are needed. Evaluation of Trainers and Training Delivery (Face-to-Face Training): The training evaluation will include specific questions that inform MRTQ/PDN of the trainer's ability to facilitate the training. In addition, MRTQ/PDN has a Trainer Quality Assurance System (TQAS) with consistent tools and protocols for both announced and unannounced on-site observations of a trainer's performance. Monitoring of Online Trainers: An MRTQ/PDN staff person is assigned to every online training to monitor specific items to ensure trainer adherence. Trainer Evaluation of Training: Every trainer is asked to complete an evaluation at the conclusion of the training. This evaluation informs possible curricula revision. Technical Assistance Activity Evaluation: All TA activities are evaluated. The data is reviewed by the TA manager and discussed with the management team to determine quality delivery improvements. The compilation of evaluation is shared with OCFS quarterly and in a yearly report.

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

Describe:

MRTQ/PDN services are offered statewide to all areas of the state. Because Maine is a rural state with many areas with significant concentrations of poverty and unemployment, all of MRTQ PDN's Core Knowledge Trainings address working with children and families at-risk. An on-demand training addressing working with families and children experiencing homelessness has been developed.

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

Describe:

MRTQ/PDN has as one of its partners The Center for Community Inclusion and Disability Studies (CCIDS). CCIDS is Maine's University Center for Excellence in Developmental Disabilities (UCEDD). CCIDS is integral in the delivery of high quality training and technical assistance in Maine. MRTQ PDN offers a series of trainings - that can lead to the Maine Inclusion Credential - around the dimensions of inclusion, namely access, participation, and supports. Trainings include "Inclusive Child Care" (30 hours), "Positive Supports for Challenging Behavior" (15 hours), "Foundations of Inclusion: Relevant Laws" (6 hours), "Collaborating with Others to Support Inclusion" (12 hours), and "Foundations of Universal Design" (12 hours). Phone, email, and on-site consultation support is also available around these topics, including support from an on-staff Early Childhood Mental Health Consultant. MRTQ PDN is funded with CCDBG funds from Maine DHHS OCFS.

- Supporting the positive development of school-age children

Describe:

As a partner of MRTQ/PDN the Maine After School Network supports out-of-school time programs. MRTQ/PDN staff have experience in directing school age programs, offering TA on school age accreditation and other quality improvement. Maine has specific standards for School age programs on the QRIS. MRTQ/PDN offers training specific to school age programs which can lead to a Youth Development Credential if the practitioners so choose.

- Other

Describe:

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

- Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling
- Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities
- Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education
- Other

Describe:

MRTQ/PDN staffs the Higher Education committee which is comprised of the ECE chairs and staff of the higher education facilities in Maine. This committee shares when scholarships and initiatives become available which allows MRTQ/PDN to communicate with the programs in Maine through an electronic weekly newsletter and the quarterly newsletter.

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

The Lead Agency compiles distributes a monthly report that is given to the CCAC and details the number of Providers on QRIS and includes the breakdown of how many Providers are at each level. Child Care Choices has the levels of each provider available on their website for Parents seeking quality care. MRTQ/PDN supports child care programs' increased quality by making trainings at little or no cost and T/A is at no cost as well. For the State fiscal year 07/01/2017-06/30/2018, 99 providers enrolled in QRIS for the first time, 11 programs moved from step 2 to step 3, 6 programs moved from step 3 to step 4, 10 programs moved from step 1 to step 2, 3 programs moved from step 1 to step 3, and 1 program moved from step 1 to step 4.

## 7.4 Quality Rating and Improvement System (QRIS)

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education

### **7.4.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?**

- No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.
- No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.
- Yes, the state/territory has a QRIS operating statewide or territory-wide

Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available.

MRTQ/PDN administers and houses the data which is integrated into a system to inform the compliance of a program to the standards in Quality for ME and is statewide. The Provider needs to be at a Step One on QRIS. Reimbursement is given at higher rates for achieving higher ratings. Providers at a step 2 receive 2% quality bump in payment. Providers at a step 3 receive a 5% quality bump and providers at the highest level, 4, receive 10% quality bump. .

<https://childcarechoices.me/index.php/quality-rating-and-improvement-system/>



- Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.

Provide a link, if available.

- Yes, the state/territory has another system of quality improvement
- If the response is yes to any of the above, describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

#### 7.4.2 QRIS participation

a) Are providers required to participate in the QRIS?

- Participation is voluntary
- Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).

The Quality for ME is administered through the Office of Child and Family Services. MRTQ/PDN activities are aligned with the Quality for ME standards. Quality for ME is a voluntary four step program. MRTQ/PDN houses the data which is integrated into a system to inform the compliance of a program to the standards in Quality for ME. The Provider needs to be at a Step One on QRIS. Reimbursement is given at higher rates for achieving higher ratings. Providers at a step 2 receive 2% quality bump in payment. Providers at a step 3 receive a 5% quality bump and providers at the highest level, 4, receive 10% quality bump.

- Participation is required for all providers.

b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS? Check all that apply

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

Describe:

### 7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

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

- No
- Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
  - Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system) .
  - Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start

programs and the quality improvement system).

- Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
- Programs that meet all or part of state/territory school-age quality standards.
- Other.

Describe:

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

- No
- Yes. If yes, check any links between the state/territory's quality standards and licensing requirements
  - Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
  - Embeds licensing into the QRIS
  - State/territory license is a "rated" license
  - Other.

Describe:

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

- No
- Yes. If yes, check all that apply
  - One time grants, awards, or bonuses.
  - Ongoing or periodic quality stipends
  - Higher subsidy payments

- Training or technical assistance related to QRIS.
- Coaching/mentoring.
- Scholarships, bonuses, or increased compensation for degrees/certificates
- Materials and supplies
- Priority access for other grants or programs
- Tax credits (providers or parents)
- Payment of fees (e.g., licensing, accreditation)
- Other

Describe:

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

Accreditation standards are embedded into the QRIS in Maine. Programs go through re-accreditation as dictated by the applicable setting accreditation. Quality for ME was validated through a validation study where the use of the rating scales was used.

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

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs. Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

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

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

Describe:

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

Describe:

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

Describe:

MRTQ/PDN offers specific training for practitioners working in infant and toddler settings.

Maine has an Infant Toddler Credential.

- Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant-toddler specialists

Describe:

The MRTQ/PDN District Coordinators offer onsite TA.

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

Describe:

MRTQ PDN District Coordinators offer onsite TA which includes the ability to work with Maine CDS system. CoPs designed specifically for Infant Toddler practitioners are offered through MRTQ PDN.

- Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments

Describe:

MRTQ PDN through its TA system offers this support.

- Developing infant and toddler components within the state/territory's child care licensing regulations

Describe:

Maine has specific Infant/Toddler learning guidelines and a training has been created and offered through MRTQ PDN.

- Developing infant and toddler components within the early learning and developmental guidelines

Describe:

- Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development

Describe:

- Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being

Describe:

- Coordinating with child care health consultants.

Describe:

- Coordinating with mental health consultants.

Describe:

- Other

**Describe:**

MRTQ PDN with its partner CCIDS offers TA to parents and ECE practitioners on the topic of Inclusion and Disabilities.

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

With MRTQ/PDN's addition of DCs to each region, Providers are given the T/A and resources needed to improve programs and services for infants and toddlers. Prior to T/A taking place, a Provider agrees to the terms of T/A with the intent of building knowledge and skill level in order for generalization and long-term success and overall quality. These agreements are then a working document to build off of for additional T/A and resources as needed. MRTQ PDN tracks quality improvement through the Registry. All consultations are tied to the Qualityfor ME standards and substandards. Once the consultation is open standards and substandards are chosen that best align with the consultation request. Goals and action steps are developed and evaluated throughout the consultation process. After the consultation, the process is evaluated by the consultant and consultee and the substandards are rated as not started, not met or met. Most the substandards are met. Reasons for "not started" include the consultee deciding not to move forward with consultation or choosing a different substandard. Reasons for "not met" include changes within the program such as staffing, accreditation status, or lack of consultee follow through. For the contract year, July 1, 2017, through June 30, 2018, 74 consultations were closed. These consultations evaluated 103 substandards with the following results: 6(5.8%) - Not Started, 8(7.8%) - Not Met, and 89(86.4%) - Met.

## 7.6 Child Care Resource and Referral

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

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

The State of Maine does not have a CCR&R service.

## 7.7 Facilitating Compliance With State Standards

### **7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards?**

#### **Describe:**

Child Care Licensing and Fire Marshal inspections are funded through CCDF quality funds. In addition, Registry to MRTQ is free to Providers, support programs for quality improvement, and have opened onsite consultation based on licensing referrals. The Lead Agency has provided the Better Kids Care Training to Providers at no cost to assist with meeting the health and safety guidelines.



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

- No
- Yes. If yes, which types of providers can access this financial assistance?
- Licensed CCDF providers
  - Licensed non-CCDF providers
  - License-exempt CCDF providers
  - Other

Describe:

The Lead Agency provides CCSP Providers with four paid training days per year. Better Kids Care, the Lead Agency's health and safety training is provided to all Providers at no cost. MRTQ support programs for quality improvement and have opened onsite consultation based on licensing referrals.

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

The Lead Agency funds all inspections and monitoring of Child Cares by licensing specialists except for License-Exempt Relatives that require no monitoring. MRTQ/PDN assists the state in tracking and completion of health and safety training requirements and registry to QRIS that includes a facility moving up levels on QRIS. During the State fiscal year of 2017 there was an increase of 50 CCSP providers from the previous year. CCSP providers can register to MRTQ and gives them access to their trainings. Monthly tip sheets are sent to licensed-exempt providers with their billing sheets.

## 7.8 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

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

Maine has a Quality Rating and Improvement System. Tools utilized in to measure quality are on-site observations, self-evaluations, portfolio of education and trainings, increased levels of parent/family involvement, program evaluations, and administrative policies and procedures, licensing history, and accreditation.

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

The QRIS four-step system allows the Lead Agency with the assistance of MRTQ/PDN to track the progress of individual Providers and Programs moving to higher levels. MRTQ/PDN's registry allows for the Provider to track their progression and get aide from MRTQ/PDN for next level requirements. For the State Fiscal Year 2018 the following indicators of quality were measured in addition to the 31 programs moving to higher step levels, 99 programs remained at step 1, 22 programs remained at step 2, 22 programs remained at step 3, and 44 programs remained at step 4. To remain at current step level, a program has to meet requirements and trainings.

## 7.9 Accreditation Support

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

- Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes

Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation

MRTQ PDN staff are well versed in NAEYC, NAFCC and COA accreditation. Onsite TA, accreditation cohorts, Director training, classroom and FCC training is offered through MRTQ/PDN. Maine has had an accreditation project either funded by CCDF or privately funded since 2000.

- Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers.

Describe:

- Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care

Describe:

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

- Focused on child care centers

Describe:

- Focused on family child care homes

Describe:

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

Focused on child care centers

Describe:

Focused on family child care homes

Describe:

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

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

MRTQ/PDN's registry tracking system is used to support Providers in their attempts to progress the quality of their Child Care Programs. During the period of 07/01/2017 - 06/30/2018, 10 programs moved from step 1 to step 2, 3 programs moved from step 1 to step 3, 1 program moved from step 1 to step 4, 11 programs moved from step 2 to step 3, and 6 programs moved from step 3 to step 4. Programs moving from Step 3 to Step 4 would have successfully met national accreditation.

## 7.10 Program Standards

### **7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children**

The Lead Agency's Early Childhood Initiative, is a mission to create and sustain a unified, statewide early childhood service system which provides essential resources, shares common standards for quality and respects the diversity and uniqueness of individual children and their families and includes the collaboration of several departments, DOE, Public Safety, and MeCDC. MRTQ/PDN works closely with the Lead Agency on making resources available to Parents, Providers, and the public. The MeCDC's Licensing

Specialists work closely with providers on the importance of regular outdoor play and topic of health and nutrition. The MELDS standards differentiate for each age group, infant and toddlers, and preschool.

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

MRT/PDN's Inclusion Warm Line that is available to Providers, Parents, and Public tracks all calls and the topics. This in return guides on needed trainings and additional resources. MRTQ/PDN Inclusion Warm Line (IWL) received 41 calls from 7/1/2017-6/30/2018. Resources are offered to the caller and information about on-site consultation is provided. MRTQ/PDN has developed an IWL resource bank that contains vetted materials from reputable sources on a wide variety of topics. IWL is jointly staffed by inclusion, health and mental health consultants from MRTQ/PDN, and the University of Maine Center for Community Inclusion and Disability Studies.

**7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities**

**7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).**

N/A

**7.11.2 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities, and also describe the measureable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. Describe:**

N/A

## 8 Ensure Grantee Program Integrity and Accountability

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

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity and accountability apply to:

- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF
- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF
- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities
- Internal processes for conducting child care provider subsidy

## 8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

**8.1.1 Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity. Check all that apply:**

Train on policy manual

Describe:

The Financial Resources Specialists (FRS) have monthly team meetings to go over any changes in the CCDF Program that are being administered by the Lead Agency. As well as near weekly individual supervision.

Train on policy change notices

Describe:

The Financial Resources Specialists (FRS) have monthly team meetings to go over any changes in the CCDF Program that are being administered by the Lead Agency.

Ongoing monitoring and assessment of policy implementation

Describe:

Ongoing monitoring and assessment of policy implementation is conducted by having differentiated desk audits for each FRS in order to assure policies are correctly being implemented.

Other

Describe:

**8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management**

**practices for all expenditures of CCDF funds. Check all that apply:**

Verifying and processing billing records to ensure timely payments to providers

Describe:

The FRS reviews each bill submitted by Providers assigned to their counties.

Fiscal oversight of grants and contracts

Describe:

The Lead Agency has two sub-recipients of CCDF funds; PDN and ICF Macro Inc. PDN and ICF Macro Inc. contractors are monitored through written contracts. Management of these contacts includes regular written reports that outline progress toward performance outcome measures, an itemized budget, written provider responsibilities and requirements. Close review of contract requirements also takes place at routine in-person status report meetings between the Lead Agency and the sub recipients. The Lead Agency's Program Financial Officer (PFO) oversees program fiscal oversight of grant funds that are fee for service from Children's Licensing and Investigation Unit, Fire Marshall's Office. OFI's funding is cost allocated. Internal audits are conducted at random.

Tracking systems to ensure reasonable and allowable costs

Describe:

The Lead Agency's PFO oversees program fiscal oversight of grant funds to ensure reasonable and allowable costs. Funds are tracked through Weekly Budget Variance Reports that enables Program Administrators to monitor revenue, expenditures, and grant balance.

Other

Describe:

**8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:**



Conduct a risk assessment of policies and procedures

Describe:

Establish checks and balances to ensure program integrity

Describe:

The Lead Agency establish checks and balances to ensure program integrity through the PFO's oversight of expenditures of CCDF funds, supervisory approval on expenditures at departmental level, and through auditing measures taken by the State.

Use supervisory reviews to ensure accuracy in eligibility determination

Describe:

The CCSP Supervisor conducts reviews through desk audits to ensure accuracy in eligibility determination.

Other

Describe:

Complaints can be made at any time by contacting any CCSP staff's supervisor or through constituent services at [http://www.maine.gov/dhhs/contactus.shtml#comments\\_questions](http://www.maine.gov/dhhs/contactus.shtml#comments_questions)

**8.1.4 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.**

a) Check and describe all activities that the Lead Agency conducts to identify and prevent fraud or intentional program violations. Include in the description how each activity assists in the identification and prevention of fraud and intentional program

violations. Include a description of the results of such activity.

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

Describe

The Lead Agency receives monthly reports from OFI indicating duplicative payments for TANF and CCSP.

- Run system reports that flag errors (include types).

Describe:

Weekly report on payment accuracy.

- Review enrollment documents and attendance or billing records

Describe:

The Lead Agency requires CCSP providers to attendance records for audits and reviews to be submitted upon request.

- Conduct supervisory staff reviews or quality assurance reviews.

Describe:

The Lead Agency's CCSP Supervisor conducts desk audits for staff reviews.

- Audit provider records.

Describe:

The Lead Agency audits at random provider records for accuracy.

- Train staff on policy and/or audits.

Describe:

The Lead Agency has desk level procedure manual to be followed by all FRS and monthly meetings for review.

- Other

Describe:

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.

- Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

The Lead Agency receives a monthly report from OFI indicating duplicative payments for TANF and CCSP.

- Run system reports that flag errors (include types).

Describe:

Weekly report on payment accuracy.

- Review enrollment documents and attendance or billing records

Describe:

The Lead Agency requires CCSP providers to attendance records for audits and reviews to be submitted upon request.

- Conduct supervisory staff reviews or quality assurance reviews.

Describe:

The Lead Agency's CCSP Supervisor conducts desk audits for staff reviews.

- Audit provider records.

Describe:

The Lead Agency audits at random provider records for accuracy.

- Train staff on policy and/or audits.

Describe:

The Lead Agency has desk level procedure manual to be followed by all FRS and monthly meetings for review.

Other

Describe:

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

The Lead Agency receives monthly reports from OFI indicating duplicative payments for TANF and CCSP.

Run system reports that flag errors (include types).

Describe:

Weekly report on payment accuracy.

Review enrollment documents and attendance or billing records

Describe:

The Lead Agency requires CCSP providers to attendance records for audits and reviews to be submitted upon request.

Conduct supervisory staff reviews or quality assurance reviews.

Describe:

The Lead Agency's CCSP Supervisor conducts desk audits for staff reviews.

Audit provider records.

Describe:

The Lead Agency audits at random provider records for accuracy.

Train staff on policy and/or audits.

Describe:

The Lead Agency has desk level procedure manual to be followed by all FRS and monthly meetings for review.

Other

Describe:

**8.1.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.**

a) Check and describe all activities that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

\$10

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

The Lead Agency refers cases to the DHHS Fraud Investigation Unit.

- Recover through repayment plans.

Describe:

The Lead Agency will initiate recruitment of payments and then if need refer to DHHS Fraud Investigation Unit.

- Reduce payments in subsequent months.

Describe:

The Lead Agency will reduce payment through individual reduction or through larger increments of repayment.

Recover through state/territory tax intercepts.

Describe:

The Lead Agency will refer cases to the DHHS Fraud Investigation Unit pursuant to Title 22 M.R.S. §13

Recover through other means.

Describe:

The Lead Agency will accept payments by check.

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

When the Department makes a preliminary determination that a parent or child care provider may have committed a program violation, the case may be referred to the DHHS Fraud Investigation Unit pursuant to Title 22 M.R.S. §13 and the Department may pursue establishment of a program violation against the parent and/or child care provider administratively. The Unit is comprised of the Deputy Director Fraud Investigation and Recovery Unit and Fraud Investigators under said department. A final determination that a program violation was made shall be made only as the result of a decision made by an Administrative Hearing, a court, or waiver of the Administrative Hearing by the parent and/or child care provider. Failure to request an Administrative Hearing constitutes a waiver. Child care providers who previously had agreements with the Department and who were found to be engaged in fraud or a program violation in connection with the Child Care Subsidy program or have been sanctioned are not eligible to receive payments on behalf of parents receiving Subsidy.

Other

Describe:

b) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity.

Activities can include, but are not limited to, the following:

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

\$10

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

The Lead Agency refers cases to the DHHS Fraud Investigation Unit if repayment is recouped.

- Recover through repayment plans.

Describe:

The Lead Agency will reduce payment through individual reduction or through larger increments of repayment.

- Reduce payments in subsequent months.

Describe:

The Lead Agency will reduce payment through individual reduction or through larger increments of repayment.

- Recover through state/territory tax intercepts.

Describe:

The Lead Agency will refer cases to the DHHS Fraud Investigation Unit pursuant to Title 22 M.R.S. §13

- Recover through other means.

Describe:

The Lead Agency will accept payments by check.

- Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

Other

Describe:

c) Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

\$10

Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

Recover through repayment plans.

Establish a unit to investigate and collect improper payments.

The Lead Agency will work with parents and providers to establish a repayment plan

Reduce payments in subsequent months.

Describe:

The Lead Agency will work with parents and providers to establish a repayment plan.

Recover through state/territory tax intercepts.

Describe:

Recover through other means.

Describe:

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:



Other

Describe:

**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? Check and describe all that apply:**

Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.

Describe:

The Client has ten (10) days to appeal the decision. If there was an intentional program violation by the Client, the Lead Agency shall impose a disqualification penalty for up to twelve (12) months.

Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified.

Describe:

The Provider has ten (10) days to appeal the decision. If there was an intentional program violation by the Provider, the Lead Agency shall impose a disqualification penalty for up to twelve (12) months.

Prosecute criminally.

Describe:

DHHS Fraud Investigation Unit works with law enforcement when a case has been deemed fraudulent based the specifics of the case.

Other.

Describe:

## Appendix A: Background Check Waiver Request Form

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers will be considered "transitional and legislative waivers" to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)) These waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 -- 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019. If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

### Overview of Background Check Implementation deadlines

Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017

Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018

One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019

Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting

a time-limited waiver extension.