

**STATE OF CONNECTICUT** *DEPARTMENT OF SOCIAL SERVICES* 25 SIGOURNEY STREET • HARTFORD, CONNECTICUT 06106-5033

June 30, 2005

Mr. Hugh Galligan Regional Administrator DHHS/ACF John F. Kennedy Building Room 2000, 20th Floor Boston, MA 02203

Dear Mr. Galligan:

The State of Connecticut submits its two year plan (October 1, 2005 to September 30, 2007) and requests its full allotment for the Child Care and Development Fund for fiscal year 2006, estimated to be \$49,890,681 for the program expenditure period starting October 1, 2005 and ending September 30, 2006.

We believe we have fulfilled all requirements as prescribed by the Child Care and Development Fund regulations. We are very excited about the several unique child care initiatives underway in Connecticut and look forward to a continued partnership with the federal government.

If you have any questions concerning this information, please contact Peter J. Palermino, Program Manager of the department's Family Services Unit at (860) 424-5006.

Sincerely,

Claudette J. Beaulieu Deputy Commissioner

#### CJB:med

c: ACF Child Care Bureau – Washington Patricia A. Wilson-Coker, Commissioner Michael P. Starkowski, Deputy Commissioner Peter Palermino



## CHILD CARE AND DEVELOPMENT FUND PLAN

### FOR

## CONNECTICUT

## FFY 2006-2007

This Plan describes the CCDF program to be conducted by the State for the period 10/1/05 - 9/30/07. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

The official text of the applicable laws and regulations govern, and the Lead Agency acknowledges its responsibility to adhere to them regardless of the fact that, for purposes of simplicity and clarity, the specific provisions printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text.

Public reporting burden for this collection of information is estimated to average 162.57 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

(Form ACF 118 Approved OMB Number: 0970-0114 expires 05-31-2006)

#### TABLE OF CONTENTS

AMENDM	ENTS LOG	iv
PART 1	ADMINISTRATION	
	1.1 Lead Agency Information	1
	1.2 State Child Care (CCDF) Contact Information	
	1.3 Estimated Funding	
	1.4 Estimated Administration Cost	
	1.5 Administration of the Program	2
	1.6 Determining Eligibility	2
	1.7 Non-Governmental Entities	
	1.8 Use of Private Donated Funds	
	1.9 Use of State Pre-Kindergarten (Pre-K) Expenditures for CCDF-	
	Eligible Children	4
	1.10 Improper Payments	5
PART 2	DEVELOPING THE CHILD CARE PROGRAM	
	2.1 Consultation and Results of Coordination	9
	2.2 Public Hearing Process	15
	2.3 Public-Private Partnerships	
PART 3	CHILD CARE SERVICES OFFERED	
	3.1 Description of Child Care Services	
	3.2 Payment Rates for the Provision of Child Care	19
	3.3 Eligibility Criteria for Child Care	
	3.4 Priorities for Serving Children and Families	
	3.5 Sliding Fee Scale for Child Care Services	
PART 4	PROCESSES WITH PARENTS	
	4.1 Application Process	
	4.2 Records of Parental Complaints	
	4.3 Unlimited Access to Children in Child Care Settings	
	4.4 Criteria or Definitions Applied by TANF Agency to Determine	
	Inability to Obtain Child Care	
PART 5	ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND	
	AVAILABILITY OF CHILD CARE	
	5.1 Quality Earmarks and Set-Asides	
	5.2 <i>Good Start, Grow Smart</i> Planning and Development	

PART 6	HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS	
	(50 States & District of Columbia only)	•
	6.1 Health and Safety Requirements for Center-based Providers	
	6.2 Health and Safety Requirements for Group Home Providers	
	6.3 Health and Safety Requirements for Family Providers	
	6.4 Health and Safety Requirements for In-Home Providers	
	6.5 Exemptions to Health and Safety Requirements	
	6.6 Enforcement of Health and Safety Requirements	
	6.7 Exemptions from Immunization Requirements	45
APPENDIX	1 PROGRAM ASSURANCES AND CERTIFICATIONS	46
APPENDIX	2 ELIGIBILITY AND PRIORITY TERMINOLOGY	
APPENDIX	3 ADDITIONAL CERTIFICATIONS (on file - not included here)	
REQUIRED	ATTACHMENTS	
PART 2	DEVELOPING THE CHILD CARE PROGRAM	
	Section 2.1.A - Principles, Objectives and Strategies	
	Section 2.1.B - Collaboration Efforts	
	Section 2.2.A - Public Hearing Notice	
	Section 2.2.B - Public Hearing Minutes	
PART 3	CHILD CARE SERVICES OFFERED	
	Section 3.2.A - Payment Rates	
	Section 3.2.B - Rate Survey	
	Section 3.2.C - Rate Survey Methodology Summary	
	Section 3.2.D - Rationale for Equal Access	
	Section 3.3.2A - Income Guidelines	
	Section 3.4.1A - Priority Eligibility Guidelines	
	Section 3.4.3A - Wait List Guidelines	
	Section 3.5.1A - Sliding Fee Schedule	107
PART 4	PROCESSES WITH PARENTS	100
	Section 4.4.A - TANF Definitions and Criteria	109
PART 5	QUALITY AND AVAILABILITY SERVICES	
	Section 5.2.4A - Assessment Evaluations	114

#### AMENDMENTS LOG

#### Child Care and Development Services Plan for For the period: 10/1/05 -- 9/30/07

ar crion	EFFECTIVE/	DATE	
SECTION	PROPOSED	SUBMITTED TO	DATE APPROVED
AMENDED	EFFECTIVE DATE	ACF	BY ACF
-			

#### **Instructions:**

- 1) Lead Agency completes the first 3 columns and sends a photocopy of this Log (showing the latest amendment sent to ACF) <u>and</u> the amended section(s) to the ACF Regional contact. A copy of the Log, showing the latest amendment pending in ACF, is retained in the Lead Agency's Plan.
- 2) ACF completes column 4 and returns a photocopy of the Log to the grantee.
- 3) The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

Note: This process depends on repeated subsequent use of the <u>same</u> Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain those "old" plan pages that are superseded by amendments in a separate appendix to its Plan.

#### PART 1 ADMINISTRATION

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), 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)

1.1 <u>Lead Agency Information</u> (as designated by State chief executive officer)

Name of Lead Agency: Connecticut Department of Social Services Address of Lead Agency: 25 Sigourney Street Hartford, Connecticut 06106

Name and Title of the Lead Agency's Chief Executive Officer: Patricia A. Wilson-Coker, Commissioner

Phone Number:	1 (860) 424-5008
Fax Number:	1 (860) 424-5129

E-Mail Address: <u>Pat.Wilson-Coker@po.state.ct.us</u> Web Address for Lead Agency (if any): http://www.dss.state.ct.us

#### 1.2 <u>State Child Care (CCDF) Contact Information</u> (day-to-day contact)

Name of the State Child Care Contact (CCDF): Peter Palermino

Title of State Child Care Contact:

	Program Manager Family Services Unit
Address:	25 Sigourney Street Hartford, Connecticut 06106
Phone Number:	1 (860) 424-5006

Finite Rumber:1 (800) 424-5000Fax Number:1 (860) 424-5335E-Mail Address:peter.palermino@po.state.ct.us

Phone Number for child care subsidy program information (public): **1 (800) 811-6141** Web Address for child care subsidy program information (for the public) (if any): http://www.dss.state.ct.us/ccare/index.htm.

#### 1.3 <u>Estimated Funding</u>

The Lead Agency <u>estimates</u> that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2005 through September 30, 2006. (§98.13(a))

CCDF:	\$49,890,681
Federal TANF Transfer to CCDF:	\$0
Direct Federal TANF Spending on Child Care:	\$0
State CCDF Maintenance of Effort Funds:	\$18,738,357
State Matching Funds:	<u>\$16,699,890</u>
Total Funds Available:	\$85,328,928

#### 1.4 Estimated Administration Cost

The Lead Agency <u>estimates</u> that the following amount (and percentage) of Federal CCDF and State Matching Funds will be used to administer the program (not to exceed 5 percent): **§ 981,000** (2%). (658E(c)(3), §§98.13(a), 98.52)

#### 1.5 Administration of the Program

Does the Lead Agency directly administer and implement <u>all</u> services, programs and activities funded under the CCDF Act, <u>including</u> those described in Part 5.1 – Activities & Services to Improve the Quality and Availability of Child Care, Quality Earmarks and Set-Aside?



Yes. Skip questions 1.6 and 1.7. Go to Section 1.8.

No, and the following describes how the Lead Agency maintains overall control when services or activities are provided through other agencies: (658D(b)(1)(A),§98.11)

The Lead Agency implements various services in conjunction with contracted governmental, private and not-for-profit community based organizations. The Lead Agency monitors all contracted entities for compliance with state and federal regulations.

#### 1.6 Determining Eligibility

For child care services funded under §98.50 (e.g., certificates, vouchers, grants/contracts for slots based on individual eligibility), does the Lead Agency itself: (§98.11)

- Determine individual eligibility of non-TANF families?
  - Yes.
  - No. If no, identify the name and type of agency that determines eligibility of non-TANF families for child care:

The Lead Agency contracts with United Way of Connecticut, Inc., a private non- profit organization, to administer the state's certificate/voucher

#### program titled the Care 4 Kids Program. The Lead Agency also contracts with numerous private and not-for-profit child care centers to administer the contracted program.

• Determine individual eligibility of TANF families?

ĺ	$\overline{\mathbf{X}}$

No. If no, identify the name and type of agency that determines eligibility of TANF families for child care:

#### The Lead Agency contracts with United Way of Connecticut, Inc., a private non-profit organization, to administer the state's certificate/voucher program titled the Care 4 Kids Program.

- Assist parents in locating child care?
  - Yes.

 $\boxtimes$ 

Yes.

No. If no, identify the name and type of agency that assists parents:

The Lead Agency contracts with the United Way of Connecticut's statewide Child Care INFOLINE project, which is the state's resource and referral agency. The Child Care INFOLINE operates a statewide telephone service with office sites and community liaisons in each of the five state human services regions.

- Make payments to providers and/or parents?
  - $\boxtimes$

Yes.

No. If no, identify the name and type of agency that makes payments:

The Lead Agency provides payments to child care centers and school- age programs funded through its contracted child care component. However, the Lead Agency contracts with United Way of Connecticut, Inc., a private nonprofit organization, to provide payments to providers enrolled in the state's Care 4 Kids certificate/voucher program.

#### 1.7 <u>Non-Governmental Entities</u>

Is any entity named in response to section 1.6 a non-governmental entity? (658D(b), §§98.10(a), 98.11(a))



Yes, and the following entities named in 1.6 are non-governmental: No.

United Way of Connecticut and numerous private and not-for-profit child care facilities.

#### **1.8** <u>Use of Private Donated Funds</u>

Will the Lead Agency use private donated funds to meet a part of the matching requirement of the CCDF pursuant to \$98.53(e)(2) and (f)?

Yes, The name and type of entity designated to receive private donated funds is:

 Name:
 Address:
 Contact:
 Type:

 No.

#### 1.9 Use of State Pre-Kindergarten (Pre-K) Expenditures for CCDF-Eligible Children

- 1.9.1 During this plan period, will State expenditures for Pre-K programs be used to meet <u>any</u> of the CCDF maintenance of effort (MOE) requirement?
  - $\boxtimes$  Yes, and:

(yes) The State assures that its level of effort in full day/full year child care services has not been reduced, pursuant to \$98.53(h)(1).

( 50%) Estimated % of the MOE requirement that will be met with pre-K expenditures.

If the State uses Pre-K expenditures to meet more than 10% of the MOE requirement, the following describes how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

The Lead Agency partners with the State Department of Education to manage the state's School Readiness preschool state funded component. Program standards are guided by state legislation and agency polices and procedures. Access to funds managed by the Lead Agency, including facilities expansion funds, are allowable as part of this partnership.

No.

- 1.9.2 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF Matching Fund requirement? (§98.53(h))
  - Yes, and:

(%) Estimated % of the Matching Fund requirement that will be met with pre-K expenditures.

If the State uses Pre-K expenditures to meet more than 10% of the Matching Fund requirement, the following describes how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

- No.
- 1.9.3 If the State answered yes to 1.9.1 or 1.9.2, the following describes State efforts to ensure that pre-K programs meet the needs of working parents: (§98.53(h)(2))

The Lead Agency is also the TANF agency and responsible for coordinating the state's welfare to work program with its partners, the Connecticut Department of Labor and community based employment agencies. Access to the child care subsidy program funds, which primarily targets TANF and low-income working families, is allowable as part of the partnership between the Lead Agency and the State Department of Education in the joint management for the state's School Readiness preschool state funded component.

#### 1.10 Improper Payments

1.10.1 How does the Lead Agency define improper payments?

Connecticut uses the phrase "benefit error" to describe improper payments that are either overpayments or underpayments.

Underpayments occur when the parent does not receive all the benefits to which entitled due to an administrative error. Errors caused by the family and/or child care provider not reporting correct information are not considered underpayments, except for provider billing errors where the agency is notified within thirty days of the payment date. Underpayments are corrected regardless of when the error occurred or whether the case is active or closed.

Overpayments occur when the amount paid exceeds the benefit that would have been issued if the payment were calculated correctly based on accurate information that was reported, verified and acted on in a timely manner. Overpayments are classified as administrative, parent or provider caused. Overpayments caused by parents or providers are further classified as intentional or unintentional. No overpayment exists if the amount is less than ten dollars in any month.

The starting date of the error varies depending on whether the error is intentional (fraud) or due to a change in circumstances vs. circumstances that existed at the time of application or redetermination. If the error was intentional or existed at application or redetermination, the error begins in the first service month paid.

Errors that occur following a change in circumstances generally start in the month following the change. This policy avoids errors when a change is reported and acted upon timely, and accounts for adverse action and other due process requirements.

An error is considered intentional if the parent or provider knowingly withheld or provided false information on matters affecting eligibility, benefits or services provided. Only a court of law or an administrative hearing official can determine if fraud occurred.

The error is considered unintentional if there was clearly no intent to commit fraud or to obtain benefits or payments under false pretenses; or the parent or provider did not purposefully withhold or provide erroneous information (for example, the parent waited to report a change until the redetermination instead of reporting the change immediately); or illness, a family emergency or other good cause reasons exist for not reporting information timely or accurately; or the error was due to a delay in taking action as the result of an administrative hearing request.

**1.10.2** Has your State developed strategies to prevent, measure, identify, reduce and/or collect improper payments? (§98.60(i), §98.65, §98.67)

Yes, and these strategies are shown below:

No. If no, are there plans underway to determine and implement such strategies?

0	
Yes	
No.	

Connecticut has developed the following strategies:

#### **Measurement and Prevention**

- Targeted Verification Provider Photo ID, Second/Third Shift Verification, Employer contacts
- Targeted training in error prone areas
- 6 month redetermination cycles
- A dedicated quality assurance unit
- Corrective action planning

- Clear instructions on forms and notices
- 800 Fraud Hotline
- Formal quality control case reviews performed quarterly
- Regulatory provisions to conduct site visits and audits
- Coordination between eligibility/payment and agency fraud investigations staff
- All Child Care Management Information System (CCMIS) transactions are time and date stamped by user ID
- Data imaging of incoming and outgoing documents

#### **Error Detection**

- Inquiry Access to Other State Databases:
  - Department of Labor (DOL) wage and UCB files
  - DOL employment and training records for TANF recipients
  - Department of Corrections
  - Motor Vehicle records
  - Medicaid, Food Stamps, State Supplement and TANF records via DSS' Eligibility Management System (EMS)

#### **Reports and Data Matching**

- Assign all household members a unique agency client identifier
- Match unlicensed providers against the state child abuse/neglect registry
- Department of Public Health day care licensing
- Criminal Background checks
- Various CCMIS/ EMS data matches
- Fleeing Felon Match
- Extensive Use of ad hoc reporting tools monitor error prone circumstances

#### **Collections and Penalties**

- Mandatory recoupment policies
- Closed case collections
- Criminal Prosecution
- Administrative Disqualification Hearings
- Progressive parent disqualification penalties
- Lifetime provider fraud disqualification and state licenses forfeiture

**1.10.3** Has your State developed strategies to identify errors in the determination of client eligibility?

 $\boxtimes$  Yes, and these strategies are:

- dedicated quality assurance and monitoring unit at the vendor site
- procedure manuals, processing guides, worker alerts and targeted training
- separation of eligibility and payment functions
- system security levels by function
- tracking of system transactions
- system edits and audit trails
- ad hoc reporting and monitoring to measure error prone circumstances
- period management evaluation of operations processes

No. If no, are there plans underway to determine and implement such strategies?

Yes.
No.

#### PART 2 DEVELOPING THE CHILD CARE PROGRAM

#### 2.1 Consultation and Coordination

2.1.1 Lead Agencies are required to *consult* with appropriate agencies and *coordinate* with other Federal, State, local, tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)). Indicate the entities with which the Lead Agency has consulted or coordinated (as defined below), by checking the appropriate box(es) in the following table.

*Consultation* involves the participation of an appropriate agency in the development of the State Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments (noted by the asterisk in the chart below).

*Coordination* involves the coordination of child care and early childhood development services, including efforts to coordinate across multiple entities, both public and private (for instance, in connection with a State Early Childhood Comprehensive System (SECCS) grant or infant-toddler initiative). At a minimum, Lead Agencies must coordinate with (1) other Federal, State, local, Tribal (if applicable), and/or private agencies responsible for providing child care and early childhood development services, (2) public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health), (3) employment services / workforce development, (4) public education, and (5) Temporary Assistance for Needy Families (TANF), and (5) any Indian Tribes in the State receiving CCDF funds (noted by the asterisks in the chart below).

		Consultation	Coordination
•	Representatives of local government	*	$\square$
•	Indian Tribes/Tribal Organizations, when such en- tities exist within the boundaries of the State		
•	Other Federal, State, local, Tribal (if applicable), and private agencies providing child care and early childhood development services.	$\square$	*
٠	State/Tribal agency (agencies) responsible for		
	• Public health		*
	• Employment services / workforce development	$\square$	*
	• Public education	$\square$	*
	• TANF	$\square$	*
	• State pre-kindergarten programs	$\square$	$\square$
	• Head Start programs	$\square$	$\square$
	• Programs that promote inclusion for children with special needs		
•	Other (See guidance):		$\square$

\* Required.

For each box checked above, (a) identify the agency providing the service and (b) describe the consultation and coordination efforts, if any. Descriptions must be provided for any consultation or coordination required by statute or regulation.

**<u>x</u>** Others (please identify) (658D(b)(1)(D), §98.12(a), 98.14(a)(1) & (2))

The Lead Agency completed a series of activities to develop the Plan. The Lead Agency partnered with the Connecticut Department of Education, Connecticut Department of Public Health, five community child care organizations and the Connecticut Child Day Care Council to schedule five public hearings to review the CCDF federal law/regulations, Connecticut child care laws/regulations, and the draft *Connecticut Strategic Direction for Supporting Families, Children and Caregivers* plan. The Lead Agency notified various advocacy, state/local governmental and community based organizations such as the Connecticut Child Care Legislative Collaborative, the Connecticut Head Start State Collaboration Office (Connecticut-HSSCO), the Connecticut Head Start Association, the Connecticut Child Care Center Directors Forum and the School Readiness Councils.

The Lead Agency is responsible for coordinating child care services and other programs, which affect families and children in Connecticut. As such, the Lead Agency works in consort with other partners (federal, state and local, public and private, government and community-based) to administer services and foster linkages between agencies, organizations, advocates, clients and community groups in an effort to coordinate services and to develop a comprehensive and integrated child care/children's health and development network.

The Lead Agency ensures that the federal funding streams are integrated within the Connecticut child care/early childhood system and acts as a conduit for information flowing to and from the community. The Lead Agency published its strategic direction for supporting families, children and caregivers as part of its draft CCDF Plan. The guiding principles, service objectives, and service strategies are attached (see <u>Attachment 2.1.A</u>).

The first two entities described below are new statewide initiatives that will contribute to future CCDF Plan submissions and are included to reference their potential for further consultation, coordination and collaboration activities. Following them are key organizations that the Lead Agency has consulted, coordinated and developed collaborative arrangements. We have attached documents (see <u>Attachment 2.1.B</u>) that describe specific collaboration activities.

#### **Governor's Early Childhood Cabinet**

Legislation passed in June 2005 by the General Assembly will establish the Governor's Early Childhood (EC) Cabinet in state fiscal year 2005-2006. The EC Cabinet will be comprised of Commissioners from state departments and agencies with primary responsibility for early childhood issues, child care providers, business and community representatives. The purpose of the EC Cabinet will be to set policy guidelines and integrate strategies across state and local services. The work of the Lead Agency and the information as set forth in <u>Attachment 2.1.A</u> will serve as a general guide to the EC Cabinet. The Senior Advisor will chair the EC Cabinet for Early Childhood as appointed by the Governor. This individual will lead the Governor's efforts to make Connecticut a national model for early childhood education. The Senior Advisor will develop plans and recommendations to expand and finance early childhood school readiness programs across the state as well as seek new strategies to help close Connecticut's achievement gap.

#### Early Childhood Partners Project

The Early Childhood Partners (ECP) project is the Connecticut name for the federal Early Childhood Comprehensive Systems Initiative (CECCS). ECP will create a performance-based, outcome-driven strategic plan to support all Connecticut families so their children arrive at school healthy and ready to succeed. ECP is the successor to the Healthy Child Care Connecticut project that had been developed by the federal Maternal and Child Health (MCH) and Child Care bureaus. The Connecticut Department of Public Health (DPH) is the lead agency for maternal and child health services in Connecticut and is coordinating the development of the strategic plan. The Plan will provide the technical blue-print for the leadership structure of the new Governor's Early Childhood Cabinet. The ECP has adopted the following policy goals for children:

- A. All children and families have access to resources that promote comprehensive health
- B. All children have access to quality early care and education
- C. All families have the support and resources to nurture healthy children

#### **United Way of Connecticut - Care 4 Kids Program**

United Way of Connecticut has been selected by the Lead Agency to manage the daily operations of the Care 4 Kids child care subsidy program. Services provided by the contractor include: application, eligibility and redetermination processing, tracking of provider information, invoice processing, and fraud detection. Lead Agency staff provides program oversight and are collocated with the Care4Kids program staff and the Child Care INFOLINE resource and referral service.

#### **United Way of Connecticut Child Care INFOLINE**

Child Care INFOLINE is a statewide resource and referral service operated by the United Way of Connecticut that links parents to child care resources. Child Care INFOLINE maintains a statewide database, which contains information on, fees, capacity, hours of operations, etc. They also operate a statewide recruitment project to expand the number of child care facilities in Connecticut.

#### **Child Day Care Council**

The Child Day Care Council is a legislatively mandated body that serves as a forum for Connecticut citizens interested in child care and as an advisory committee to the Lead Agency on child care issues and the development of the CCDF Plan. The CCDF Administrator is the Lead Agency commissioner designee to the Council. The Lead Agency provides administrative support to the Council.

#### **Commission on Children**

The Commission on Children is a legislative agency and charged with recommending public policy on behalf of children. The Lead Agency has partnered with the Commission to develop various consumer education materials such as the *Are You Ready, Watch Me Grow, and Healthy Expectations* brochures.

#### **Connecticut Department of Public Health (DPH)**

DPH is the state agency responsible for the licensing, regulation and inspection of child day care centers, group homes and family day care homes. DPH is also the state lead agency for immunization and maternal and health issues. The Lead Agency funds licensing enforcement personnel at DPH and has developed a formal working protocol with DPH regarding the Lead Agency's child care subsidy program.

#### **Connecticut Department of Education (SDE)**

SDE is the agency responsible for public and special education. In addition, SDE provides oversight for state Head Start funds, the federal Child Care and Adult Nutrition program, the state funded family resource programs and preschool programs. SDE staff provides technical assistance to licensed child care facilities. The Lead Agency partners with SDE to manage the state's School Readiness preschool initiative.

#### **Connecticut Department of Children and Families (DCF)**

DCF is the agency responsible for child welfare, including protective services and the foster parents program. DCF conducts child abuse/neglect investigations for licensed and informal child care providers. The Lead Agency partners with DCF to implement background abuse/neglect checks for certain informal child care providers enrolled in the state's certificate program, educate parents about abuse/neglect situations, and coordinate various family support initiatives implemented by both agencies.

#### **Connecticut Department of Public Safety (DPS)**

DPS is the agency responsible for criminal background checks and all communications with the Federal Bureau of Investigation. DPS conducts criminal investigations for licensed and informal child care providers. The Lead Agency partners with DPS to provide background criminal checks for certain informal child care providers enrolled in the state's certificate program.

#### Head Start

There are several Head Start and Early Head Start grantees and delegate agencies in Connecticut, primarily funded with federal funds and supplemented by state funds administered by SDE. The Lead Agency participates on the SDE Head Start Advisory Committee that advises SDE on matters related to state Head Start funds.

#### Connecticut Statewide Head Start Collaboration Office (CSHTCO)

The Director of the CSHTCO is housed in the Lead Agency and works with the CCDF Administrator on a variety of related topics that cross the early childhood services network. In addition the Director works with nearly all of the organizations listed in this section to integrate and or conform Head Start and early childhood program standards and best practices.

#### **Board of Trustees for State Community and Technical Colleges**

This institution provides early childhood academic instruction, operates early childhood child care centers that serve as training laboratories and provides scholarships for early caregivers to attend training required for licensure or to expand their academic and/or professional development. The Board of Trustees for State Community and Technical Colleges has been designated by the Lead Agency to coordinate the state's voluntary career development system for early care professionals entitled *Connecticut Charts A Course*. This project also coordinates the Statewide Accreditation Facilitation Project that provides opportunities for child care facilities to receive training and support as they strive to attain their national accreditation status.

#### **Connecticut Department of Mental Retardation (DMR)**

DMR is the state's lead agency for serving families and children with special needs and specifically intervention services for children, birth to three. The Lead Agency is a member of the Connecticut Birth to Three Coordinating Council. The Lead Agency and DMR have partnered to coordinate issues pertaining to children with special needs.

#### **Connecticut Department of Labor (DOL)**

DOL is the state's lead agency for providing employment and training services. DOL is the state's welfare-to-work agency and has developed a partnership with the Lead Agency to assist TANF clients attain employment or training opportunities. The Lead Agency's contractor for the Child Care Assistance Program (CCAP) has developed an operations protocol to insure TANF clients receive child care financial assistance. The Lead Agency has partnered with DOL to implement a Child Care Apprenticeship program.

Statewide Child Care Advocacy Organizations

The Lead Agency consults with and provides technical assistance to various statewide advocacy organizations including, but not limited to: the Connecticut School-age Child Care Alliance, the Connecticut Association for Education of Young Children, Connecticut Family Day Care Association Network, Connecticut Early Childhood Education Council, Connecticut Association for Human Services, Connecticut Child Care Centers Directors Forum, Connecticut Voices for Children.

- 2.1.2 State Plan for Early Childhood Program Coordination. *Good Start, Grow Smart* encourages States to develop a plan for coordination across early childhood programs. Indicate which of the following best describes the current status of the State's efforts in this area.
  - Planning. Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
  - **Developing**. A plan is being drafted. The draft is included as Attachment
  - **Developed**. A plan has been written but has not yet been implemented. The plan is included as Attachment

**Implementing**. A plan has been written and is now in the process of being implemented. The plan is included as Attachment \_\_\_\_\_

**Other (describe)**:

Describe the progress made by the State planning for coordination across early childhood programs since the date of submission of the 2004-2005 State Plan.

Indicate whether there is an entity that is responsible for ensuring that such coordination occurs. Indicate the four or more early childhood programs and/or funding streams that are coordinated and describe the nature of the coordination.

Describe the **results** or expected results of this coordination. Discuss how these results relate to the development and implementation of the State's early learning guidelines, plans for professional development, and outcomes for children.

Describe how the State's plan supports or will support continued coordination among the programs. Are changes anticipated in the plan?

There has been considerable planning activities and service implementation since the inception of CCDBG. The Lead Agency (for child care, TANF, SSBG, Medicaid, Child Support, Homelessness, etc) has facilitated much of this activity working with the State Department of Public Health (licensing agency), State Department of Education (lead agency for School readiness Program and state Head Start funds as of 1997), State Department of Children and Families (child welfare agency and special needs children), and other statewide and local agencies (Refer to Section 2.1 and <u>Attachments</u> <u>2.1.A and 2.1.B</u>). A formal plan has not been written but activities and "results" are included in the annual Lead Agency reports to the Connecticut General Assembly. Copies have been forward to ACF child care staff in Boston and are available on the Lead Agency web site.

With the expected creation of the Governor's Early Childhood (EC) Cabinet in the latter part of 2005 and the completion of the Early Childhood Partners strategic early childhood plan, expected by the end of 2005, Connecticut will be better prepared to respond to the information requested.

#### 2.2 <u>Public Hearing Process</u>

Describe the Statewide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. (658D(b)(1)(C),§98.14(c)) At a minimum, the description must provide:

Date(s) of statewide notice of public hearing:

See Attachment 2.2.A

Manner of notifying the public about the statewide hearing:

April 20, 2005 - Announced at monthly Child Day Care Council Meetings April 22, 2005 - Sent via e-mail to various Connecticut early childhood Listservs. May 6, 2005 - Lead Agency Press Release

Date(s) of public hearing(s):

#### See Attachment 2.2.A

Hearing site(s):

#### See Attachment 2.2.A

How the content of the plan was made available to the public in advance of the public hearing(s):

The CCDF Plan was available through the DSS Website, printed copies were available upon request through DSS and printed copies were made available at all of the public hearings.

A brief summary of the public comments from this process is included as

#### Attachment 2.2.B

#### 2.3 <u>Public-Private Partnerships</u>

Describe (1) the activities, including planned activities, to encourage public-private partnerships that promote private-sector involvement in meeting child care needs, <u>and (2)</u> the results or expected results of these activities. (658D(b)(1), §98.16(d))

The Lead Agency is committed to the continued expansion and development of cooperative public-private ventures. To this end, the Lead Agency encourages employer groups and business associations to promote family support policies such as, flex-time and flexible work hours, promote child care tax credit programs, collaborate with the State Departments of Labor, and Economic and Community Development to integrate family and child care policies with economic policies and inform employers about family needs and work force trends, collaborate with the Connecticut General Assembly to develop model child care policies and financing strategies which promote public-private partnerships.

A few examples of public-private partnerships follow:

Child Care Facilities Loan Fund – the Lead Agency has partnered with the Connecticut Health and Educational Facilities Authority (CHEFA), the major commercial banks doing business in the state and a community investment corporation to provide loan opportunities to child care providers. The Lead Agency is also collaborating with a community development organization, the Local Initiatives Support Corporation (LISC) to provide technical assistance to child care providers participating in financing projects.

Training Program in Child Development and the Early Childhood DataCONNections Program – the Lead Agency is working with the Child Health and Development Institute, a component of the private Children's Fund foundation, to implement these two programs that provide training opportunities for early caregivers and research opportunities for state agencies. This partnership provided training to nearly 4,000 caregivers in basic child health development over the past four years.

Care for Kids Program – The Lead Agency contracts with United Way of Connecticut, Inc. a private non-profit organization to manage this program.

Connecticut Voices for Children - The Lead Agency participates on a planning committee that is exploring the "economic impact" by the child care industry. Representatives include business leaders, the Connecticut Office of Workforce Competitiveness, Department of Labor, higher education and others.

The results of these activities are included in the annual Lead Agency reports to the Connecticut General Assembly. Copies have been forward to ACF child care staff in Boston and are available on the Lead Agency web site.

#### PART 3 CHILD CARE SERVICES OFFERED

#### 3.1 Description of Child Care Services

3.1.1 Certificate Payment System

Describe the overall child care certificate process, including, at a minimum:

(1) a description of the form of the certificate (98.16(k));

The child care certificate is a document authorizing monthly payments for specific child care services. It names the parent(s), the child(ren) to receive child care and the child care provider. The certificate also states the amount of the state and parent share. The Lead Agency maintains the original certificate with copies to the parent and the provider.

(2) a description of how the certificate program permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to choice of the provider; (658E(c)(2)(A)(iii), 658P(2), 98.2, 98.30(c)(4) & (e)(1) & (2)) and

Parents are informed that the certificate can be used at any appropriate (as defined in state regulations) child care setting they choose as long as the parent remains eligible for child care assistance. The certificate can be used at multiple child care settings. Parents are provided information on the certificate program by, but not limited to, the Lead Agency staff, Child Care Assistance Program, and the Child Care INFOLINE project, the statewide resource and referral service funded by the Lead Agency that assists parents with choosing child care.

(3) if the Lead Agency is also providing child care services through grants and contracts, estimate the <u>mix of §98.50 services available through certificates</u> <u>versus grants/contracts</u>, and explain how it ensures that parents offered child care services are given the option of receiving a child care certificate.
(98.30(a) & (b)) This may be expressed in terms of dollars, number of slots, or percentages of services.

Expenditures (state and federal) for state fiscal year 2004 indicate that Connecticut spent 50% of expenditures on certificates and 50% on contracted slots. All Lead Agency Contractors are required, as a condition of funding, to advise all parents with whom the programs have contact, about the availability of the child care certificates.

- 3.1.2 In addition to offering certificates, does the Lead Agency also have grants or contracts for child care slots?
  - Yes, and the following describes the types of child care services, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4),§§98.16(g)(1), 98.30(a)(1) & (b))
  - No

The Lead Agency will establish contracts directly with early childhood/child care facilities that meet licensing requirements established by the Connecticut Department of Public Health for the provision of infant/toddler, preschool and/or school-age child care slots.

- 3.1.3 The Lead Agency must allow for in-home care but may limit its use. Does the Lead Agency limit the use of in-home care in any way?
  - Yes, and the limits and the reasons for those limits are: (\$\$98.16(g)(2), 98.30(e)(1)(iv))
  - No No
- 3.1.4 Are all of the child care services described in 3.1.1 above (including certificates) offered throughout the State? (658E(a), §98.16(g)(3))

 $\boxtimes$ 

Yes

No, and the following are the localities (political subdivisions) and the services that are not offered:

#### 3.2 Payment Rates for the Provision of Child Care

The statute at 658E(c)(4) and the regulations at 98.43(b)(1) require the Lead Agency to establish payment rates for child care services that ensure eligible children equal access to comparable care.

These rates are provided as <u>Attachment 3.2.A</u>. The attached payment rates were or will be effective as **of January** <u>1, 2002</u>.

# The attached rate information is the current reimbursement rates as approved in the 2003-2005 CCDF Plan.

The following is a summary of the facts relied on by the State to determine that the attached rates are sufficient to ensure equal access to comparable child care services

provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:

- The month and year when the local market rate survey(s) was completed: <u>May 2005.</u> (§98.43(b)(2))
- A copy of the Market Rate Survey instrument and a summary of the results of the survey are provided as <u>Attachment 3.2.B</u>.

# The Lead Agency contracted with the University of Connecticut to complete a 2005 market rate survey. We attached the summary of the 2005 survey methodology in <u>Attachment 3.2.C.</u>

• How the payment rates are adequate to ensure equal access based on the results of the above noted local market rate survey (i.e., the relationship between the attached payment rates and the market rates observed in the survey): (§98.43(b))

#### See Attachment 3.2.D.

• Additional facts that the Lead Agency relies on to determine that its payment rates ensure equal access include: (§98.43(d))

#### See Attachment 3.2.D.

- If the payment rates do <u>not</u> reflect individual rates for the <u>full</u> range of providers -- center-based, group home, family and in-home care -- explain how the choice of the full range of providers is made available to parents.
- At what percentile of the current Market Rate Survey is the State rate ceiling set? If it varies across categories of care, please describe.

The payment rates in Attachment 3.2.A are set at the 60<sup>Th</sup> percentile range per the rate methodology derived from a survey conducted by the University of CT Center for Research and Analysis in May 2001.

The payment rates for "providers exempt from licensing", including relatives and in-home providers, are set as a percentage of the state minimum wage as of January 2002. Those rates as follows:

One-third of the minimum wage - one child Two-thirds of the minimum - two children Full Minimum Wage - three children • Does the State have a tiered reimbursement system (higher rates for child care centers and family child care homes that achieve one or more levels of quality beyond basic licensing requirements)?

 $\boxtimes$  Yes. If yes, describe:

No

Connecticut provides a tiered rate that is 5% higher than the state maximum rate per child for licensed facilities achieving and maintaining national accreditation standards and enroll children from the Lead Agency's child care subsidy program.

#### 3.3 Eligibility Criteria for Child Care

3.3.1 <u>Complete column (a) and (b) in the matrix below</u>. Complete Column (c) <u>ONLY</u> <u>IF</u> the Lead Agency is using income eligibility limits <u>lower</u> than 85% of the SMI).

			IF APPLICABLE		
Family	(a) 100% of State Median In-	(b) 85% of State Median Income	(c) Income Level, lower than 85% SMI, if used to limit eligibility		
Size	come (SMI) (\$/month)	(SMI) (\$/month) [Multiply (a) by 0.85]	(d) \$/month	(e) % of SMI [Divide (d) by (a), mul- tiply by 100]	
1	\$ 3,727	\$3,168	\$1,863	50%	
2	\$ 4,873	\$4,142	\$2,437	50%	
3	\$ 6,020	\$5,117	\$3,010	50%	
4	\$ 7,166	\$6,091	\$3,583	50%	
5	\$ 8,313	\$7,066	\$4,156	50%	

The Lead Agency uses the State Median Income (SMI) for each year as published by the Federal Register. These numbers represent the Connecticut numbers based on the April 15, 2005 Federal Register and are effective July 1, 2005 for CCDF and state funded programs.

If the Lead Agency does not use the SMI from the most current year, indicate the year used:

If applicable, the date on which the eligibility limits detailed in column (b) became or will become effective:

#### July 1, 2005

- 3.3.2 How does the Lead Agency define "income" for the purposes of eligibility? Is any income deducted or excluded from total family income, for instance, work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments? Is the income of all family members included, or is the income of certain family members living in the household excluded? Please describe and/or include information as <u>Attachment 3.3.2A</u>. (§§98.16(g)(5), 98.20(b))
- 3.3.3 Has the Lead Agency established additional eligibility conditions or priority rules, for example, income limits that vary in different parts of the State, special eligibility for families receiving TANF, or eligibility that differs for families that include a child with special needs? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))
  - Yes, and the additional eligibility criteria are: (<u>Terms must be defined in</u> <u>Appendix 2</u>)

See Section 3.4

- No
- 3.3.4 Has the Lead Agency elected to waive, on a case-by-case basis, the fee and income eligibility requirements for cases in which children receive, or need to receive, protective services, as defined in Appendix 2? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))
  - Yes, and the additional eligibility criteria are: (<u>Terms must be defined in</u> <u>Appendix 2</u>)
  - No No
    - Not applicable. CCDF-funded child care is not provided in cases in which children receive, or need to receive, protective services.
- 3.3.5 Does the Lead Agency allow CCDF-funded child care for children above age 13 but below age 19 who are physically and/or mentally incapable of self-care? (Physical and mental incapacity must then be defined in Appendix 2.) (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))



Yes, and the upper age is  $\underline{19}$ . No

3.3.6 Does the Lead Agency allow CCDF-funded child care for children above age 13 but below age 19 who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii)



Yes, and the upper age is <u>19</u>. No

- 3.3.7 Does the State choose to provide CCDF-funded child care to children in foster care whose foster care parents are <u>not</u> working, or who are <u>not</u> in education/training activities? (§§98.20(a)(3)(ii), 98.16(f)(7))
  - Yes. (**NOTE**: This means that for CCDF purposes the State considers these children to be in protective services.)
  - No No
- 3.3.8 Does the State choose to provide respite child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B)) Yes
  - 🛛 No

#### 3.4 Priorities for Serving Children and Families

3.4.1 Describe how the State prioritizes service for the following CCDF-eligible children: (a) children with special needs, (b) children in families with very low incomes, and (c) other. Terms must be defined in Appendix 2. (658E(c)(3)(B))

#### See Attachment 3.4.1A

3.4.2 Describe how CCDF funds will be used to meet the needs of: (a) families receiving Temporary Assistance for Needy Families (TANF), (b) those attempting to transition off TANF through work activities, and (c) those at risk of becoming dependent on TANF. (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

#### See Attachment 3.4.1A

- 3.4.3 Does the Lead Agency maintain a waiting list?
  - Yes. If yes, for what populations? Is the waiting list maintained at the State level? Are certain populations given priority for services, and if so, which populations? What methods are employed to keep the list current?
  - No. If no, does the Lead Agency serve all eligible families that apply?
     Yes
     No

Are there other ways that the Lead Agency addresses situations in which funding is not sufficient to serve all families that are technically eligible under State policies? If so, describe.

#### The Lead Agency maintains a Wait List only for the child care subsidy program and only if projected expenditures will exceed the approved annual

# state fiscal year budget allocation. See <u>Attachment 3.4.3A</u> for the Wait List regulations.

#### 3.5 <u>Sliding Fee Scale for Child Care Services</u>

3.5.1 A sliding fee scale, which is used to determine each family's contribution to the cost of child care, must vary based on <u>income and the size of the family</u>. A copy of this sliding fee scale for child care services and an explanation of how it works is provided as <u>Attachment 3.5.1 A.</u>

The attached fee scale was or will be effective as of July 1, 2005.

Will the Lead Agency use additional factors to determine each family's contribution to the cost of child care? (658E(c)(3)(B), \$98.42(b))

Yes, and the following <u>describes</u> any additional factors that will be used:

# The family contribution is determined for the family regardless of the number of children in care.

No

- 3.5.2 Is the sliding fee scale provided in the Attachment in response to question 3.5.1 used in <u>all</u> parts of the State? (658E(c)(3)(B))
  - Yes Yes
    - No, and other scale(s) and their effective date(s) are provided as Attachment \_\_\_\_.
- 3.5.3 The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: see below.

The Lead Agency must elect ONE of these options:

- ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.
- ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
- SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The following describes these families:

Connecticut uses the State Median Income level for eligibility and fee determinations. Only families receiving cash assistance and participate in an approved training program are exempt from a family contribution. 3.5.4 Does the Lead Agency have a policy that prohibits a child care provider from charging families any unsubsidized portion of the provider's normal fees (in addition to the contributions discussed in 3.5.1)? (§98.43(b)(3))



Yes. Please describe: No.

3.5.5 The following is an explanation of how the co-payments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))

All families with earnings are required to pay a range from 2% to 10% of their annual/monthly gross income. If there is more than one child, the family is not required to pay any additional fee. The required Connecticut co-payment follows national studies indicating the level families can pay at various income levels.

#### PART 4 PROCESSES WITH PARENTS

#### 4.1 Application Process / Parental Choice

- 4.1.1 The following describes the process for a family to apply for and receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a) through (e)). If the process varies for families based on eligibility category, for instance, TANF versus non-TANF, please describe. The description should include:
  - How parents are informed of the availability of child care services and about child care options
  - Where/how applications are made
  - Who makes the eligibility determination
  - How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4
  - Length of eligibility period including variations that relate to the services provided, e.g., through collaborations with Head Start or pre-kindergarten programs
  - Any steps the State has taken to reduce barriers to initial and continuing eligibility for child care subsidies

Parents (TANF and non-TANF) are informed about child care financial assistance by the Lead Agency regional office staff and other contracted entities. Informational brochures, direct conversation, phone discussion and strategies developed by community-based organizations serving similar clients, serve as the basic communication strategies. Families are informed about the Child Care INFOLINE service to discuss child care options and what constitutes good child care. All of the organizations identified in Section 2.1 inform their respective constituents, as appropriate.

Families who receive TANF are notified by the Lead Agency regional staff about the exceptions for individual penalties via the good cause provisions established in TANF policy as included in Attachment 4.4. Staff work with clients to explore the reason provided by the TANF client if a barrier is identified and work with the state's TANF employment contractor case management staff to address client participation, if possible. TANF clients are provided with a copy of their rights and responsibilities, which include reference to this also. The Lead Agency has worked closely with the new child care subsidy vendor, the states' TANF employment contractors, and the state Department of Labor to convene meetings at local sites to address client enrollment and continued enrollment for child care. The Lead Agency has appointed a staff person to address specific complaints and prioritize child care access for TANF clients. New work protocols have been reissued and shared among partnering agencies.

Applications are provided at various community and municipal settings and mailed to potential eligible families. Families are required to submit their applications, which include necessary verifications, by mail or schedule appointments when necessary. The Lead Agency's contractor for the Child Care Assistance Program (CCAP) completes eligibility determination. CCAP staff can travel to meet with families if necessary. Bilingual and bicultural staff assists where possible. Eligibility is primarily granted for six months or on a month-to-month basis, if warranted.

4.1.2 The following is a detailed description of how the State ensures that parents are informed about their ability to choose from among family and group home care, center-based care and in-home care including faith-based providers in each of these categories.

The Lead Agency contracts with United Way of Connecticut Child Care INFOLINE which is the statewide resource and referral agency to inform and counsel parents about choosing child care and provide community forums to parents and providers; development and distribution of educational brochures, videos, public service announcements; collaboration with other agencies identified in Section 2.1 and organizations that have similar target populations; coordination with statewide and local media; distribution of child care informational packets at the Lead Agency regional offices and the Connecticut Department of Labor, which is coordinating the state's welfare-to-work project. Child Care INFOLINE maintains a statewide data base, which contains information on, fees, capacity, hours of operations, etc. of child care centers, group home child care and family day care home providers.

#### 4.2 <u>Records of Parental Complaints</u>

The following is a detailed description of how the State maintains a record of substantiated parental complaints and how it makes the information regarding such parental complaints available to the public on request. (658E(c)(2)(C), \$98.32))

The Lead Agency's Office of Legal Counsel, Regulations and Administrative Hearings handles parental complaints concerning due process in the Child Care Assistance Program. The Lead Agency's contractor for the Child Care Assistance Program has designed a grievance/mediation process for parents and child care providers as a first step before a formal administrative hearing by the Lead Agency. Complaints concerning other components of the CCDF program are filed directly with the Lead Agency. The Lead Agency requires all contracted program components to maintain a file of complaints and report as necessary.

Complaints concerning licensed child care providers are reported to the either the state Department of Public Health (licensing issues such as staff ratios or illegal operation) or the state Department of Children and Families (abuse and neglect issues). Parents and providers are advised to contact those agencies for appropriate information.

#### 4.3 <u>Unlimited Access to Children in Child Care Settings</u>

The following is a detailed description of the procedures in effect in the State for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), \$98.31))

Connecticut state laws guarantee unlimited access for parents at all licensed child care settings, including those parents eligible for CCDF financial assistance. Child care settings that are exempt from licensing requirements are also informed that they must allow parents unlimited access to their children.

#### 4.4 <u>Criteria or Definitions Applied by TANF Agency to Determine Inability to Obtain</u> <u>Child Care</u>

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age.

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 Child Care 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. The TANF agency that established these criteria or definitions is: <u>Connecticut Department of Social Services</u>.

- "appropriate child care":
- "reasonable distance":
- "unsuitability of informal child care":
- "affordable child care arrangements":

#### See <u>Attachment 4.4.A</u>

#### PART 5 ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND AVAILABILITY OF CHILD CARE

#### 5.1 **Quality Earmarks and Set-Asides**

5.1.1 The Child Care and Development Fund provides earmarks for infant and toddler care and school-age care and resource and referral services as well as the special earmark for quality activities. The following describes the activities; identifies the entities providing the activities; and describes the expected results of the activities. For the infant and toddler earmark, the State must note in its description of the activities what is the maximum age of a child who may be served with such earmarked funds.

#### Infants and toddlers:

The Lead Agency will contract with state supported child care centers to provide comprehensive services to eligible families with infant/toddlers (age 0-under 3). The state supported centers work with the Lead Agency to meet the community child care needs for all children, including infant/toddlers.

**Resource and referral services**:

The Lead Agency will contract with the United Way of Connecticut's Child Care INFOLINE project, which provides statewide resource and referral services. This project provides consumer education, community seminars, direct counseling and education service for parents seeking child care assistance and also maintains a provider data base that includes information concerning fees, openings, etc. Staff develops and distributes relevant brochures and work with the Lead Agency to increase the child care capacity.

School-age child care

The Lead Agency will contract with state supported school-age child care programs to provide comprehensive services as recommended by the National After School Association. The state supported school-age programs work with the Lead Agency to meet the community child care needs for all children, including school-age children.

5.1.2 The law requires that not less than 4% of the CCDF be set aside for quality activities. (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51) The Lead Agency estimates that the following amount and percentage will be used for the quality activities (not including earmarked funds): <u>\$1,246,092</u> (4%)

5.1.3 Check either "Yes" or "No" for each activity listed to indicate the activities the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the special earmark for quality activities). (658D(b)(1)(D), 658E(c)(3)(B), §§98.13(a), 98.16(h))

		Yes	No
a.	Comprehensive consumer education	$\boxtimes$	
b.	Grants or loans to providers to assist in meeting State and local standards	$\boxtimes$	
c.	Monitoring compliance with licensing and regulatory requirements	$\boxtimes$	
d.	Professional development, including training, education, and technical assistance	$\boxtimes$	
e.	Improving salaries and other compensation for child care providers	$\boxtimes$	
f.	Activities in support of early language, literacy, pre- reading, and early math concepts development	$\boxtimes$	
g.	Activities to promote inclusive child care	$\boxtimes$	
h.	Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children		
i.	Other quality activities that increase parental choice, and improve the quality and availability of child care. (\$98.51(a)(1)  and  (2))	$\boxtimes$	

- 5.1.4 Describe each activity that is checked "Yes" above, identify the entity(ies) providing the activity and describe the expected results of the activity.
  - a. *comprehensive consumer education* includes a variety of strategies such as: funding the United Way of Connecticut Child Care INFOLINE which is the statewide resource and referral agency to counsel parents about choosing child care and provide community forums to parents and providers; development and distribution of educational brochures, videos, public service announcements; collaboration with other agencies identified in Section 2.1 and organizations that have similar target populations; coordination with statewide and local media; distribution of child care informational packets at the Lead Agency regional offices and the

Connecticut Department of Labor, which is coordinating the state's welfareto-work project.

- **b.** grants or loans to providers to assist in meeting State and local standards The Lead Agency coordinates the Child Care Facilities Loan Fund (CCFLF) that provides financing opportunities for child care facilities. The Lead Agency has delegated the administration for CCFLF to the Connecticut Health and Educational Facilities Authority (CHEFA). CHEFA administers three loan programs: 1. a tax-exempt bonding program for municipal and non-profit child care facilities for construction, renovation or expansion costs; 2. a loan guarantee program for capital and non-capital loans; and 3. a small revolving loan program for non-capital loans.
- c. monitoring of compliance with licensing and regulatory requirements The Lead Agency funds child care licensing and enforcement personnel at the state Department of Public Health (DPH).
- d. professional development, training and technical assistance The Lead Agency supports a variety of activities such as: the Connecticut Community-Technical Colleges Systems' *Connecticut Charts a Course* project, a comprehensive early caregiver career development system which includes a scholarship program for income eligible providers; a program targeted to kith and kin providers; a statewide Accreditation Facilitation Project; the University of Connecticut Cooperative Extension Systems' newsletter entitled, *All Children Considered*, which is distributed to all licensed and informal child care providers; the Wheeler Clinic training program in development issues; technical assistance to child care advocacy and member organizations.
- e. compensation for child care providers The Lead Agency provides compensation through scholarship assistance offered by the *Connecticut Charts a Course project* and supports compensation through its contracted child care center programs and its Child Care Assistance Program. The Lead Agency and the Connecticut Department of Labor support a child care apprenticeship program.
- f. early language, literacy and numeracy development see Section 5.2
- g. *inclusive child care* The Lead Agency was co-facilitator of the former Map to Inclusion project with the Connecticut Department of Mental Retardation. Curriculum was developed and integrated into of the Connecticut Charts a Course professional development system and is offered via the Training Program in Child Development. The subsidy program was also reviewed and special reimbursements are now offered for children with special needs.
- h. *Healthy Child Care America and other health activities* The Lead Agency has participated as a member of the Healthy Child Care Connecticut (HCCCT) initiative, which has now been replaced by the Early Childhood Partners project. This project is the Connecticut's response to the federal Maternal and Child Health's Early Childhood Comprehensive Systems Plan.
- i. other quality activities that increase parental choice, and improve the quality and availability of child care – the Lead Agency contracts with the United Way of **Connecticut Child Care INFOLINE project to conduct a recruitment** program to expand the number of licensed family child care providers. The Lead Agency is a partner with the State Department of Education to implement the state's School Readiness initiative that expands opportunities for three and four year olds in selected communities throughout Connecticut. The school readiness project also assists child care providers to enhance program services such as nutrition, health care, parent education, literacy, etc. The Lead Agency has begun a review of child care opportunities for homeless children and has begun to discuss the potential of designing a pilot program to analyze and address the issues of providing child care services to children between six weeks and 12 years of age, who reside in shelters for the homeless. Some sheltered children may have additional mental health needs resulting from being homeless and family situations, including family violence that they may have witnessed. The establishment of a mental health support system for both the child/family and child care staff is an integral part of the design discussion. The intent of the pilot program and its associated research is to demonstrate best practices for providing care to sheltered children. Program components will permit sufficient flexibility in funding and programmatic requirements to allow for attendance fluctuations, transportation needs and substitution of housing search and other shelter-related activities that assist families in establishing themselves in the community, for job search and work requirements.
- 5.1.5 Is any entity identified in sections 5.1.1 or 5.1.4 a non-governmental entity?
  - Yes, the following entities named in this part are non-governmental: Name: Type:
  - No.

Connecticut Child Health and Development Institute, United Way of Connecticut, Wheeler Clinic, Inc, Connecticut Community College System, Numerous non-profit child care and school-age centers, Connecticut Health and Educational Facilities Authority

5.2 *Good Start, Grow Smart* Planning and Development

This section of the Plan relates to the President's *Good Start, Grow Smart* initiative which is envisioned as a Federal-State partnership that creates linkages between CCDF, including funds set-aside for quality, and State public and private efforts to promote early learning. In this section, each Lead Agency is asked to assess its State's progress toward developing voluntary guidelines on language, literacy, pre-reading, and early math concepts and a plan for the education and training of child care providers. The third component of the President's *Good Start, Grow Smart* initiative, planning for coordination across at least four early childhood programs and funding streams, was addressed in Section 2.1.2.

- 5.2.1 **Status of Voluntary Guidelines for Early Learning**. Indicate which of the following best describes the current status of the State's efforts to develop researchbased early learning guidelines (content standards) regarding language, literacy, pre-reading, and early math concepts for three to five year-olds.
  - **Planning**. The State is planning for the development of early learning guidelines. Expected date of plan completion:
  - **Developing**. The State is in the process of developing early learning guidelines. Expected date of completion:
  - **Developed**. The State has approved the early learning guidelines, but has not yet developed or initiated an implementation plan. The early learning guidelines are included as Attachment \_\_\_\_
  - **Implementing**. In addition to having developed early learning guidelines, the State has embarked on implementation efforts that may include dissemination, training or embedding guidelines in the professional development system. The guidelines are **available on the following web site** - *See http://www.state.ct.us/sde/deps/Early/Preschool framework.pdf*
  - **Revising**. A State has previously developed early learning guidelines and is now revising those guidelines. The guidelines are included as Attachment \_\_\_\_\_
  - **Other** (describe):

Describe the progress made by the State in developing voluntary guidelines for early learning since the date of submission of the 2004-2005 State Plan.

Most recently, the Lead Agency has coordinated the work of early childhood providers, parents, researchers and field experts to develop an Early Learning Guidelines for infants and toddlers. This work will complement the work and guidance presented in the Preschool Curriculum Framework and Benchmarks for Children in Preschool Programs.

This process was designed to and succeeded in coordinating review and analysis of literature and expert testimony on the needs for caring for and educating children from birth to age three. This information is being consolidated into a document appropriate for its intended audience, and draft versions were critiqued by focus groups of early childhood educators, parents, child advocates, public and independent school staff, community childcare and education programs, professional associations, regional educational service centers and other state agencies.

If developed, are the guidelines aligned with K-12 content standards?



Please attach a copy of the guidelines. If the guidelines are available on the web, provide the appropriate Web site address:

The State Department of Education has incorporated the Preschool Curriculum Framework into the K-12 content standards. See

http://www.state.ct.us/sde/deps/Early/Preschool\_framework.pdf for a copy of Connecticut's Preschool Curriculum Framework, its guidelines for early learning.

See: http://www.state.ct.us/sde/dtl/curriculum/language arts/framework/ LatestLanguageArtsFramework2005.doc for evidence of the preschool curriculum guidelines incorporated into the K-12 content standards of language arts.

- Domains of Voluntary Guidelines for Early Learning. Do the guidelines ad-5.2.2 dress language, literacy, pre-reading, and early math concepts?
  - Yes IX No

Do the guidelines address domains not specifically included in Good Start, Grow Smart, such as social/emotional, cognitive, physical, health, creative arts, or other domains?

 $\square$ 

Yes. If yes, describe. No

The Connecticut Preschool Curriculum Framework includes the domains of: Personal and Social Development (pages 1-8), Physical Development (pages 9-14) and Creative Expression/Aesthetic Development (pages 27-33).

Have guidelines been developed for children in age groups not specifically included in *Good Start, Grow Smart* (children other than those aged three to five)?



Yes. If yes, describe. No

See response to 5.2.1 concerning recent work by the Lead Agency with infant-toddlers learning guidelines.

**5.2.3 Implementation of Voluntary Guidelines for Early Learning.** Describe the process the State used or expects to use in **implementing** its early learning guidelines. How are (or will) community, cultural, linguistic and individual variations as well as the diversity of child care settings (be) acknowledged in implementation? Materials developed to support implementation of the guidelines are available on the following web site:

See the "Early Childhood Education Initiative" at

<u>http://www.ctserc.org/calendar/EarlyChildhoodEd.shtml</u>, which provides the early childhood professional development schedule during 2004-2005. Each preschool professional development session is aligned with the Preschool Curriculum Framework and it is anticipated that there will be similarity in 2005-2006. The Preschool Curriculum Framework is embedded into the training series sessions that address topics such as cultural, linguistic and individual variations.

**5.2.4** Assessment of Voluntary Guidelines for Early Learning. As applicable, describe the State's plan for assessing the effectiveness and/or implementation of the guidelines. Written reports of these efforts are included as <u>Attachment 5.2.4.A.</u>

Connecticut's plan to assess the effectiveness and implementation of the *"Connecticut Preschool Curriculum Framework"*, involves assessments from several perspectives as reported below:

- On-site monitoring of the School Readiness Programs by staff from the Connecticut Department of Education and the Lead Agency. Staff will review documentation, conduct staff interviews and observe classrooms using the established School Readiness Monitoring Instrument.
  - Review of staff training in the standards
  - Review and classroom observation of the implementation of the curriculum as aligned with the standards
  - Review of monitoring and assessment processes and their alignment with the standards
  - Monitoring reports that require action plans when programs are found to be in non-compliance
- The annual guidelines required by participating School Readiness programs includes a section in which the programs report on their staff's training in the *"Connecticut Preschool Curriculum Framework"* and their

implementation in the classroom. Each classroom submits sample copies of their lesson plans that demonstrate their curriculum's alignment with the standards and programs report on the ongoing monitoring and assessment process for children and how it is aligned to the standards.

- Annual self evaluation and report "Connecticut School Readiness Preschool Program Evaluation System" (CSRPPES), includes specific indicators under Section 10 of the Quality Components, Annual Evaluation, that requires a review of the program's process, policies and implementation of the state standards including the monitoring system, assessment system and components of the required Individual Professional Development Plan. The documentation for the Quality Components are reviewed and rated by the School Readiness Liaison, who is the community's coordinator, and a parent for that program. Programs must complete action plans for any area that does not achieve a majority of the requirements.
- **5.2.5** State Plans for Professional Development. Indicate which of the following best describes the current status of the State's efforts to develop a professional development plan for early childhood providers that includes all the primary sectors: child care, Head Start, and public education.
  - Planning. Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts. See below
    - **Developing**. A plan is being drafted.
    - **Developed**. A plan has been written but has not yet been implemented.
      - **Implementing**. A plan has been written and is now in the process of being implemented.

**Other (describe)**:

Describe the progress made by the State in a plan for professional development since the date of submission of the 2004-2005 State Plan.

The Lead Agency delegates the professional career development for caregivers to the Connecticut Community Colleges' *Connecticut Charts a Course project. Connecticut Charts- A-Course*, the state's professional development system began planning in 1990 as a result of the CCDF. The system has been in various stages of planning, implementation and expansion since that time. The current system houses the following components:

- Career Ladder Recognizes the training and educational achievements of individuals who work with young children in all settings.
- Scholarships Funds income eligible child care providers working the field and wishing to pursue to training in early care and education.

- Career Counseling assists child care providers in the development of Individual Professional Development Plans
- Training Approval Board sets standards for and approves all CCAC trainers and training content.
- Training Articulation assures seamless articulation from entry level training to baccalaureate degrees in early childhood education.
- Accreditation Facilitation Projects supports quality improvement and the acquisition of national accreditation standards in center -based, school age and family child care, through 5 regional accreditation facilitation support projects and director training initiatives.

If your State has developed a plan for professional development, does the plan include:	Yes	No
A link to Early Learning Guidelines		$\square$
Continuum of training and education to form a career path		$\boxtimes$
Articulation from one type of training to the next		$\boxtimes$
Quality assurance through approval of trainers		$\boxtimes$
Quality assurance through approval of training content		$\boxtimes$
A system to track practitioners' training		$\boxtimes$
Assessment or evaluation of training effective- ness		$\boxtimes$
State Credentials – Please state for which roles (e.g. infant and toddler credential, <b>directors'</b> <b>credential</b> , etc.) <b>Head Teacher</b>		
Specialized strategies to reach family, friend and neighbor caregivers		$\square$

For each Yes response, reference the page(s) in the plan and briefly describe the Lead Agency's efforts.

For each No response, indicate whether the Lead Agency intends to incorporate these components.

# Yes, the Lead Agency and its designated professional development partner, will incorporate all components listed above.

Are the opportunities available:	Yes	No
----------------------------------	-----	----

Statewide	$\square$	
To Center-based Child Care Providers	$\boxtimes$	
To Group Home Providers	$\square$	
To Family Home Providers	$\square$	
To In-Home Providers	$\square$	
Other (describe):		

Describe how the plan addresses early language, literacy, pre-reading, and early math concepts development.

#### See next response

Are program or provider-level incentives offered to encourage provider training and education?

Yes. Describe, including any connections between the incentives and training relating to **early language**, **literacy**, **pre-reading and early math** concepts.

This is completed through a grant received by Connecticut Charts a Course (CCAC) from the State Department of Education's Early Childhood Educator Professional Development Grant. It is targeted to child care providers enrolled in the CCAC approved Training Program in Child Development. Caregivers can acquire 15 hours of early language and literacy training at no cost.

- No. If no, is there any plan to offer incentives to encourage provider training and education?

What are the expected **outcomes** of the State's professional development plan and efforts to improve the skills of child care providers? As applicable, how does (or will) the State assess the effectiveness of its plan and efforts? If so, how does (or will) the State use assessment to help shape its professional development plan and training/education for child care providers?

Recent legislation will establish an Early Childhood Education Cabinet. It is expected that the Cabinet will establish outcomes for children birth to five years of age, inclusive, in health, safety and learning. The Cabinet is expected to develop a multi-year interagency agreement to establish and implement an integrated school readiness plan, which shall include professional development.

# PART 6

# HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(Only the 50 States and the District of Columbia complete Part 6.)

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements. The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: http://nrc.uchsc.edu/.

# **6.1** <u>Health and Safety Requirements for Center-Based Providers</u> (658E(c)(2)(F), §§98.41, §98.16(j))

6.1.1 Are all <u>center-based</u> providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation?



Yes. Answer 6.1.2, skip 6.1.3, and go to 6.2.

No. Describe which center-based providers are exempt from licensing under State law and answer 6.1.2 and 6.1.3.

## Programs administered by a public school system or administered by a municipal agency or and located in a public school building; programs administered by a private school that is in compliance with the State Board of Education.

6.1.2 Have center licensing requirements as relates to staff-child ratios, group size, or staff training been modified since approval of the last State Plan? (§98.41(a)(2)&(3))



Yes, and the changes are as follows: No

- 6.1.3 For center-based care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)
  - Building and physical premises safety
  - Health and safety training

In the Child Care Assistance Program (CCAP), the parent furnishes the child care center with information on forms (Provider/Parent Agreement) received from the Lead Agency's contractor to administer CCAP. The provider completes and signs the Provider/Parent Agreement attesting to the following: local town code enforcement and minimum health and safety standards will be met, including the availability of a working telephone, fire extinguisher, and smoke alarm; the absence of a conviction for a felony, violent crime and/or a protective services record for staff; proof that all children in care are age appropriately immunized against diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, haemophilus influenza type B, hepatitis and varicella (chicken pox). The provider assures that their staffs meet similar staff training requirements for licensed child care centers.

# **6.2** <u>Health and Safety Requirements for Group Home Providers</u> (658E(c)(2)(F), §§98.41, 98.16(j))

- 6.2.1 Are all group home providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:
- Yes. Answer 6.2.2, skip 6.2.3, and go to 6.3.

No. Describe which group home providers are exempt from licensing under State law and answer 6.2.2 and 6.2.3.

6.2.2 Have group home licensing requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))



Yes, and the changes are as follows: No

- 6.2.3 For group home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)
  - Building and physical premises safety
  - Health and safety training

# Not Applicable

# **6.3** <u>Health and Safety Requirements for Family Providers</u> (658E(c)(2)(F), §§98.41, 98.16(j))

- 6.3.1 Are all <u>family</u> child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:
  - $\boxtimes$ 
    - Yes. Answer 6.3.2, skip 6.3.3, and go to 6.4.
    - No. Describe which family child care providers are exempt from licensing under State law and answer 6.3.2 and 6.3.3.
- 6.3.2 Have family child care provider requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (\$98.41(a)(2) & (3))



- Yes, and the changes are as follows: No
- 6.3.3 For family care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)
  - Building and physical premises safety
  - Health and safety training

# Not Applicable

# **6.4** <u>Health and Safety Requirements for In-Home Providers</u> (658E(c)(2)(F), §§98.41, 98.16(j))

6.4.1 Are all <u>in-home</u> child care providers paid with CCDF funds subject to licensing under the State law reflected in the NRCHSCC's compilation referenced above?



Yes. Answer 6.4.2, skip 6.4.3, and go to 6.5.

No. Describe which in-home child care providers are exempt from licensing under State law and answer 6.4.2 and 6.4.3.

- 1. neighbors or relatives who provide care in the home of the child
- 2. relatives (i.e. grandparent, aunt, uncle) of the child who provide care at the relatives' home

6.4.2 Have in-home health and safety requirements that relate to staff-child ratios, group size, or training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))



Yes, and the changes are as follows: No

- 6.4.3 For in-home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)
  - Building and physical premises safety
  - Health and safety training

In the Child Care Assistance Program (CCAP), the eligible parent must provide the in-home provider with information on the Provider/Parent Agreement form. Such provider must complete and sign the Provider/Parent Agreement attesting to the following:

- the provider is 18 years of age or older;
- local town code enforcement and minimum health and safety standards will be met, including the availability of a working telephone, fire extinguisher, and smoke alarm;
- the total number of children in care during;
- the absence of a conviction for a felony, violent crime and/or a protective services record for staff;
- all instances of suspected child abuse or neglect will be reported to the state child welfare agency;
- all children in care are age-appropriately immunized;
- the provider is not working another job during the hours the child is in care;
- changes in the site or location of care will be reported promptly to DSS;

In addition, DSS has an agreement with the Connecticut Department of Children and Families to conduct child abuse and neglect background checks for all unlicensed providers at the time of initial application and at least one time per year thereafter. State and federal criminal background checks are mandated for all nonrelative providers and for any provider suspected of having committed a sex crime or crime against persons in Connecticut or any other state. Information concerning criminal and child abuse/neglect background checks can be released to the parent to the extent necessary to provide the parent with the ability to make an informed choice about continuing child care with the provider.

## 6.5 Exemptions to Health and Safety Requirements

At Lead Agency option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care) may be exempted from health and safety requirements. (658P(4)(B), §98.41(a)(1)(ii)(A)) Indicate the Lead Agency's policy regarding these relative providers:

All relative providers are subject to the same requirements as described in sections 6.1 - 6.4 above, as appropriate; there are **no exemptions** for relatives or different requirements for them.

All relative providers are **exempt** from <u>all</u> health and safety requirements.

**Some or all** relative providers are subject to <u>different</u> health and safety requirements from those described in sections 6.1 - 6.4. The following describes those requirements and identifies the relatives they apply to:

#### 6.6 Enforcement of Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), \$\$98.40(a)(2), 98.41(d)) The following is a description of how health and safety requirements are effectively <u>enforced</u>:

- Are child care providers subject to <u>routine</u> unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?
  - Yes, and the following indicates the providers subject to routine unannounced visits and the frequency of those visits:

No

The Department of Public Health is the agency with statutory authority to enforce licensing requirements applicable to child day care centers, group day care homes and family day care homes in Connecticut.

At least every two years, unannounced site visits, inspections or investigations of licensed child day care centers or group day care homes are conducted by licensing enforcement specialists. New programs are inspected prior to initial licensure. Site visits are required prior to licensure for all family day care home applicants. Thereafter, the Department is required to make unannounced visits to "at least thirty three and one third percent" (33 1/3%) of the licensed family day care homes each year.

Any inspection conducted by the Department shall include an inspection for evident sources of lead poisoning. The Department investigates all complaints received on licensed child day care facilities and facilities alleged to be operating illegally without a license. The Department has statutory authority to refuse to license, suspend or revoke an existing license or take any other action against a license as set forth in regulations.

**DPH** provides information to parents and shares information concerning the results of enforcement visits when requested.

- Are child care providers subject to background checks?
  - Yes, and the following types of providers are subject to background checks (indicate when such checks are conducted):
  - No No

The Department of Public Health is the agency with statutory authority to assure that all licensed child care providers (child day centers, group day care homes and family day care homes) and appropriate staff receive appropriate background checks. Such providers must report any criminal conviction of the owner, conductor, operator, or maintainer of the facility or any person residing it the household or employed within.

The Lead Agency assures that providers exempt from licensing, specifically those providers who are not relatives and provide care in the child's home, receive appropriate background checks. In addition, the Lead Agency can require background checks to those providers exempt from licensing if there is a reason to believe that a conviction has occurred.

- Does the State require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist or other medical professional.)
  - Yes, and the following describes the State's reporting requirements and how such injuries are tracked (if applicable):

Yes - Family Day Care Homes must notify, within 24 hours, the Department of Public Health of: (1) the death of any enrolled child, if the child died while at the facility or if a child death occurs due to a contagious disease and, (2) when any injury to a child that occurs while the child is at the facility which results in the child being admitted to a hospital or the child's death.

# No No

No - Child Day Centers and Group Day Care Homes do not have specific reporting requirement unless it is deemed a report of abuse, neglect, or reportable disease and laboratory finding.

• Other methods used to ensure that health and safety requirements are effectively enforced:

## 6.7 <u>Exemptions from Immunization Requirements</u>

The State assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the State public health agency. (§98.41(a)(1))

The State exempts the following children from immunization (check all that apply):

Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles). Children who receive care in their own homes.

Children whose	narents object to	o immunization	on religious	grounds
Cilluren whose	parents object t		on rengious	grounus.

Children whose medical condition contraindicates immunization.

## APPENDIX 1 PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures that:

- upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- (2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- (3) in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract.
  (658E(c)(2)(A)(iii))
- (5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- (6) that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 106-554)

The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))
- (2) it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))
- (3) it will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices.
  (658E(c)(2)(D))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (5) there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

# APPENDIX 2 ELIGIBILITY AND PRIORITY TERMINOLOGY

For purposes of determining eligibility and priority for CCDF-funded child care services, lead agencies must define the following *italicized* terms. (658P, 658E(c)(3)(B))

- (1) attending (a job training or educational program; include minimum hours if applicable) – Enrollment in and regularly attending classes or compliance with the mandatory employment services requirements of the TANF program, including being available for work, reporting from interviews, attending group or individual orientation sessions and satisfactory participation in employment service activities.
- (2) *in loco parentis* A person with whom the child lives who is responsible for the dayto-day care and custody of the child when the child's parent by blood, marriage, adoption or court order is not performing such duties.
- (3) *job training and educational program -*
  - (a) A state day program accredited by the State Department of Education or the New England Association of Schools and Colleges, a general equivalency diploma program, or an adult education, technical high school or vocational secondary school program which shall lead to a high school level diploma or certificate; and
  - (b) An employment services activity approved by the Department of Social Services, the Department of Labor or the designee of either agency in accordance with the State Plan requirements for the TANF program, including but not limited to education activities below the post-secondary level, job skills training, job readiness activities, job development and placement activities, job search, work experience, drug or alcohol rehabilitation.
- (4) physical or mental incapacity (if the Lead Agency provides such services to children age 13 and older) See definition #7 Special Needs Child.
- (5) *protective services* a family service plan for safeguarding children who are considered by the state's child welfare service agency to be at risk of abuse or neglect.
- (6) *residing with* living with on a regular basis, including taking meals together and sleeping in the same home.
- (7) special needs child A child shall be considered to have special needs if the child's independence, self-sufficiency and safety is dependent on others and the child requires extra supervision, care, or assistance in the child care setting due to the following physical, mental, behavioral or emotional conditions, including but not limited to:
  - (a) a physical handicap or health impairment that causes chronic or acute health problems, such as a heart condition, orthopedic impairment, tuberculosis, asthma, epilepsy, cerebral palsy, leukemia or congenital abnormality that has been diagnosed by a physician;

- (b) mental retardation or autism spectrum disorder as diagnosed by a physician, pediatrician or psychologist;
- (c) a behavioral or emotional disturbance, maladjustment or developmental delay that causes the child to exhibit marked and inappropriate behaviors or characteristics over extended periods that has been diagnosed by a psychologist, psychiatrist or other clinically trained and state-certified mental health professional acting within his or her scope of practice;
- (d) a speech, language, vision or hearing impairment that has been diagnosed by a physician or state certified health care professional acting within his or her scope of practice; or
- (e) multiple handicaps that cause problems or interfere with the child's ability to function in the child care setting without extra care or supervision.
- (8) *very low income* Under 25 percent of the state's median income level.
- (9) working (include minimum hours if applicable) employment in one or more jobs as an employee of another individual, a partnership, corporation or self-employment, for which compensation is paid in the form of earned income.
- (10) Additional terminology related to conditions of eligibility or priority established by the Lead Agency:
  - (a) Actual charge The fee charged by the provider for all children attending the same program as determined in subsection (a) of section 17b-749-13 of the Regulations of Connecticut State Agencies;
  - (b) Accredited provider A child care provider whose program has earned national accreditation or who has completed approved course or degree work pursuant to subsection (d) of section17b-749-13 of the Regulations of Connecticut State Agencies;
  - (c) Certificate of payment The document issued by the CCAP administrator authorizing payment of CCAP assistance for a specific child to a specified child care provider;
  - (d) *Child care* The care and supervision of an eligible child for not more than twelve hours in a twenty-four hour day, excluding therapy, medical treatment and public or private school or academic programs;
  - (e) *Child care agreement* The form prescribed by the department used to collect and document information concerning provider eligibility and the agreement between the parent and the provider for the provision of child care services;
  - (f) CCAP administrator The unit designated by the department or an organization acting under contract with the department and acting under its direction that is responsible for the day-to-day administration of the CCAP program;
  - (g) Countable income Gross income less allowable deductions and excluded income;

- (h) *Earned income* Compensation for personal services, including but not limited to wages, salaries, commissions, bonuses and earnings from self-employment or contractual agreements;
- (i) *Eligible child* A child residing with the applicant who is under the age of thirteen or under the age of nineteen with special needs, who needs child care during the hours the parent is participating in employment or an approved employment services activity;
- (j) *Eligible provider* a licensed child care provider or child care provider who is exempt from licensing that meets the requirements specified in section 17b-749-12 of the Regulations of Connecticut State Agencies;
- (k) Employment services activity Education, training, job search or other activity pursued by a parent receiving TANF cash assistance which is designed to eliminate barriers to employment or increase earnings and which has been approved by the Department of Social Services, the state Department of Labor or the designee of either agency in accordance with the requirements of the TANF State Plan submitted by the Department pursuant to section 402 (a) of Public Law 104-193;
- (1) *Family* The group of individuals who live together in the same household whose circumstances are taken into consideration when determining eligibility for the CCAP program pursuant to section 17b-749-03 of the Regulations of Connecticut State Agencies;
- (m) Foster child a child placed in a foster home by the Connecticut Department of Children and Families for whom the parent receives foster care payments;
- (n) Licensed provider A day care center, group or family day care home licensed by the Department of Public Health to provide child day care services pursuant to section 19a-77 of the Connecticut General Statutes;
- (o) *Parent* A person with whom the child resides who is either the child's parent by blood, marriage, adoption or a spouse or former spouse of such individuals, a legal guardian, a caretaker relative under the cash assistance program or other person standing in loco parentis;
- (p) Self-employed Working for pay either full or part-time where the individual is not considered an employee of another entity for purposes of reporting social security tax or unemployment compensation;
- (q) *Teenage parent* A parent under the age of twenty;
- (r) Unlicensed child care provider Any provider operating legally in Connecticut that is exempt from licensing as a child day care services provider pursuant to subsection (b) of section 19a-77 of the Connecticut General Statutes.

# STATE PLAN FOR CONNECTICUT

# CHILD CARE AND DEVELOPMENT FUND

# ATTACHMENTS

# PART 2 DEVELOPING THE CHILD CARE PROGRAM

Section 2.1.A - Principles, Objectives and Strategies	
Section 2.1.B - Collaboration Efforts	
Section 2.2.A - Public Hearing Notice	
Section 2.2.B - Public Hearing Minutes	69

# PART 3 CHILD CARE SERVICES OFFERED

Section 3.2.A - Payment Rates	
Section 3.2.B - Rate Survey	
Section 3.2.C - Rate Survey Methodology Summary	
Section 3.2.D - Rationale for Equal Access Provision	
Section 3.3.2A - Income Guidelines	
Section 3.4.1A - Priority Eligibility Guidelines	
Section 3.4.3A - Wait List Guidelines	
Section 3.5.1A - Sliding Fee Schedule	

PART 4 PROCESSES WITH PARENTS

Section 4.4.A - TANF Definitions and Criteria	10	)(	9	)
---	----	----	---	---

PART 5 QUALITY AND AVAILABILITY SERVICES

Section 5.2.4.A – Assessment Evaluations	4
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pages

## SECTION 2.1.A CONNECTICUT PRINCIPLES, OBJECTIVES, STRATEGIES

# A. GUIDING PRINCIPLES

The guiding principles were adopted in 1990 when DSS completed the first CCDF federal plan. Numerous child care providers, advocates and other constituents participated in that process. While not a requirement for federal plan approval in 1990, we have always included this information in each respective submission, which supports this years' plan request. We added a principle that addressed workforce issues in our 2001 plan, a principle to support President Bush's *Good Start, Grow Smart* initiative in 2003 and this year have added a principle that addresses fraud and improper payments. In addition, we have incorporated Governor Rell's proposed Early Childhood Investment initiatives, as included in her February 2005 budget summary and subsequently adopted by the Connecticut General Assembly in the 2005 session.

The Connecticut Child Care and Early Education system will:

- offer families a broad range of accessible, affordable, comprehensive and quality child care services.
- allow families to choose the most appropriate child care service and be informed about how to locate and evaluate child care opportunities.
- allow for a smooth transition when families change child care services.
- provide appropriate services and training opportunities for caregivers, including caregivers exempt from licensing.
- ensure that caregivers maintain basic health and safety standards.
- ensure that all available federal funds are maximized and combined into one universal child care program to support targeted families and children.
- establish eligibility guidelines, which address income and child, care need.
- establish a payment system, which addresses family co-payments, provider payments differentiated by licensed and unlicensed caregivers, and age of child.
- ensure the coordination and on-going planning for all local, state and federal early childhood services and programs.
- establish various incentives and cost models to address caregiver turnover and compensation levels that will expand and retain the number of early education professionals.

- establish guidelines and content standards to promote early learning skills that will help children be ready for school.
- establish guidelines to assure that all state and federal funds are properly paid to those clients and child care providers, which meet the eligibility and payment requirements, and to establish preventive mechanisms to avoid improper payments from being made at all.

# **B. OBJECTIVES**

The following objectives support the federal CCDF goals, the Guiding Principles and Governor Rell's Early Childhood Investment initiatives adopted by the 2005 Connecticut General Assembly. The objectives remain essentially the same as included in the prior two-year CCDF plan except as they pertain to Governor Rell's Early Childhood Investment initiatives and the new federal initiative to address improper payments.

- increase child care capacity the establishment, expansion or recruitment of new child care facilities/providers and support for existing child care providers in order to expand the number of child care "arrangements" available to families seeking child care assistance. Increase additional *debt service financing* to expand the Child Care Facilities Loan Fund, which would potentially leverage \$40 million in construction costs to renovate or build new child, care facilities.
- increase financial assistance to families in order to make child care affordable the efficient provision of affordable child care subsidies and/or contracts to early childhood programs in order to assist low income working families and families transitioning off public assistance.
- enhance quality and school readiness services the establishment of critical support services to enhance developmentally appropriate educational opportunities for children and professional opportunities for caregivers. Specifically, the development of an appropriate kindergarten assessment to provide kindergarten teachers a more useful base for instructional development and to be used as a performance baseline against which to evaluate the No Child Left Behind and Connecticut Mastery Test performance at entry to 4<sup>th</sup> grade.
- **enhance health and safety provisions** the establishment of policies and support services to assure children have access to healthy and safe child care settings.
- **expand linkages and leveraging of available funds** the coordination of child care and early childhood education services among state agencies, state and local community organizations, businesses and child care providers.
- increase number of early care and education professionals and promote retention the establishment of incentive and cost models to increase and retain early education teachers in order to address the high turnover rate. Governor Rell new initiatives will train additional early care and education center staff about the state's preschool curricula

framework, expand workforce scholarships, and pilot new strategies to promote early care and education workforce retention with opportunities such as bonuses for early care and education providers.

- establish guidelines and standards that support early learning for children ages 0-5 the development, implementation and evaluation of standards on early literacy, language, pre-reading and numeracy skills that help children to succeed in preschool, kindergarten and beyond. Governor Rell's new initiative supports DSS Commissioner Wilson-Coker's recent work on early learning guidelines for infants and toddlers.
- **establish preventive mechanisms to avoid improper payments** and establish guidelines to assure that all state and federal funds are properly paid to those clients and child care providers, which meet the eligibility and payment requirements.
- ensure the coordination and on-going planning for all local, state and federal early childhood services and programs. The establishment of an "*Early Childhood Invest-ment Advisory Cabinet*" will create a point of common accountability for state-level strategic planning, service coordination and integration. The Cabinet will seek cross-agency policy and regulatory improvements, integrated fiscal planning and expenditure, performance outcomes, and strategic planning all in the service of the goal of getting all of Connecticut children to the kindergarten door healthy, eager to learn and ready for school success.

# C. STRATEGIES

DSS proposes the following strategies to address the service objectives:

# **Increase Child Care Capacity**

The state and federal welfare reform initiative will continue to require families with children to find employment or participate in employment activities. The supply of child care providers and/or safe, high quality child care spaces must continue to expand in order to meet this demand. Proposed strategies include:

- improve business community opportunities for sponsorship, marketing, consumer information, employer participation, administration and private subsidies of early care and education.
- continue to educate the business community about **tax credits** that can be accessed for establishing new child care facilities and subsidizing employee child care needs.
- coordinate with the Connecticut Department of Revenue Services to maximize **tax credits** for new construction or renovation.
- continue to coordinate the **Child Care Facilities Loan Fund** program to assist with the new construction, acquisition or expansion of child care facilities.

- expand links to local, state and federal **regulatory building**, zoning and land-use guidance.
- continue to convene caregiver recruitment sessions throughout the state to support and increase the number of licensed family day care home providers.
- increase the number of infant and toddler and school age spaces.
- coordinate with local municipal and regional public housing and economic development projects to include child care as a community development project and explore micro-enterprise and small business funding opportunities.
- educate cash assistance recipients about child care as a career opportunity and expand child care occupational training programs.
- expand linkages with Head Start and other early care and education programs to coordinate various funding streams that can finance full-day, full-year programs.
- expand programs and spaces for children under age 13 through the state's State Child Day Care Center Program and School Readiness programs.
- support training opportunities for providers in issues/care for special needs children.
- support kith and kin providers with necessary educational and training opportunities, materials and ensure linkages to the formal child care community.
- expand linkages with Schools of the 21<sup>st</sup> Century programs that provide services for school-age children.
- increase access & support of families requiring non-traditional hours care and early education (nights, week-ends).

#### **Increase Financial Assistance to Families**

The ability for families to afford the fees charged by caregivers is a major factor that continues to determine the families' participation and selection of certain caregivers.

Proposed strategies include:

- expand child care financial assistance opportunities for low-income working families with earnings up to 75% of the state median income level and with children under the age of 13 (under 19 if they have special needs).
- increase the number of **families transitioning from cash assistance to work** who use public funded child care including the Care 4 Kids Program, state-supported centers and school readiness programs.
- establish as a priority, **Jobs First Clients** as they transition off cash assistance, to help enable them to maintain employment.
- continue to administer a **school-age child care contract program** targeting available state and federal funds to eligible organizations that provide before and after school child care at school and community settings for working families earning less than 75% of the state median income level.
- continue to administer a child care center contract program directing available state and federal funds to eligible child care centers that provide infant/toddler, preschool and school age services. Activities funded by this initiative are designed to provide high quality, safe, age-appropriate environments and a full range of social, educational, recreational and nutritional services to children and support services to their families. Enrollment will be targeted to families earning less than 75% of the state median income level.
- encourage families to pursue child support.
- continue to partner with Connecticut Department of Transportation in availability of accessible and affordable transportation services to assist families in reaching, safe and appropriate child care services.
- continue to partner with the Connecticut Department of Education in the administration of the state's School Readiness program to selected communities.
- continue to review the Care 4 Kids application process and coordinate efforts with child care providers on topics such as time requirements, payment delays, provider risks with ineligible families.

## **Enhance Quality and School Readiness Services**

CCDF funds have supported quality initiatives since its inception in 1990 and currently supports several thousand Connecticut children (ages 13 and under) in comprehensive, quality early learning and school readiness programs.

- continue to provide consumer education and information materials that educate current and potential child care consumers
- improve data collection, research and information sharing
- continue to support the state's child care resource and referral program to provide the following services:
  - provide information through various medias to allow access by persons with low literacy skills or language barriers.
  - counseling and consumer information
  - data on the types of child care opportunities, fees, special service considerations, etc
  - technical assistance and information for child care providers
  - community education and collaboration activities
- continue to provide **technical support, education and training opportunities** before and after licensing, for new and existing child care providers with an emphasis on infant/toddler and school-age child care providers
- continue to establish strategies to provide training opportunities in Spanish or other languages if required.
- continue to establish strategies effectively to use the media to provide information and education to parents and child care professionals. Support collaborative efforts to enhance statewide communication.
- continue to support a **voluntary professional development system** for early caregivers.
- support mentoring opportunities.
- continue to support to the statewide program to assist caregivers to achieve accreditation status by appropriate national organizations.
- explore the development of **reimbursement rates** according to training, credentials or accreditation levels.
- continue to support quality enhancements for the priority school communities as defined in the state's school readiness legislation in collaboration with the State Department of Education.

- allow flexibility for partnerships with family day care home providers within School Readiness programs.
- continue to support a **newsletter** that is distributed to all child care providers, libraries, legislators, schools, etc. Support opportunities to establish and distribute the newsletter in Spanish.
- encourage use of electronic communications.
- continue to implement background checks for informal child care providers seeking approval to participate in the Care 4 Kids program in collaboration with the Departments of Public Safety and Children and Families.
- assist in development of a statewide registry for professionally licensed providers.
- continue to implement training and educational opportunities for **relative and other licenseexempt providers.**
- strive to attain minimum quality standards for all settings.
- provide information to provider groups and encourage information sharing through 'phone-tree' communications.
- review child care opportunities for homeless children and discuss the potential of designing a pilot program to analyze and address the issues of providing child care services to children between six weeks and 12 years of age, who reside in shelters for the homeless. Review the establishment of a mental health support system for both the child/family and child care staff as an integral part of the design discussion.

#### **Enhance Health and Safety Provisions**

DSS must assure that procedures are in effect to ensure that child care providers that provide services under the CCDF comply with all applicable state or local health and safety requirements.

- continue to fund **child care licensing personnel** at the Connecticut Department of Public Health (DPH) to monitor child care facilities.
- continue to work with the Departments of Public Safety (coordinate criminal background checks) and Children and Families (coordinate child abuse and neglect checks) for all child care providers and for providers exempt from licensing requirements.

- continue to implement health and safety provisions for all child care providers and for providers exempt from licensing requirements who apply for assistance from the Care 4 Kids Program.
- participate in efforts to improve the safety of 'grandfathered' facilities (exempt from current public health and safety building and zoning regulations) to meet the current health and safety guidelines and codes.
- continue to participate in discussions with the Connecticut Department of Public Health's maternal and child health professional staff concerning the state development of the Early Childhood Comprehensive Systems plan that will serve as the successor to the Healthy Child Care Connecticut project.
- expand opportunities for **medical and special needs** care for family day care homes and child care center providers.

# Expand Linkages and Leveraging of Available Funds

As the child care services lead agency, DSS is responsible for many coordination and planning activities.

- participate in the Governor Rell's Early Childhood Investment Advisory Cabinet.
- continue to coordinate efforts with sister state agencies, the Connecticut Head Start State Collaboration office, Head Start Directors Association, State Directors Forum, Connecticut After School Network, Connecticut Child Day Care Council, Child Care Legislative Task Force, Birth to Three Interagency Coordinating Council, Medicaid Managed Care and TANF Councils, Early Childhood Partners, child care provider memberships groups, Early Childhood Alliance, Connecticut Voices for Children, Connecticut Association for Human Services, etc. and programs such as: Born Learning, Parents As Teachers, Ready, Set, Grow, Success by Six, Discovery Communities, etc.
- continue strategic discussions on infant-toddler issues, including the Early Learning Guidelines community forums and outreach efforts.
- continue the work of the Early Childhood DataCONNections project, a joint project of the federal Child Care Bureau, DSS, the Packard Foundation and the Child Health and Development Institute of Connecticut. This project is exploring the data collection and research capacity needs for Connecticut, developing school readiness indicators and examining child care workforce issues.
- continue to review the **economic impact** of the child care industry, statewide and regionally.
- continue to review issues relating to the future **workforce** needs.

- continue to coordinate **recruitment efforts** with the United Way of Connecticut Child Care INFOLINE and the Department of Public Health child care licensing staff and with several state and local organizations to increase the supply of quality child care providers.
- continue to establish linkages with employment and training organizations and businesses to provide necessary supports for their employees seeking child care assistance.
- continue to develop strategies to link parents, family day care home providers and state and local agencies with early childhood programs for children with special needs, in collaboration with the Connecticut Department of Mental Retardation, Connecticut Department of Public Health and the Connecticut Department of Education Special Education Bureau, Birth to Three.
- continue to coordinate with the Department of Children and Families and other appropriate state and local agencies to create strategies around **family support** initiatives.
- continue to coordinate efforts with the various DSS units: Family Support (services to TANF eligible families), Child Support (encourage single mothers to seek financial assistance from the absent parent), Elderly Services (coordinate intergenerational programs and educate and train grandparents who are child care providers), Client Fraud (improper payments), Quality Control (review of payment and eligibility accuracy) and Medical Care Administration (coordinate activities that assure all children in child care have access to health care)
- review policies for grandparent guardianship and consider provisions for similar support to that which is provided to foster parents.

## Increase the Number of Early Care Workforce

From anecdotal and some limited study data, it is clear that Connecticut, like the nation as a whole, is experiencing significant turnover in child care staffing. We know that turnover results both from ''program hopping'' and from ''staff flight'' from the field altogether, but the extent of this phenomenon and the pattern of it are not so clear. Likewise, the causes may include depressed levels of compensation and benefits, working conditions, advancement opportunities and inadequate recruitment, along with many competing opportunities available in the larger economy, but the magnitude of those factors is unknown. We do know that the child care market cannot remedy the low wage scale for staff merely through family fees, but rather requires targeted, multiple funding mechanisms.

- continue to study the extent and nature of the turnover of child care staff in the state
- continue to research the credentials and pattern of compensation of caregivers including bonuses for higher training and early care and education.

- continue to examine mechanisms to supplement compensation and benefits for caregivers in connection with levels of professional development, qualifications and levels of responsibility.
- continue to examine apprenticeship and paid internship and volunteerism opportunities as they apply to the child care workforce.
- continue to study impacts of union vs. non-union issues, low wages, cost of education and training as they apply to recruitment and retention of child care workforce.

# **Establish Early Learning Guidelines**

The *Good Start, Grow Smart initiative,* as proposed by President Bush, is intended to create a state-federal partnership that creates linkages and coordinates services and funding levels among CCDF, other federal early care and education programs and state early care initiatives in order to promote early learning principles and school readiness. There is sufficient research underway throughout the United States to support this objective and Connecticut has already addressed much of this because of past state legislation and work completed by the Connecticut Departments of Education, Social Services and Public Health.

Whereas the *Good Start, Grow Smart* initiative has targeted preschool age children; Connecticut has also begun a process to establish **early learning guidelines for infants and toddlers**. Connecticut participated in the Child Care Bureau's national infant-toddler demonstration program and gained invaluable information. Our objective is to align the 0-3 guidelines with the current developed preschool learning guidelines, which are already aligned with the kindergarten thru 12 curriculum guidelines.

- continue to disseminate the *Preschool Curriculum Framework for Children in Preschool Programs* document and present workshops, as necessary, to discuss the content
- continue to encourage the use of the *Preschool Curriculum Framework for Children in Pre*school Programs document in Connecticut Department of Education funded School Readiness programs and encourage other early care programs to adopt it
- continue to disseminate the *Connecticut Preschool Assessment Framework* document for assessing preschool children and present workshops to early care programs in order to discuss the content, objectives and benefit to supporting early learning
- allow assessment tools and reporting tools appropriate to specific programs, but attain quality according to accepted standards.
- insure that curriculum, monitoring and framework language shall be appropriate for programs including but not limited to Head Start, Montessori, SDE School Readiness programs.

• continue to develop the early learning guideline for infants and toddlers

## **Improper Payments**

In response to President Bush's Management Agenda, the federal Child Care Bureau is interested in methods that could help states identify, measure and prevent errors in the administration of federal child care funds. The Child Care Bureau is exploring the potential for establishing a child care error rate as a measure of program efficiency under the CCDF program. As such the, *Erroneous Payments in Child Care Project* was created to produce recommendations for definitions of child care fraud and child care payment error, monitoring and administration, "best practices", technical assistance materials and data/reporting protocols. Connecticut uses the phrase "benefit errors" to describe improper payments that are either overpayments or underpayments. Underpayments occur when the parent does not receive all the benefits to which the family is entitled due to an administrative error. Overpayments occur when the amount paid exceeds the benefit that would have been issued if the payment were calculated correctly based on accurate information that was reported, verified and acted on in a timely manner.

- continue to monitor all child care program expenditures in various child care programs
- develop and implement surveys and case studies to determine common errors made by department, contractors, parents or providers that lead to improper payments
- continue to review existing procedures and develop preventive procedures that would avoid improper payments.

# SECTION 2.1.B COLLABORATION EFFORTS

#### **Connecticut Department of Education**

#### DSS and SDE:

- 1. Are represented on the Connecticut Birth to Three State Interagency Coordinating Council, which is forum for policy review and advocacy on issues regarding young children with disabilities.
- 2. Are represented on the Child Day Care Council, which is a forum for policy review and advocacy on child care issues.
- 3. Are represented on the Healthy Child Care Connecticut project, which is a forum for policy review and advocacy on health issues, including behavioral health, mental health and issues of child care for children with disabilities and other special needs.
- 4. Are represented on the Head Start Advisory Committee, which advises the Commissioner of Education on state Head Start funding and programming.
- 5. Are represented on an ad hoc forum of federal and state officials and providers to discuss Head Start, child care and education issues.
- 6. Are represented on the Board of Directors of the Connecticut Charts a Course project, which has developed and operates the state's professional development system for child care providers.
- 7. Jointly fund and administer the state School Readiness and Quality Enhancement grant programs for designated Connecticut communities.
- 8. Jointly fund training for child care providers through the Connecticut Charts a Course professional development system including activities to augment the statewide Accreditation Facilitation Project.
- 9. Develop model agreements between Head Start and local education agencies in collaboration with the Head Start Association and member agencies.
- 10. Produce necessary materials to support parents and providers to use in transitioning their children from preschool to school.
- 11. Develop programs to promote family involvement in School Readiness and other early care programs.
- 12. Develop and/or fund curricula for child care providers on a variety of issues.
- 13. Collaborate to support Family Resource Centers in designated Connecticut communities.

- 14. Collaborate to ensure young children with disabilities and special needs are provided equal access and equal benefit in child care programs.
- 15. Collaborate to develop, implement and evaluate training and technical assistance on issues related to serving young children with disabilities and special needs in child care.
- 16. Collaborate on the rules and procedures that apply to child care subsidy reimbursements and parent fees.
- 17. Collaborate in the implementation of the Preschool Curriculum Framework and Preschool Assessment Framework, the Connecticut system for a curriculum framework and child performance indicators.
- 18. Collaborate in the development of the early learning guidelines for infant/toddlers and the State Board of Education's position statement on Infants, Toddlers and Their Families.

# **Connecticut Department of Children and Families**

DSS and DCF have collaborated as follows:

- 1. DSS transfers child care funds to DCF to conduct child abuse/neglect background checks on informal child care providers seeking child care financial assistance.
- 2. Share information on pertinent department policies that may affect child care assistance for targeted populations and caregivers.
- 3. Establish protocols and report needs for sharing information on pertinent target groups such as foster and adoptive children.
- 4. Educate child care providers and parents regarding child abuse/neglect prevention and behavioral/mental health issues.
- 5. Supports training and education efforts in curriculum development for early childhood caregivers.
- 6. DSS and DCF are represented on the Connecticut Birth to Three Interagency Coordinating Council, which is a forum for policy review and advocacy on issues regarding young children with disabilities.
- 7. DSS and DCF are represented on the Child Day Care Council, which is a forum for policy review and advocacy on child care issues.
- 8. DSS and DCF are represented on the Early Childhood DataCONNections initiative, which is a forum for developing research capacity within state and higher education facilities.

- 9. DSS and DCF are represented on the Policy Academy on Homeless Families with Children, which is a workgroup that looks at addressing early care and education needs of sheltered children and children at risk of homelessness.
- 10. DSS provided child day centers as target sites for a DCF funded mental health intervention program that trained child care center teachers and provided direct services to enrolled families and children.

#### Connecticut Department of Public Health

DSS and DPH:

- 1. DSS transfers child care funds to DPH to support child care licensing and inspection staff.
- 2. DPH updates the database of licensed providers for Child Care INFOLINE, Connecticut's resource and referral project, funded by DSS.
- 3. DPH updates the database of licensed providers for the department's Child Care Assistance Program (CCAP) and allows CCAP to notify DPH when they learn about overcapacity and/or unlicensed operating situations
- 4. DPH notifies DSS of all license suspensions and revocations and regulatory violations from complaint investigations against child care providers upon request.
- 5. DPH expedites the licensing process for new programs funded through the Connecticut School Readiness project or the Child Care Facilities Loan Fund.
- 6. DSS and DPH educate informal providers regarding immunization issues.
- 7. DSS and DPH are represented on the Connecticut Birth to Three Interagency Coordinating Council, which is a forum for policy review and advocacy on issues regarding young children with disabilities.
- 8. DSS and DPH are represented on the Child Day Care Council, which is a forum for policy review and advocacy on child care issues.
- 9. DSS and DPH are represented on the Head Start-State Collaboration project, which has done extensive planning on issues regarding young children and families.
- 10. DSS participates on the DPH bio-terrorism planning initiative.
- 11. DSS and DPH collaborate on providing technical assistance to license applicants and licensees on workforce development, child care and regulatory issues through a variety of mechanisms.
- 12. DPH participates on the SDE After School Advisory Council, the DSS Infant-Toddler Initiative and the DCF Early Childhood Consultation Project.

## **Connecticut Department of Labor**

DSS and DOL:

- 1. Work together on an ongoing basis to examine programs and practices that serve families on public assistance producing recommendations regarding child care subsidy (CCAP) regulations, fine tuning client-centered assessments, encouraging parent participation on planning advisory bodies, and participating on committees to plan operational changes to the employment and training programs in response to state legislative initiatives.
- 2. Participate in monthly meetings with representatives from Workforce Investment Boards and their contracted service providers to clarify CCAP application procedures and trouble-shoot issues regarding child care access for families participating in job related activities.
- 3. Provide opportunities for CCAP staff to meet and share program information with groups of public assistance families interested in applying for child care assistance.
- 4. Share staff contact lists with Workforce Investment Boards, their service providers and CCAP staff to facilitate CCAP case processing and problem resolution.
- 5. Provide training to DOL and Workforce Investment Board staff regarding how families on public assistance can access and use CCAP.
- 6. Distribute printed materials, brochures and videos on choosing quality child care and on how to contact and apply for CCAP for use by DOL staff and Workforce Investment Board staff and program participants.
- 7. Share data elements between the DOL Case Management System and the CCAP Child Care Management System.
- 8. Implement a Child Care Apprenticeship Program with the state early child care development system – Connecticut Charts a Course with selected child care centers.
- 9. Continue to discuss strategies for addressing child care provider work force and wage issues.
- 10. Continue to develop training opportunities through DOL systems for people interested in child care careers.

## **Connecticut Department of Mental Retardation**

## DSS and DMR:

1. Are represented on the Connecticut Birth to Three Interagency Coordinating Council and Healthy Child Care Connecticut project, which provides for forums for policy review and advocacy on various issues regarding young children with special needs and caregivers to support such children.

2. Participate on the Infant-Toddler Early Learning Guidelines workgroup to develop curriculum guidelines that are aligned with existing preschool and K-12 guidelines.

#### **Connecticut Department of Social Services - other units**

#### DSS Other Units:

- 1. Continued to have outreach liaisons work with various elderly groups in the community to share information with grandparents raising grandchildren on making child care choices and to assist them with the CCAP application process.
- 2. Participated in the Grandparents As Parents Support (GAPS) Network monthly meetings to disseminate CCAP program information and to hear the concerns of the state's elderly population about the program in order to better address the needs of this population.
- 3. Prepared and distributed printed program materials at community functions targeted at relative care givers, grandparents and elderly groups.
- 4. Provided a bridge between the CCAP program and the Department's Bureau of Child Support Enforcement (BCSE) to aid caretaker relatives and grandparents in obtaining the services of BCSE.
- 5. Coordinated efforts with DSS to ensure that elderly child care providers are capable of providing safe and appropriate care to children and that they are informed of the state services available through the Department.
- 6. Established regular contacts with the Department's regional offices to share program and application information and materials with staff and with families receiving public assistance.
- 7. Provided training and technical assistance to Department staff on the CCAP regulations and the use of the CCAP database to facilitate service delivery to families on public assistance.
- 8. Established and maintained a referral process to expedite the resolution of individual CCAP case issues for families on public assistance. The process included tracking the issues and providing clarification and training as necessary.
- 9. Initiated fraud pilots with Client Fraud and Recoveries Unit to support the national CCDF objective concerning improper payments.
- 10. Maintained work protocols with Administrative Hearings' staff to review all formal hearings requested by clients.
## **SECTION 2.2.A - PUBLIC HEARING NOTICE**

#### CHILD CARE SERVICES IN CONNECTICUT - PUBLIC HEARINGS

The Connecticut Department of Social Services (DSS) Child Care Team, in collaboration with the State Child Day Care Council, the Departments of Public Health and Education and five community child care agencies, is convening five public hearings to provide Connecticut residents an opportunity to comment on child care services in Connecticut. DSS must prepare the state's Child Care Plan to access federal funds. The plan must be submitted to Washington, D.C. by July 1, 2005. Your participation in this process is welcomed. Please share this schedule with others and encourage their involvement.

The draft plan will be available after May 1, 2005 on the DSS web site http://www.dss.state.ct.us/ccare/index.htm. Go to Publications and click on *Connecticut Draft Federal Plan 2005-2007.* Use the **Child Care Comment** Form (under Contact Us, just below Publications) to submit comments.

NORWALK	Tuesday, May, 10, 2005	5:30 – 7:30 PM	<b>Norwalk City Hall</b> Community Room 125 East Avenue, Norwalk	Shari Konn-Andrade <sup></sup> (211 Child Care Infoline) 203-551-2923		
WATERBURY	Wednesday, May 11, 2005	5:30 – 7:30 PM	New Opportunities, Inc. Auditorium 232 N. Elm Street, Waterbury	Dona Ditrio** (New Opportunities, Inc.) 203-759-0841		
NEW HAVEN	Monday, May, 16, 2005	5:30 – 7:30 PM	Connecticut Charts-A-Course Conference Room 495 Blake Street, New Haven	Darlene Ragozzine** (Connecticut Charts-A-Course) 203-397-4036		
HARTFORD	Tuesday, May 17, 2005	5:30 – 7:30 PM	Mount Olive Child Development Center 30 Battles Street, Hartford	Charlotte Martino** (Mount Olive) 860-549-4380 Judith Goldfarb** (Htfd Area Child Care Collaborative) 860-241-0411		
HAMPTON	Monday, May 23, 2005	5:30 – 7:30 PM	EASTCONN 376 Hartford Turnpike (Route 6) Hampton	Elizabeth Aschenbrenner** (EASTCONN: <u>www.eastconn.org</u> ) 860-455-0707, Ext. 3005		

<sup>\* -</sup> The DSS Child Care Team is prepared to answer questions concerning this information. Reach them by calling in-state toll-free 1-800-811-6141 and press 6 at any time during the message to be connected or (860) 424-5598 from within the local calling area or from out of state.

<sup>\* -</sup> Local host to contact for directions and other related information.

# SECTION 2.2.B PUBLIC HEARING MINUTES

Five (5) Public Hearings were held across the state in May of 2005. The following pages are the minutes of the public hearings as submitted by the Child Day Care Council.

The Meetings were held in the followings locations as shown in the minutes.

May 10, 2005, 5:30 – 7:30 PM in Norwalk, Connecticut May 11, 2005, 5:30 – 7:30 PM in Waterbury, Connecticut May 16, 2005, 5:30 – 7:30 PM in New Haven, Connecticut May 17, 2005, 5:30 – 7:30 PM in Hartford, Connecticut May 23, 2005, 5:30 – 7:30 PM in Hampton, Connecticut

Approximately one hundred (100) people participated in the public hearing process. They represented child day care centers, family day care homes, parents, provider associations and committees, child advocates, local community programs & interests, students in Early Care and education training, state officials from the Departments of Public Health and Social Service, and others.

# Connecticut Department of Social Services and Child Day Care Council Child Care Services - Public Hearing Tuesday, May 10, 2005 - Norwalk

Recommendations:

Coordinate requirements for publicly funded programs to ensure comparability and access to quality preschool services

Explore the licensing of early care and education staff

Coordinate the efforts of the proposed Cabinet with the local School Readiness Councils and the Child Care Council

Increase financial resources to support kith and kin outreach and education efforts and identify potential homes to become licensed family home providers.

Examine the Care 4 Kids income guidelines to see how better to meet the needs of families and increase communication with the family's identified provider to facilitate Care 4 Kids enrollment

dditrio

# Connecticut Department of Social Services and Child Day Care Council Child Care Services - Public Hearing Wednesday, May 11, 2005 - Waterbury

Public Hearing May 11, 2005

Waterbury, Connecticut

# **Re: Child Care and Development Fund**

Child Day Care Council Members Present: Donna Ditrio, Sonya Lewis and Liz Brown

Recommendations to Enhance Early Childhood System:

- More resources for Family Day Care Providers in the State Plan, especially funds to continue the trainings offered by the Hispanic Association of Family Day Care Providers.
- Enhanced compensation for Family Day Care Providers commensurate with educational attainment.
- More linkage of School Readiness grant funds and Family Day Care Providers, allowing more flexibility for partnerships among local providers.
- Have as a state goal a more comprehensive system of early care and education that does not create disparities among types of providers.
- Require representation from Child Day Care Council on the proposed new Cabinet.
- Include in the Plan resources and opportunity to meet the unmet needs of families for child care. There are only 450 licensed slots in Waterbury.
- Include more money for before and after school in the Plan.

Submitted by: Elizabeth Brown, State of Connecticut, General Assembly, Commission on Children

# Connecticut Department of Social Services and Child Day Care Council Child Care Services - Public Hearing Monday, May 16, 2005 - New Haven

Testimony Sue Anderson Pg 10 Does not think that increase capacity necessarily means Increased quality Retain staff cannot happen without Increased wages (p 11)

Ronna Steller Wages issues Mention the need for quality infant toddler care and \$\$\$should go toward that Care 4 kids funds have not been consistent. To the extent that it can be made a consistent amount

Sue Sponheimer

Applauds early learning guidelines. Concern that the only guidelines that are mentioned a re ELG s no mention of Head Start framework and assessment. Would like to see note that Head Start framework and assess can be used also for state programs.

Peggy Freidenfelt P 16 and 17 infant toddler issues. Early Head Start needs support for assessment and training

Nancy Blackwell Todd Challenge with care4 KIDS notification when it changed a couple of years ago made the waiting period longer difficult for providers.

Helene Figueroa

Applauds the bulk of money going to subsidies. Up to 75% hopes will happen Market rate does not establish parody or equal access. Allocation of \$\$ may not the support strategies

## Sue Wilson

CHDI is a member of the ECE Alliance that has pushed for increased level of funding for Care 4 kids. Also for the support of building the infrastructure and those elements that will help improve quality. Thinks that it is reflected in the plan but needs to continue to be a theme with other state \$\$\$.

## Gloria Hayes

Not enough \$\$\$ to do what they need to do for children and families. In particular the training and keeping of staff and meeting the new NAEYC accreditation standards and paying staff that

have higher credentials. The proposed increased reimbursement rate is not enough to make this happen. Serous issue for everyone who is working in the DSS system.

# Adeline Gillich

Agrees with Gloria Hayes and thinks that is why UPK is on the table to standardize the field. What is going to happen to child care certificates when there is UPK

# DSS response:

Federal government only asks for how you are going to spend the \$\$\$ that we give you (p20) Plan is DSS effort to look e other to promote bigger picture, expand the document to give more information on how the agency has collaborated and worked with other partners which is why there may not be \$\$\$ always attached.

Questions

1.

Gloria Hayes

Q. When will market rate survey be finished?

A. End of month will determine who payment rte should be for children will not impact fee schedule

- Q. Then how will hole in funding addressed if fee schedule is not adjusted?
- A. Has chosen not to do it yet but the commissioner could choose to do it
- 2
- Q. Change in 50% eligibility?
- A. If there is not change by legislature will probably keep it.

Sue Wilson

3.

Q. Are rate for kids still set at 60% percentile?

A. Yes

Comment SW would like the rate to be 75%

Helene Figueroa

4.

Q. Page 5 Use of funds

A. The way it is written is just federal law and assurances funds

Nancy Blackwell Todd

5.

Q. Concern is parent fee?

A. Would prefer a uniform fee schedule would result in a loss of \$\$

Helene Figueroa

6.

Q. Can a provider use a sectarian provider and get Care 4 kids? (p3)

A. Yes right out of regs.

Sue Wilson

7.

Q. Anything in plan re I/T and decline in family child care?

A. Gives Info-line some \$\$\$ for recruit and CCAC for FCC, but yes agrees as a dept they have not made it stand out anymore than others and nothing in the funding strategies that stands out. Point well taken not a legislative issue either.

Comment by Gloria Hayes. Biggest waiting list is for 2 years old.

Nancy Blackwell Todd Just the opposite waiting list. 8. CHEFA funding, can FCC apply? A. Yes

Adeline

9.

Q Are you monitoring the use of the Preschool Curriculum framework and is it required? A. No mandate but encourage its use if you are state funded SR. If you question this you should clarify by asking SDE.

Comment Susan Sponheimer, there is an exemption if you are HS you can use their outcome measures.

Recorder Darlene C. Ragozzine

# Connecticut Department of Social Services and Child Day Care Council Child Care Services - Public Hearing Tuesday, May 17, 2005 - Hartford

Child Care Services in Connecticut - Public Hearing Hartford – Mount Olive Child Development Center, 30 Battles St., Hartford, Connecticut May 17, 2005, 5:30 – 7:30 PM

# Attendance:

27 people were in attendance with representation from the following:

5 Center Based Providers; Family Day Care Home (FDCH) Providers; Parents4 Child Advocacy Organizations; 11 Connecticut Training Center Students and 1 ECE Instructor;1 Public Official; 2 Connecticut DPH; 2 Connecticut DSS

Charlotte Martino, Mt. Olive CDC; Judy Goldfarb, HACCC; Peg Oliveira, Connecticut Voices; Jen Vickery, Connecticut Voices, RSG; Martha Mason, City of Hartford Day Care; Renee Hamilton-Jones, City of Hartford Day Care; Bonnie Lebron, City of Hartford Day Care; Theresa Robinson, YWCA; Karen Swam, Connecticut After School Network; Julie Watson, Capital Workforce; Ken Green; Dr. Kathy Lombardo, Connecticut Training Center; Students from CTC - Gloria Gould, Brittney Peterson, Chakyrie Lavender, Teddie Washington, Rosa Camadno, Maria Santona, Michelle Snell, Brandy Weaver, Monique Painey, Domais Valazquez and Charmin Blake; Peggy Friedenfelt, DPH; Julie Boscarino, DPH; Peter Palermino, DSS; and Julie Bisi, DSS.

## Introductions & Overview:

The meeting started at 5:30 PM. Charlotte Martino, Director of Mount Olive CDC and Judy Goldfarb, Hartford Area Child Care Collaborative welcomed everyone to the Hartford meeting.

Peter Palermino, Director, Department of Social Services Child Care Team on behalf of Commissioner Wilson-Coker and Governor Rell, thanked everyone for attending. He gave an overview of the public hearing process regarding child care needs in Connecticut.

No written testimony was submitted. Public testimony commenced.

Peg Olivera, Connecticut Voices for Children described the work of the Early Childhood Alliance – a group of 30 plus organizations focused on helping children to enter Kindergarten healthy, eager to learn, and ready for school success. She explained Ready, Set, Grow - a United Way and Community Foundation of Greater New Haven program. Ready, Set, Grow is a pilot project in New Haven to raise awareness and increase early childhood "friends." There are 8,000 births in New Haven County each year and 40,000 in Connecticut. The program is designed similar to the Do Not Call list where "friends" are established for each child born to build awareness of early childhood issues and to help ensure that all children enter kindergarten ready to learn. Petitions were made available.

In response to a question as to what was meant by "healthy," Peg Olivera explained that kids be prepared for the demands of kindergarten, that mothers receive prenatal care, and children receive health care check ups & vaccinations, and are healthy, awake and well fed.

Julie Watson from the Capital Region/North Central Regional Workforce Investment Board discussed the needs of the Jobs First clients. Access to affordable child care in the location and during the hours needed is a major barrier for securing employment. There is a great need for Infant and Toddler care and for children with special needs. Many of the jobs that are available in the region are in the service industry requiring work on nights and weekends. Ms. Watson supported expanding child care capacity and funding for costs for school age programs. Information regarding all programs needs to be simple to understand and complete. She asked that community liaisons be available to visit job center sites. She stated that many providers are requiring a deposit to hold a child day care slot while a parent waits for eligibility determination for Care for Kids and that the cost of the deposit is very difficult for these families to cover. Many Jobs First participants have missed required trainings and study programs because they were unable to find child care. She expressed concern for the needs of clients as they leave the cash assistance program, and recommended that they be considered a priority for child care assistance to help them maintain their employment.

Dr. Kathy Lombardo an Early Care and Education instructor at the Connecticut Training Center had her class in attendance and discussed the difficulties with students pursuing a careers in early childhood education and development because of the high cost of education and training and the low wages paid in this field. She recommended the creation of a loan forgiveness program for early childhood educators.

Peter Palermino invited additional questions and comments. Questions, comments and issues were as follows:

Judy Goldfarb stated that providers have reported delays in the Care for Kids system that was said to be due to a computer glitch and impacted parents waiting for eligibility, causing the loss of jobs, and delays in payments to providers. Peter Palermino asked that delays be brought to his attention so that he address the issue(s). Care for Kids is working on expediting the application process. During the move the computers were only down on the Friday and back up and running on the following Monday. There was discussion regarding the time requirements and the need for completed application information and back-up documentation.

If a parent is not awarded Care for Kids subsidy and the provider already provided care for 30 to 45 days and does not receive payment – it affects the providers livelihood. The providers are taking a risk by providing care prior to assurance of payment by the family.

Approximately 10,000 clients are funded through the TANF Block Grant. Connecticut Department of Labor and five regional Work Force Investment Board provide case management services to assist individuals in seeking and securing employment. Peter Palermino explained that Jobs First families are a priority for Child Care funding. Priorities and access are determined according to the availability of funding. Restrictions allow access to assistance by the lowest income working families and Jobs First participants.

A question was raised as to why there has been a drop in enrollment. There was discussion regarding marketing, sponsorship, consumer information and education, administration employer participation, private subsidies, and tax benefits.

A question was raised about the potential for a pre-approval process and/or tracking process for providers to work with their families and have a better understanding of if the families will be eligible for Care for Kids, and help parents to complete the application, fill in details, mail it in and finish the process. There was discussion regarding the complexity of the application and literacy skill issues.

Karen Swam from the After School Care Network discussed the program goals and objectives for advocacy, training and support of providers and parents of kids K - 12.

There was discussion regarding private sector resources, legislative leadership awareness, the need for enrichment activities and out of school activities (before, after, summer and weekends)

The CTC Students stated that people need access to safe child care. Parents are fearful to leave their child with a stranger. In many cases too much time is involved in transportation. Care for children with special needs or medical needs (such as Asthma, Diabetes, Autism, or use of feed-ing tubes) is difficult to find. Birth to Three program, CDA training and additional courses for medical needs were discussed. In the past when the budget allowed, DSS had funded UCONN to provide curriculum & training to caregivers regarding children with special needs. Hartford School Readiness programs require 2 hours of special needs training.

There was discussion regarding promotion of child care and establishment of family day care homes for Jobs First clients. It was stated that it is difficult to promote child care as a career because the wages and benefits are so low and additional work and costs required to establish a home business are high. Rhode Island's FDCH state supported health care benefits were mentioned.

Facility safety was discussed. Issues regarding fire codes, State licensing, inspections and allowance for centers that are "grandfathered" into to building, zoning and health and safety codes were discussed. Concerns were raised regarding asbestos, lead based paint, evacuation plans and routes, sprinkler systems, etc. Child Care facilities are required to post hotline numbers and health complaint procedures. In response to a question, Peter Palermino stated that the Care for Kids program is on track for expenditures next year. Reimbursement rates and costs of care will factor into the budget process.

A question as to the expiration and renewal process for CDAs after 3 years was raised. There is not a notification process but there is a fee and a requirement to have 60 hours of continuing education. Potential pay bonuses are being established for different levels of certification and training. A suggestion that a paid work study program be offered to students in child development to assist them while they complete their required on the job training hours (CTC – requires 700 hours – 22.5 per week).

Additional comments and testimony were invited via email. The public hearing was closed and the meeting adjourned at 7:30 PM.

# Connecticut Department of Social Services and Child Day Care Council Child Care Services - Public Hearing Monday, May 23, 2005 – EASTCONN, Hampton, Connecticut

Summary of the Public Hearing, DSS Child Care and Development Fund Plan

Attendance: Claudette Beaulieu, Deputy Commissioner, DSS; Peter Palermino, DSS; Julie Bisi, DSS; Devon Conover, DPH; E.A. Aschenbrenner, EASTCONN; Debra Stipe, EASTCONN; Mary Lou Underwood, TVCCA; Debbi Poirier, TVCCA; Michalene Bedard, Windham-Willimantic Child Care; Kimberly Lewendon, New Heights Child Development Center; Cindy Torrance, EASTCONN Head Start; Pam Wheeler, Community Children's Center.

### Format: Informal discussion

Peter Palermino presented an overview of the Child Care and Development Fund State Plan and the role of the Child Day Care Council.

### **Issues raised:**

Use of DSS state funds vs. federal funds. Plan does not talk about state dollars. Legislature determines how child care funds are spent.

Parental choice vs. investing only in licensed child day care settings. Impact of quality child care programs on child development vs. income enhancement (Care 4 Kids). Care 4 Kids primary focus has been on supporting parents at work. School Readiness expands beyond a work focus to early childhood development.

Enhancing qualifications for staff in licensed child day care programs recommended. Work of HCCCT and Child Day Care Council to change regulations for child day care centers discussed.

Difficulties in coordinating licensing and local requirements in opening a new child day care center. Communication with DPH was helpful. Suggestion made a state level body to support development and maintenance of child care programs with contacts with potential funders and consultative network.

Disparity in funding DSS slots in state funded centers vs. School Readiness.

All programs receiving school readiness funding should be required to be licensed (vs. license exempt). School Readiness Councils could make that a local requirement. Role of DSS / SDE policy discussed. Disparity in requiring the use of the Preschool Curricular Goals and Benchmarks and preschool assessment in DSS funded centers vs. School Readiness programs. How to mandate when reimbursement levels not keeping pace. Need to move toward common statutory language.

Child Support requirements as a barrier for families on Care 4 Kids. Recommendation for a step down from a formal child support application requirement.

Communication with Care 4 Kids caseworkers is difficult. Need e-mail. Pilot to improve Care 4 Kids application processing discussed.

Special license plates to support early childhood education.

Need for more infant / toddler care in the Northeast region.

Role and impact of employers on child care. Sub base and casino are important employers in Eastern Connecticut. Families need support.

# SECTION 3.2.A - PAYMENT RATES Care 4 Kids



#### (Connecticut's Child Care Assistance Program) WEEKLY PROVIDER REIMBURSEMENT RATES EFFECTIVE: January <u>1</u>, 2002

	i Beili Bi Vallaaly	1,2002	-		22	Allorcidole
Full-Time Plus Care - 51 to 65 ho	ours/week	Eastern*	North Cen- tral*	Northwest*	South Cen- tral*	Southwest*
Child Care Centers or Group	Infant/Toddler	229	254	267	280	304
Child Care Homes or School	Pre-School	182	201	212	222	241
Operated Programs	School-Age	162	180	189	199	215
	Infant/Toddler	175	194	204	214	232
Family Child Care Homes	Pre-School	176	195	205	215	233
-	School-Age	162	180	189	199	215
Care by a Relative <i>or</i> Care in	Infant/Toddler	116	116	116	116	116
the Child's Home <i>or</i> Recrea-	Pre-School	116	116	116	116	116
tional Programs	School-Age	116	116	116	116	116
	<u> </u>					
Full-Time Care - 35 to 50 hours	/week	Eastern*	North Cen- tral*	Northwest*	South Cen- tral*	Southwest*
Child Care Centers or Group	Infant/Toddler	171	189	199	209	227
Child Care Homes <i>or</i> School	Pre-School	135	150	158	165	179
Operated Programs	School-Age	122	135	142	149	162
	Infant/Toddler	131	145	152	160	173
Family Child Care Homes	Pre-School	131	145	152	160	173
	School-Age	122	135	142	149	162
Care by a Relative <i>or</i> Care in	Infant/Toddler	89	89	89	89	89
the Child's Home <i>or</i> Recrea-	Pre-School	89	89	89	89	89
tional Programs	School-Age	89	89	89	89	89
		<b>- - - +</b>	North Cen-		South Cen-	
Half-Time Care - 16 to 34 hours		Eastern*	tral*	Northwest*	tral*	Southwest*
Child Care Centers <i>or</i> Group Child Care Homes <i>or</i> School	Infant/Toddler	116	129	135	142	154
Operated Programs	Pre-School	93	103	109	114	124
operated nograms	School-Age	80	89	94	99	107
	Infant/Toddler	89	99	104	109	118
Family Child Care Homes	Pre-School	90	100	105	110	120
	School-Age	80	89	94	99	107
Care by a Relative <i>or</i> Care in	Infant/Toddler	53	53	53	53	53
the Child's Home <i>or</i> Recrea- tional Programs	Pre-School	53	53	53	53	53
	School-Age	53	53	53	53	53
Quarter Time Care 1 to 15 hou	m (wook	Fostorp*	North Cen-	Northwort*	South Cen-	Coutburget*
Quarter-Time Care - 1 to 15 hou		Eastern*	tral*	Northwest*	tral*	Southwest*
		1		( )	74	
	Infant/Toddler	58	64	68	71	77
Child Care Homes <i>or</i> School	Infant/Toddler Pre-School	58 47	52	54	57	62
Child Care Homes <i>or</i> School	Infant/Toddler Pre-School School-Age	58 47 40	52 45	54 47	57 49	62 53
Operated Programs	Infant/Toddler Pre-School School-Age Infant/Toddler	58 47 40 44	52 45 49	54 47 52	57 49 54	62 53 59
Child Care Homes <i>or</i> School	Infant/Toddler Pre-School School-Age Infant/Toddler Pre-School	58 47 40 44 45	52 45 49 50	54 47 52 53	57 49 54 55	62 53 59 60
Child Care Homes <i>or</i> School Operated Programs Family Child Care Homes	Infant/Toddler Pre-School School-Age Infant/Toddler Pre-School School-Age	58 47 40 44 45 40	52 45 49 50 45	54 47 52	57 49 54 55 49	62 53 59 60 53
Child Care Homes <i>or</i> School Operated Programs	Infant/Toddler Pre-School School-Age Infant/Toddler Pre-School	58 47 40 44 45	52 45 49 50	54 47 52 53	57 49 54 55	62 53 59 60

tional Programs	School-Age	27	27	27	27	27
* , , , , .	<i>C</i> 11 ·					

\* - see towns by region on following page

## TOWNS SERVED BY DSS REGIONS

East Ashford Bozrah Brooklyn Canterbury Chaplin Colchester Columbia Coventry East Lyme Eastford Franklin Griswold Groton Hampton Killingly Lebanon Ledyard Lisbon Mansfield Montville New London No Stonington Norwich Plainfield Pomfret Preston Putnam Salem Scotland Sprague Sterling Stonington Thompson Union Voluntown Waterford Willington Windham Woodstock

No. Central Andover Avon Berlin Bloomfield Bolton Bristol Burlington Canton East Granby East Hartford East Windsor Ellington Enfield Farmington Glastonbury Granby Hartford Hebron Manchester Marlborough New Britain Newington Plainville Plymouth Rocky Hill Simsbury Somers Southington South Windsor Stafford Suffield Tolland Vernon West Hartford Wethersfield Windsor Windsor Locks

Northwest Barkhamsted Beacon Falls Bethel Bethlehem Bridgewater Brookfield Canaan Cheshire Colebrook Cornwall Danbury Goshen Hartland Harwinton Kent Litchfield Middlebury Morris Naugatuck New Fairfield New Hartford New Milford Newtown Norfolk North Canaan Oxford Prospect Redding Ridgefield Roxbury Salisbury Sharon Sherman Southbury Thomaston Torrington Warren Washington Waterbury Watertown Winchester Wolcott Woodbury

So. Central Ansonia Bethany Branford Chester Clinton Cromwell Deep River Derby Durham East Haddam East Hampton East Haven Essex Guilford Haddam Hamden Killingworth Lyme Madison Meriden Middletown Middlefield Milford New Haven North Branford North Haven Old Lyme Old Saybrook Orange Portland Seymour Shelton Wallingford West Haven Westbrook Woodbridge

Southwest Bridgeport Darien Easton Fairfield Greenwich Monroe New Canaan Norwalk Stamford Stratford Trumbull Weston Westport Wilton

# SECTION 3.2.B RATE SURVEY

### **Connecticut DSS 2005 Childcare Rate Survey**

<b>54:</b> <i>Business: <busin> City: <city></city></busin></i> Hello, I'm calling from the Center for Survey Research and Analysis at the Universi Connecticut on behalf of the Department of Social Services. May I please speak to <i>&lt;</i> F <i>&lt;</i> last <i>&gt;</i> ? The Department of Social Services is calling child care facilities to collect info tion about charges for child care and the salaries and benefits for classroom staff. The mation will be used to plan future state programs	irst > orma-	INT1
mation will be used to plan future state programs. Continue		( 1/ 728)
55:		Q1
1 Are you currently providing child care services to at least one child?         Yes       01         No       02         Don't Know/Refused       99         «Q1 »	=> Q2	( 1/ 730)
56:		INT2
<b>56:</b> Thank you very much but we are only speaking with child care providers currently proviservices.	riding	
Thank you very much but we are only speaking with child care providers currently prov	riding => END	INT2 ( 1/ 732)
Thank you very much but we are only speaking with child care providers currently prov services. Terminate Interview	-	
Thank you very much but we are only speaking with child care providers currently prov services. Terminate Interview	-	( 1/ 732)
Thank you very much but we are only speaking with child care providers currently prover services. Terminate Interview	-	( 1/ 732)

58: 3. Do you receive any School Readiness grants?	Q3
5. Do you receive any school Readiness grants?	( 1/ 736)
School Readiness grants	
(No School Readiness grants)	
(Q3 »	
59:	Q4
4. Do you receive State Funded Daycare Center grants?	<b>v</b> .
	( 1/ 738)
State funded Daycare Center grants	
(No State funded Daycare Center grants)	
(Q4 »	
60:	Q5
=> IQ7 if Q2>01 AND Q3>01 AND Q4>01	
5. AT THE PRESENT TIME, do you have any child care slots at THIS LOCATION where	
the charges are not reduced by $\langle q2 \rangle$ , $\langle q3 \rangle$ , $\langle q4 \rangle$ ?	(4/740)
Yes	( 1/ 740)
No - none are	
Don't know/Refused	
«Q5 »	
<i>(</i> 1	0(1)
<b>61:</b> Q6A. Just to confirm all of your childcare slots are reduced as a result of <q2>, <q3>, <q4< td=""><td>Q6A</td></q4<></q3></q2>	Q6A
>?	
Yes. Confirmed	( 1/ 742)
Yes, Confirmed01 $=>$ IWNot Confirmed02 $=>$ Q5	ru
DK/NA	FC1
«Q6A »	
62:	IQ7
IQ7. The next questions refer only to the slots that are used by parents whose charges are	
NOT reduced by Headstart, school readiness or state funded daycare center grants. Families who receive funding from Maximus can be included if their charges are not reduced by	
Headstart, school readiness or state funded daycare center grants.	
	( 1/ 744)
Continue	· · · · ·
«IQ7»	

7. What is the minimum number of hours per week that a child can stay in your care and still be considered full-time? (ENTER 2 DIGITS)	Q7
	( 1/ 746
\$E 0 60 Don't know/Refused 99 «Q7 »	
64:	Q8
8 What is the maximum number of hours per week that a child can stay in your care and still	
be considered full-time and not have to pay for extra hours? (ENTER 2 DIGITS)	( 1/ 748
\$E 0 60	( .,
Don't know/Refused	
65:	09
9. How do you charge parents for the additional hours beyond fulltime - at the same rate as for regular hours, at a higher rate, with a percent surcharge, a flat fee or is there no charge for the additional hours ?	C C
	( 1/ 750
Same rate	
Higher rate	
Surcharge	
No charge	
Don't allow extra hours (vol)	
Other (vol-record verbatim)	
Don't know/Refused	
«Q9»	

<b>66:</b> 10. Do you typically charge for child care by the hour, by the day, by the week, every two	Q10
weeks, by the month or some other way?         Hour.       01         Day       02         Week       03         Every two weeks.       04         Month       05         Other (RECORD VERBATIM)       06         Don't know/Refused       99         «Q10 »       %	( 1/ 752)
67: 11. Do you offer care for infants? Yes	Q11 ( 1/ 754)
<ul> <li>68:</li> <li>12. On average, how many infants do you usually care for each week? (ENTER 2 DIGITS)</li> <li>\$E 0 98 Don't know/Refused</li></ul>	Q12 ( 1/ 756)
<ul> <li>69:</li> <li>13. Suppose that during the week a parent needed 45 hours of infant child care for about 9 hours per day. What is the typical charge PER WEEK at your facility for 45 hours of infant care? (Round to nearest dollar. If there is a sliding fee scale, we are looking for the charges for a parent who does not qualify for a reduced fee.) (ENTER UP TO 6 DIGITS)</li> <li>\$R 0 999998 Don't know/Refused</li></ul>	Q13 ( 1/ 758)

<b>70:</b> 14. Suppose that during the week a parent needed 25 hours of infant child care. What is the typical charge PER WEEK at your facility for 25 hours of infant care? (Round to nearest dollar. If there is a sliding fee scale, we are looking for the charges for a parent who does not qualify for a reduced fee.) (ENTER 6 DIGITS)	Q14 ( 1/ 764)
\$R 0 999997 Does not apply	
<ul><li>71:</li><li>15. Through what age does the infant rate apply?</li></ul>	Q15 ( 1/ 770)
12 months       01         15 months       02         18 months       03         24 months       04         Other (specify)       05         Don't know/Refused       99         «Q15 »       99	
<b>72:</b> 16. Do you offer care for toddlers?	Q16
Yes       01         No       02 $=>$ Q21         Don't know/Refused       99 $=>$ Q21         «Q16 » $=>$ Q21	( 1/ 772)
<b>73:</b> 17. On average, how many toddlers do you usually care for each week? (ENTER 2 DIGITS)	Q17 ( 1/ 774)
\$E 0 98 Don't know/Refused	(17774)
<b>74:</b> 18. Are the charges the same for toddlers as for infants?	Q18
Yes	( 1/ 776)

75:		Q19
19. Suppose that during the week a parent needed 45 hours of toddler ch hours per day. What is the typical charge PER WEEK at your facility for 4 care? (Round to nearest dollar. If there is a sliding fee scale, we are looki for a parent who does not qualify for a reduced fee.) (ENTER UP TO 6 DI	45 hours of toddler ing for the charges	( 1/ 778)
\$R 0 999997 Don't know/Refused «Q19 »	. 9999999	
76:	1	Q20
20. Suppose that during the week a parent needed 25 hours of toddler child typical charge PER WEEK at your facility for 25 hours of toddler care? dollar. If there is a sliding fee scale, we are looking for the charges for a pa qualify for a reduced fee.) (ENTER UP TO 6 DIGITS)	(Round to nearest	( 1/ 784)
\$R 0 999997 Does not apply Don't know/Refused «Q20 »		
<ul><li>77:</li><li>21. Do you offer care for pre-schoolers?</li></ul>		Q21
Yes No Don't know/Refused 		
<ul><li>78:</li><li>22. On average, how many pre-schoolers do you usually care for each w TO 4 DIGITS)</li></ul>	veek? (ENTER UP	Q22
\$E 0 9998 Don't know/Refused «Q22 »	9999	( 1/ 792)
79:		Q23

23. Suppose that during the week a parent needed 45 hours of pre-schooler child care or about 9 hours per day. What is the typical charge PER WEEK at your facility for 45 hours of pre-schooler child care? (Round to nearest dollar. If there is a sliding fee scale, we are look-

ing for the charges for a parent who does not qualify for a reduced fee.) (ENTER UP TO 6 DIGITS) \$R 0 999997 Don't Know/Refused	( 1/ 796)
<ul> <li>80:</li> <li>24. Suppose that during the week a parent needed 25 hours of pre-schooler child care. What is the typical charge PER WEEK at your facility for 25 hours of pre-schooler child care? (Round to nearest dollar. If there is a sliding fee scale, we are looking for the charges for a parent who does not qualify for a reduced fee.) (ENTER UP TO 6 DIGITS)</li> <li>\$R 0 999997</li> <li>Does not apply</li></ul>	Q24 ( 1/ 802)
81:         25. Do you offer care for school age children?         Yes	Q25 ( 1/ 808)
<ul> <li>82:</li> <li>26. During the school year, on average, how many individual school age children do you care for before OR after school? (NOTE: COUNT ONLY CHILDREN THAT ARE THERE BEFORE OR AFTER SCHOOL - FOLLOW UP QUESTIONS COVER BEFORE ONLY OR AFTER ONLY) (ENTER UP TO 4 DIGITS)</li> <li>\$E 0 9997</li> <li>Does not offer either before or after school care</li></ul>	<b>Q26</b> ( 1/ 810)
<ul> <li>83:</li> <li>27. During the school year, on average, how many individual school age children do you care for before school but not after school? (ENTER UP TO 4 DIGITS)</li> <li>\$E 0 9998 Don't know/Refused</li></ul>	Q27 ( 1/ 814)

<ul> <li>84:</li> <li>28. During the school year, on average, how many individual school age children do you care for after school but not before school? (ENTER UP TO 4 DIGITS)</li> <li>\$E 0000 9998 Don't know/Refused</li></ul>	Q28 ( 1/ 818)
<b>85:</b> 29. Suppose that during the school year, a parent needed 25 hours of care a week for a child before or after school. What is the typical charge PER WEEK at your facility for 25 hours of care for a school age child? (Round to nearest dollar. If there is a sliding fee scale, we are looking for the charges for a parent who does not qualify for a reduced fee.) (ENTER 6 DIGITS)	Q29
\$R 0 999997 Don't know/Refused	( 1/ 822)
<ul> <li>86:</li> <li>30. Suppose that during the school year, a parent needed 10 hours of care a week for a child before or after school. What is the typical charge PER WEEK at your facility for 10 hours of care for a school age child? (Round to nearest dollar. If there is a sliding fee scale, we are looking for the charges for a parent who does not qualify for a reduced fee.) (ENTER 6 DIGITS)</li> <li>\$R 0 999997</li> <li>Does not apply</li></ul>	<b>Q30</b> ( 1/ 828)
<pre>«Q30 »  87: 31. During school vacations on average, how many school age children do you care for? (NOTE: ANY SCHOOL VACATION WHERE YOU OFFER CARE) (ENTER UP TO 4 DIGITS) \$E 0 9998 Don't know/Refused</pre>	Q31 ( 1/ 834)

<ul><li>88:</li><li>32. Suppose that during school vacation a parent needed 45 hours of care a week for a school</li></ul>	Q32
age child. What is the typical charge PER WEEK at your facility for 45 hours of care for a school age child? (Round to nearest dollar. If there is a sliding fee scale, we are looking fo the charges for a parent who does not qualify for a reduced fee.) (ENTER 6 DIGITS)	a r
\$R 0 999997 Don't know/Refused	( 1/ 838)
89:	Q33
33. Suppose that during school vacation a parent needed 25 hours of care a week for a school age child. What is the typical charge PER WEEK at your facility for 25 hours of care for a school age child? (Round to nearest dollar. If there is a sliding fee scale, we are looking for the charges for a parent who does not qualify for a reduced fee.) (ENTER 6 DIGITS)	a
	> WFC5 > WFC5
90:	IWFC1
=> IWFC5 else => WFC1 if Q33>0 AND FTC==1	
For each of the following age categories please tell me if you offer care for that age category:	
Continue	( 1/ 850)
91:	WFC1
=> WFH1 if FTC>1	
(DO NOT READ THIS INTRODUConnecticutION IF YOU GOT IN THE PREVIOUS SCREEN)For each of the following age categories please tell me if you offer care for tha age category:) WFC1. Infants	
	( 1/ 852)
Yes	
Don't know/Refused	
«WFC1 »	

<b>92:</b> WFC2. Toddlers Yes	WFC2 ( 1/ 854)
93:         WFC3. Preschool children         Yes	WFC3 ( 1/ 856)
94:         WFC4. School-age children         Yes	WFC4 ( 1/ 858)
<b>125:</b> Thank you very much for your time. You have been very helpful and we appreciate your co-operation.         Continue       01         «THANK »	<b>THANK</b> ( 1/ 944)

# SECTION 3.2.C RATE SURVEY METHODOLOGY SUMMARY

## **Overview:**

The Connecticut Department of Social Services contracted with the Center for Survey Research and Analysis (CSRA) at the University of Connecticut to develop a methodology leading to the identification of payment rates for the Care 4 Kids child care assistance program. The child care payment rates are based on a scientific survey of child care providers in Connecticut which measured the actual rates charged by licensed child care providers. The survey was conducted from March 17 through May 4, 2005. A random sample of 1,245 child care providers was interviewed.

Data collection was administered and managed at CSRA's research operations center in Storrs, Connecticut. In order to optimize cooperation and data quality, all data was collected by professional survey research interviewers using a Computer Assisted Telephone Interviewing (CATI) system. All interviewers assigned to this survey participated in special training conducted by senior project staff. Senior researchers at the University of Connecticut extensively monitored data collection activities.

### **Questionnaire Development:**

Payment rate information was measured through the administration of a standardized survey questionnaire, which has been used since 2001. The questionnaire was developed through an extensive process that included focus groups conducted with child care providers and extensive expert review. The questionnaire and field protocols also underwent extensive testing under closely monitored conditions prior to the start of the formal interviewing period.

### Sample Design:

The sample for this survey was designed to optimize the accuracy of rate estimates across different facility types and across different health and human service regions in Connecticut. All licensed facilities were eligible for inclusion in the survey sample. Child care centers and family day care homes were randomly sampled according to scientific sampling procedures. Table I demonstrates the total number of facilities included in the sample for each type of facility and region.

	Region					
Facility Type	East	North Central	Northwest	South	Southwest	Total
Child Care Center	120	121	120	121	122	604
Family Day Care Home	129	125	127	130	130	641
Total:	249	246	247	251	252	1245

Table I: Facilities Included by Region and Type

### **Interviewing Protocols:**

All sampled facilities were initially contacted by letter, and then received extensive follow-up telephone calls from CSRA interviewers. Facilities were provided with a toll-free telephone number to use for any questions. Researchers proactively contacted selected facilities up to 16 times, and telephone messages were left for facilities that did not answer telephone calls. Telephone contacts were made at different times of the day and different days of the week. Facilities were given the option of calling CSRA's toll-free telephone number and completing the survey at their convenience. CSRA's Computer Assisted Telephone Interviewing (CATI) system was utilized to schedule interviews at the convenience of providers. In order to insure accurate data collection, all interviewed facilities were promised complete confidentiality of responses, and all contact information and details of sampled facilities was maintained by CSRA researchers and not provided to DSS or any other state agency.

### **Rates:**

Rates were measured separately for infants, toddlers and pre-school students. In each case, only facilities that provided care to children in the appropriate age category were included in the analysis. The number of children cared for in each age category was also measured in the survey instrument. Overall, estimates were based on actual charges reported by each facility, adjusted to account for the number of children in each age category who actually receive care in each facility.

Rates were also based on three components: The overall statewide rate for child care, for each age group and facility type; a regional rate adjustment factor; and an adjustment to account for partial or full-time plus status. Rates were calculated separately for each age group and facility type. Due to the small number of group day care homes in Connecticut, group day care home rates were set to be equal to those of centers.

Regional rate adjustment factors were based on the differences between the costs of care in that region compared to costs in the state as a whole. Table II shows the measured regional rate differences for each region at the  $60^{th}$  percentile level.

Region	Rate Adjustment
East	87.0%
North Central	95.2%
Northwest	101.7%
South Central	101.3%
Southwest	114.7%

compared to statewide costs.

 Table II: Regional Rate-Adjustment Factors (60<sup>th</sup> Percentile

Cost differences between full-time and half-time status were calculated based on the overall measured ratio of half-time charges to full-time charges for each type of care. Quarter-time rates were estimated as one-half of the half-time rates, while full-time plus rates were calculated as the full-time rate plus the quarter-time rate.

Questions concerning this information should be directed to the Connecticut Department of Social Services Child Care Team at 1-800-811-6141- press 6.

# SECTION 3.2.D CONNECTICUT PAYMENT RATES RATIONALE FOR EQUAL ACCESS PROVISION

Since January 1, 2002, Connecticut child care providers participating in the Care 4 Kids program have been reimbursed at payment levels established through a 2001 market rate survey. This survey was conducted by the University of Connecticut Center for Survey Research and Analysis (CSRA). DSS contracted with CSRA to conduct the 2005 market rate survey (see Attachment 3.2C).

CSRA interviewed a random sample of 1,245 licensed child care providers. The sample represented approximately 27 percent of all licensed child care programs operating in Connecticut, including private for-profit and not-for-profit facilities, Head Start programs and publicly funded child care centers. Survey questions were specifically designed to collect information on the actual rates charged to parents for slots that were not state or federally subsidized. The rate setting methodology also disregards standard discounts offered by facilities caring for multiple children from the same family.

The Lead Agency assessed the viability of the payment rates established in 2002 to the rates reported in the 2005 survey. CSRA also compared the 2005 reported rates to the 2005 advertised rates for the same facilities. The advertised rates were derived from figures reported to the United Way Child Care INFOLINE project immediately prior to the start of the survey. Child Care INFOLINE is the state's child care resource and referral agency and is also funded by the Lead Agency. Child Care INFOLINE maintains a statewide database of the actual charges reported by all licensed providers in Connecticut by the type of setting and age group.

As in prior years, the survey showed mixed results. On average, the 2005 rates were 6 to 17 percent higher than the rates reported during the 2001 survey. CSRA also reported that the advertised rates compiled by Child Care INFOLINE were 10 to 13 percent lower than the rates reported by the same providers during the survey. Our own analysis showed that the current payment rates established through the 2001 market rate survey are within 0.7 and 7.5 percent of the advertised rates reported to INFOLINE after the survey was conducted.

The Lead Agency also compared utilization trends from 2001 (immediately prior to implementing the 2001 rates) to present. The purpose of the comparison was to assess the ability of low-income families to access licensed care. The results showed that the percentage of children enrolled in licensed care has increased from 31 percent in January 2002 to 47 percent in January 2005. No regulatory or policy changes were implemented during this period. In addition, the current caseload is comprised of a higher percentage of low-income families either receiving or transitioning TANF – 68 percent in 2005 compared to 51 percent in 2001. This change is the result of closing the intake to non-TANF related families for an extended period due to budgetary constraints.

Utilization of formal licensed care arrangements continues to increase. Currently, 53 percent of children served by Care 4 Kids are enrolled in licensed care settings, an increase of 6 percent over the past eight months. These figures overwhelmingly demonstrate that current rates provide equal access. Based on this analysis, Connecticut intends to use the 60th percentile market rates established from the 2001 market rate survey for the CCDF plan period effective October 1, 2005 to September 2007.

# SECTION 3.3.2A

## **INCOME GUIDELINES**

The following excerpt from the Child Care Assistance Program Regulations contains the income eligibility guidelines for the Care 4 Kids Program.

### Sec. 17b-749-05. Financial Eligibility Requirements

#### **Gross Income Eligibility**

- 1. Gross countable family income for applicants and recipients shall be less than fifty percent of the state median income level for the appropriate family size as established by the Department of Health and Human Services. The commissioner shall have discretion to increase the income limit to up to seventy-five percent of the state median income level for all CCAP recipients or for both applicants and recipients. The commissioner may also, upon the request of the commissioner of Children and Families, waive the gross income limit for families who need child care assistance for a child who was adopted from the Department of Children and Families after October 1, 1999 and whose countable income does not exceed the maximum level established for participation pursuant to 42 CFR section 98.20 of the federal Child Care and Development Fund Regulations. Adoptive families for whom the income limit is waived shall be responsible for paying the maximum fee required pursuant to subsection (f) of section 17b-749-13 of the Regulations of Connecticut State Agencies.
- 2. A family whose income equals or exceeds the established income limit shall be ineligible for CCAP, unless the income exceeds the limit for not more than one calendar month due to an extra pay period or other temporary increase.
- 3. Income shall be counted in the month it is received by the family member, except to the extent the income is averaged in accordance with requirements of subsection (d) of this section.
- 4. The department shall adjust the state median income standards annually. For new applicants, the adjusted standards shall take effect beginning on or after July 1 of each year. For families receiving child care assistance on June 30, the adjusted standards shall take effect not later than the first redetermination completed after July 1 of each year.

## 1.1 <u>Countable Income</u>

- (1) In determining the gross income, the following types of income shall be counted except as specified in subdivision (2) of this section:
  - (A) unearned income of all adult and child family members; and
  - (B) gross earnings of all parents and adult family members.

- (1) The following types of income shall be excluded from the gross income determination:
  - (A) TFA cash assistance benefits;
  - (B) child support payments;
  - (C) income paid by the Census Bureau to low-income temporary census workers;
  - (D) the value of Food Stamp benefits;
  - (E) the earnings of a family member who is under the age of eighteen who is not the parent of a child for whom assistance is requested;
  - (F) earned income credit payment, including advanced payments;
  - (G) cash contributions from non-profit charitable agencies or organizations;
  - (H) interest and dividends totaling less than six hundred dollars per calendar year;
  - (I) lump sum payments from unearned income sources totaling less than six hundred dollars per calendar year;
  - (J) income tax refunds;
  - (K) special need payments issued by the department on behalf of a cash assistance recipient that are paid to a vendor;
  - (L) income from the sponsor of a non-citizen;
  - (M) grants, loans and scholarships paid to students;
  - (N) cash gifts received on an irregular basis, the aggregate of which does not exceed twelve hundred dollars per calendar year;
  - (O) the value of goods and services given as in-kind income rather than cash payments;
  - (P) reimbursements for expenditures that do not represent a benefit or gain to the recipient;
  - (Q) disaster assistance paid under the Disaster Relief Act of 1974, as amended, including the Individual and Family Grant (IFG) program, and comparable

disaster assistance provided by states, local governments and private organizations, and any interest earned on funds from this source;

- (R) payments made by the Department of Labor to meet the cost of pursuing employment;
- (S) state or federal government rental subsidies;
- (T) security deposits returned by a landlord to the family;
- (U) payments made under means-tested energy assistance programs and utility subsidies; and
- (V) payments received under Title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970.

# 1.2 Income Deductions

- (1) Self-employed individuals shall be entitled to standard deductions for business expenses permitted under the Internal Revenue Code. Deductions shall be allowed only after submission of appropriate documentation using applicable Internal Revenue Service forms and schedules.
- (2) Payments made for child support shall be deducted from the gross income of the individual who makes the support payment. A representative average shall be used if the amount of the support payments fluctuates.

## 1.3 Income Calculations

- (1) Gross income shall be calculated based on the best estimate of the income the family is expected to receive. Income received monthly or over a more frequent period shall be annualized based on the amount received in the four week period immediately prior to the date of the income calculation. If the income fluctuates in an unpredictable manner, the income shall be averaged over a longer more representative period. If income is received regularly according to a schedule, the income shall be annualized based on such schedule.
- (2) School or other employees who are under contract shall have income annualized over the contract period. Income received less frequently than monthly shall be averaged over the period which it is intended to cover.
- (3) If the income is expected to change or when a family member is beginning new employment or changing work schedules, gross income shall be calculated based

on the best estimate of the income the family is expected to receive over the next six months. The CCAP administrator shall use all available documentation to make the determination.

(4) Self-employed family members shall have income calculated based on the prior years income tax return or current business records, whichever is most representative of the current projected earnings. Standard business deductions shall be allowed in accordance with the requirements of subdivision (1) of subsection (c) of this section.

# SECTION 3.4.1A PRIORITY ELIGIBILITY GUIDELINES

The following excerpt from the Child Care Assistance Program Regulations contains the priority eligibility guidelines for the Care 4 Kids Program.

### Sec. 17b-749-08. Prioritization for Child Care Funding

- (a) Each family shall be assigned to an applicable priority group. Within available funding, the department shall accept applications and authorize payments based on the following order of priorities:
  - (1) parents receiving TFA cash assistance who are employed or participating in an approved employment services activity and working parents who are completing an approved employment services activity that started before the family's TFA cash assistance was discontinued pursuant to subdivision (e)(3) of section 17b-749-04 of the Regulations of Connecticut State Agencies;
  - (2) working parents whose cash assistance benefits were discontinued within six calendar months prior to the date of application for CCAP;
  - (3) parents under the age of twenty not receiving cash assistance who attend high school;
  - (4) working parents with gross countable family income below fifty percent of the state median income;
  - (5) working parents with gross countable family income between fifty and seventy-five percent of the state median income who request assistance for a child who was adopted from the Department of Children and Families; and
  - (6) parents with gross countable family income between fifty and seventy-five percent of the state median income.
- (b) A family's priority status shall not be affected if the parent is removed from cash assistance due to the application of a TFA program sanction.
  - (1) The commissioner may establish additional priority groups from time to time based on exceptional parents receiving TFA cash assistance who are employed or participating in an approved employment services activity and working parents who are completing an approved employment services activity that started before the family's TFA cash assistance was discontinued pursuant to subdivision (e)(3) of section 17b-749-04 of the Regulations of Connecticut State Agencies;
  - (2) working parents whose cash assistance benefits were discontinued within six calendar months prior to the date of application for CCAP;
  - (3) parents under the age of twenty not receiving cash assistance who attend high school;

- (4) working parents with gross countable family income below fifty percent of the state median income;
- (5) working parents with gross countable family income between fifty and seventy-five percent of the state median income who request assistance for a child who was adopted from the Department of Children and Families; and
- (c) all other working public need that results from unforeseen circumstances. When establishing additional priority groups, the commissioner shall designate a target expenditure level for each additional priority group created if such level is not otherwise specified by legislative action. Additional priority groups may be added or deleted based on available funding.
- (d) The CCAP administrator shall maintain a list of any additional priority groups established. The list shall include the expenditure level specifically allocated to each additional priority group. A copy of the listing of additional priority groups shall be made available to the public upon written request.
### SECTION 3.4.3A WAIT LIST GUIDELINES

The following excerpt from the Child Care Assistance Program Regulations contains the priority eligibility guidelines for the Care 4 Kids Program.

### Sec. 17b-749-09. Application Process

### 1.4 <u>Application Dispositions</u>

- (1) If the family is eligible and funding is available for the parent's priority group, the application shall be approved. A notice of eligibility for the program shall be issued to the parent if the information needed to enroll the provider and determine payment eligibility has not been submitted. The notice shall identify any action the parent is required to take to determine payment eligibility and the specified time frames.
- (2) If at least one child has been determined eligible for payment, a certificate of payment eligibility shall be issued to the parent and the approved provider. The parent shall also be notified of any actions that need to be completed to secure payment eligibility for other children in the home and the date for completing such actions.
- (3) If a family is eligible but funding is not available for the parent's priority group, the family shall be assigned to the wait list if the wait list is open pursuant to section 17b-749-10 of the Regulations of Connecticut State Agencies. If the wait list is closed, the application shall be denied.
- (4) If the application is denied, a copy of the notice shall be sent to any provider for whom a completed child care agreement form was submitted with the application.

### 1.5 Applications Assigned to the Wait List

- (1) The CCAP administrator shall maintain a wait list if sufficient funding is not available to keep the program open for all priority groups. If a family meets the eligibility requirements for the program but funding is not available for the parent's priority group, the family shall be assigned to the wait list unless the wait list is closed pursuant to section 17b-749-10 of the Regulations of Connecticut State Agencies. Parents and their providers shall be notified if the family is placed on the wait list.
- (2) If the commissioner chooses to close the wait list to some or all priority groups, applicants who fall into priority groups to whom the wait list is closed shall be denied. Action to close the wait list shall not be subject to an administrative hearing.

#### Sec. 17b-749-10. Wait list

### (a) Assignment to the Wait List

- (1) Families shall be assigned to a wait list based on their priority group and the date of application. Families qualifying for more than one priority group shall be assigned to the priority group with the highest likelihood of selection for CCAP participation.
- (2) Families assigned to the wait list shall be required to notify the CCAP administrator of changes in address and to submit updated documentation of eligibility upon request by the CCAP administrator. The parent shall have a minimum of fifteen days to supply the requested documentation. Where updated information indicates a change in family circumstances, the CCAP administrator may reassign eligible families to the appropriate priority group or remove ineligible families from the wait list. The parent shall be notified of any changes made to their priority group status or eligibility for the wait list.
- (3) Parents shall inform the CCAP administrator in writing of any changes in address.

#### 1.6 <u>Selection from the Wait List</u>

- (1) As funding becomes available, the CCAP administrator shall select families from the wait list beginning in order of the highest priority group. The family's application shall be processed in accordance with the requirements of section 17b-749-09 of the Regulations of Connecticut State Agencies. If the program is not opened to all families within a particular priority group or groups, the CCAP administrator shall select families based on the date of the original application upon which assignment to the wait list was based. Selection from the next lower category may begin only after all families in the higher priority categories have been given an opportunity to participate.
- (2) Families shall be notified of their selection from the wait list, of any required actions and the specified time frames for completing the actions. The CCAP administrator shall have the option to specify the effective date of initial eligibility based on funding or other administrative considerations. If a date is specified, the family shall also be notified of the effective date.
- (3) The parent shall have a minimum of fifteen days to respond in writing to the notice of selection from the wait list. The family shall be denied if the parent does not respond timely.

(4) Families selected from the wait list may be required to submit a new application and updated verification of family circumstances. Applications of families selected from the wait list shall be processed in a manner identical to applications not assigned to the wait list.

### 1.7 <u>Removal from the Wait List</u>

- (1) Families shall be removed from the wait list under the following circumstances:
  - (A) when the family is selected from the wait list;
  - (B) if the parent requests removal;
  - (C) if the parent does not update information when requested or reply timely to the notice of selection from the wait list;
  - (D) if any mail sent to the parent is returned due to an unreported change in address;
  - (E) when a change in family circumstances renders the family ineligible; or
  - (F) if a change in CCAP regulations renders the family ineligible.
- (2) At the discretion of the commissioner, families may be removed from the wait list if CCAP is expected to remain closed to the family's priority group for at least twelve months.
- (3) Families removed from the wait list shall be issued a denial notice if they are not selected for participation in CCAP.

### 1.8 <u>Closing the Wait List</u>

- (1) The commissioner shall have discretion to close the wait list for some or all priority groups. The decision to close the wait list shall be based on available funding, the number of families already assigned to the wait list and the likelihood of selecting newly added families from the list within twelve months.
- (2) If the wait list is closed, families for whom funding is not available shall have their application denied.
- (3) The commissioner shall have the option of reopening the wait list to some or all of the priority groups if additional funding becomes available or if a sufficient number of families are selected from the list to warrant reopening the list.

# Section 3.5.1A SLIDING FEE SCHEDULE CONNECTICUT DEPARTMENT OF SOCIAL SERVICES care 4 Kids Program SELECTED ANNUAL STATE MEDIAN INCOME GUIDELINES

Effective Ju	ly 1, 2005											
Family Size	1	2	3	4	5	6	7	8	9	10	11	12
20% SMI	8,944.10	11,696.14	14,448.17	17,200.20	19,952.23	22,704.26	23,220.27	23,736.28	24,252.28	24,768.29	25,284.29	25,800.30
30% SMI	13,416.16	17,544.20	21,672.25	25,800.30	29,928.35	34,056.40	34,830.41	35,604.41	36,378.42	37,152.43	37,926.44	38,700.45
40% SMI	17,888.21	23,392.27	28,896.34	34,400.40	39,904.46	45,408.53	46,440.54	47,472.55	48,504.56	49,536.58	50,568.59	51,600.60
50% SMI	22,360.26	29,240.34	36,120.42	43,000.50	49,880.58	56,760.66	58,050.68	59,340.69	60,630.71	61,920.72	63,210.74	64,500.75
55% SMI	24,596.29	32,164.37	39,732.46	47,300.55	54,868.64	62,436.73	63,855.74	65,274.76	66,693.78	68,112.79	69,531.81	70,950.83
75% SMI	33,540.39	43,860.51	54,180.63	64,500.75	74,820.87	85,140.99	87,076.01	89,011.04	90,946.06	92,881.08	94,816.10	96,751.13
100% SMI	44,720.52	58,480.68	72,240.84	86,001.00	99,761.16	113,521.32	116,101.35	118,681.38	121,261.41	123,841.44	126,421.47	129,001.50

The family share of the approved cost is a percentage of the assistance unit's gross income:

Family Share	AU Income Range
2%	0% to less than 20% SMI
4%	20% to less than 30% SMI
6%	30% to less than 40% SMI
8%	40% to less than 50% SMI
10%	50% to less than 75% SMI

CCAP-POL-05-03, Issued March 24, 2005

Source: Federal Register Vol. 70, No. 32, 2-17-2005

# Section 3.5.1A SLIDING FEE SCHEDULE CONNECTICUT DEPARTMENT OF SOCIAL SERVICES care 4 Kids Program

### SELECTED MONTHLY STATE MEDIAN INCOME GUIDELINES

Effective July 1, 2005

Family Size	1	2	3	4	5	6	7	8	9	10	11	12
20% SMI	745.34	974.68	1,204.01	1,433.35	1,662.69	1,892.02	1,935.02	1,978.02	2,021.02	2,064.02	2,107.02	2,150.03
30% SMI	1,118.01	1,462.02	1,806.02	2,150.03	2,494.03	2,838.03	2,902.53	2,967.03	3,031.54	3,096.04	3,160.54	3,225.04
40% SMI	1,490.68	1,949.36	2,408.03	2,866.70	3,325.37	3,784.04	3,870.05	3,956.05	4,042.05	4,128.05	4,214.05	4,300.05
50% SMI	1,863.36	2,436.70	3,010.04	3,583.38	4,156.72	4,730.06	4,837.56	4,945.06	5,052.56	5,160.06	5,267.56	5,375.06
55% SMI	2,049.69	2,680.36	3,311.04	3,941.71	4,572.39	5,203.06	5,321.31	5,439.56	5,557.81	5,676.07	5,794.32	5,912.57
75% SMI	2,795.03	3,655.04	4,515.05	5,375.06	6,235.07	7,095.08	7,256.33	7,417.59	7,578.84	7,740.09	7,901.34	8,062.59
100% SMI	3,726.71	4,873.39	6,020.07	7,166.75	8,313.43	9,460.11	9,675.11	9,890.12	10,105.12	10,320.12	10,535.12	10,750.13

The family share of the approved cost is a percentage of the assistance unit's gross income:

Family Share	AU Income Range						
2%	0% to less than 20% SMI						
4%	20% to less than 30% SMI						
6%	30% to less than 40% SMI						
8%	40% to less than 50% SMI						
10%	50% to less than 75% SMI						

CCAP-POL-05-03, Issued March 24, 2005

Source: Federal Register Vol. 70, No. 32, 2-17-2005

## SECTION 4.4.A TANF DEFINITIONS AND CRITERIA

### CONNECTICUT DEPARTMENT OF SOCIAL SERVICES UNIFORM POLICY MANUAL

Date:	10	-1-99	Fransmittal:	UP-04-6	8530.60			
Section:		Jobs First	Гуре:	POLICY				
Chapter:		] Employment Services	Program:	ES				
Subject:		Good Cause for Non-	Compliance					
8530.60	A.	Good cause is conside	event him or h		ces beyond the participant's ving with an Employment			
	B.	<u>General Circumstances</u> Good cause includes, but is not limited to, the following circumstances when such circumstances reasonably prevent the individual from participating in an Employment Services activity:						
		<ol> <li>unavailability of</li> <li>unavailability of</li> <li>a family emerger</li> <li>domestic violence</li> </ol>	y member that child care; transportation ncy; e; or		to be provided by the individual;			
	C.	when a participant car	Violence mplying with mot comply w	an Employmen ith an Employr	ment. It Services requirement exists nent Services requirement due to olence which is of such severity			

as to reasonably prevent compliance with the requirement. Good cause may be found in appropriate cases with consideration of the following factors:

- 1. the participant has physical injuries caused by abuse or psychological effects of abuse prohibiting such participant to work or engage in other Employment Services activities; or
- 2. the Employment Services activity or employment is substantially disrupted due to domestic violence, including civil or criminal legal proceedings related to such domestic violence; or
- 3. the abuser actively interferes with the participant's Employment Services activity or employment, attendance at the Employment Services activity or employment, or child care arrangements; or
- 4. an Employment Services activity or employment location puts the applicant or recipient at risk; or
- 5. Employment Services requirements result in the inability or increased difficulty of the participant to escape domestic violence.
- D. Additional Good Cause Reasons Failure to Maintain Earnings

In addition to B. or C. above, the following good cause criteria may apply to a voluntary quit or reduction in hours or wages of employment:

- 1. The Department of Labor (DOL) determines that a person who quit his or her job had good cause to quit. If DOL determines that good cause does not exist for unemployment compensation purposes, a separate determination of good cause is made by the Department of Social Services;
- 2. A quit is part of an employment pattern in which workers frequently move from one employer to another, such as migrant farm labor or construction work;
- 3. The person quit a job or reduced hours to accept other employment which has the potential of leading to self-sufficiency;
- 4. The person quit the job or reduced hours to accept other employment with earnings at or above the level of the previous employment;
- 5. The person quit employment or reduced hours in order that another assistance unit member may accept an offer of employment. This exemption is allowed only when the new employment provides a wage at or above the level of the previous employment of the person who quit;
- 6. The person occasionally reduces work hours to meet family obligations; or

7. The person left a temporary employment agency which has not or cannot provide him or her with an appropriate work activity.

### E. Child Care Criteria

Good cause exists for parents who leave employment, refuse to accept employment, or fail to take part in an Employment Services activity under the circumstances described below.

- 1. To qualify for good cause for lack of child care, the following circumstances must exist:
  - a. A person must be the only parent in the home or the only parent in the home capable of caring for the child due to the physical or mental incapacity of the second parent; and
  - b. The parent must be caring for his or her child who is under thirteen (13) years of age or who requires child care due to special needs.
- 2. A person who meets the criteria described in 1. above, is determined to have good cause if he or she has demonstrated inability to obtain child care because appropriate child care is not available within a reasonable distance from the person's home or work site.
- 3. A person who meets the criteria described in 1, above, is also determined to have good cause if appropriate and affordable formal child care is unavailable and informal child care by a relative or a friend is unavailable or unsuitable.
- 4. In determining if a person meets the requirements of this provision, the following definitions apply:
  - a. Appropriate child care means care that meets the health and safety standards that are required for providers who receive payments under the provisions of the Child Care Assistance Program (CCAP), as mandated by Connecticut General Statutes 17b-749.
  - b. Reasonable distance means care that can be accessed by public or private transportation that is available to the client without interfering with the parent's ability to maintain employment. If transportation is not available, child care must be within reasonable walking distance from the person's home.
  - c. Unsuitable informal care means care that is exempt from the State's licensing requirements, but does not meet the health and safety

standards described in a. above, or is otherwise shown to be unsafe or inappropriate for the child.

d. Affordable formal child care means licensed child care that costs the parent (after subsidies) no more than ten percent of his or her total income.

### SECTION 5.2.4.A ASSESSMENT EVALUATIONS

Early Childhood Ed	lucation Ir	itiative	9			
Evaluations Sum	mary 2004	-2005		"		
"This session offered ideas and infor	Total # of Evals	<i>t will be</i> Agree	Agree Somewhat	Disagree Somewhat	Disagree	Total # of Actual Par- ticipants
Challenging Behaviors: Understanding the Function of Behavior as Communica- tion: Preventing Challenging Behavior <i>Mary Louise Hemmeter, Ph.D.</i> October 12, 2004 ~ SERC, Middletown	30	30				34
Connecticut Preschool Assessment Framework: (Intro Session A) <i>E.A. Aschenbrenner / Claudia Shuster, Ed.D.</i> October 14, 2004 ~ Holiday Inn, North Haven	34	31	3			37
Science Explorations: Awakening Young Children to the World of Science Jeffrey Winokur, M.Ed. October 15, 2004 ~ Radisson, Cromwell	40	37	3			46
Designing Effective, Functional Behavior Supports for Young Children Pamelazita Buschbacher, Ed.D., CCC-SLP October 21, 2004 ~ Radisson, Cromwell	37	30	7			49
Administrators' Breakfast: Best Practices in Kindergarten Teri Lawrence October 22, 2004 ~ Keeney Center, Wethersfield	18	18				35
The SCERTS Model: Enhancing Communicative and Socioemotional Competence for Children w/ Austim Spectrum Disorder Barry Prizant, Ph.D. October 26, 2004 ~ Courtyard by Marriott, Cromwell	83	70	11	2		125
NAEYC Accreditation: Moving Your Self Study Process Forward – Session A Deb Flis October 27, 2004 ~ SERC, Middletown	4	4				8
Connecticut Preschool Assessment Framework: (Intro Session B) E.A. Aschenbrenner / Claudia Shuster, Ed.D. October 28, 2004 ~ CES, Trumbull						30
NAEYC Accreditation: Moving Your Self-Study Process Forward – Session B Deb Flis November 2, 2004 ~ SERC, Middletown	0					8
Connecticut Preschool Assessment Framework: Administrators' Breakfast Camille Jackson-Alleyne, Ed.D. / Kathy Bradley, Ph.D. November 3, 2004 ~ Keeney Center, Wethersfield	26	22	4			28
Rolling Over and Looking Up (Session A) Vicki Satkiewicz Gayhardt November 3, 2004 - SERC, Middletown	9	9				15
How Can I Help? (Session B) Vicki Satkiewicz Gayhardt November 4, 2004 ~ Keeney Center, Wethersfield	11	8	3			13
Kindergarten Roundtable: Continuing the Discussion <i>Teri Lawrence</i> November 10, 2004 ~ Kent Center School, Kent	13	12	1			14
Forging a Link Between Oral Language and Emergent Literacy in Preschool Chil- dren Margie Gillis November 19, 2004 ~ Courtyard by Marriott, Cromwell	19	14	4			26
Administrators' Breakfast: Universal Preschool George Coleman, Ph.D. November 23, 2004 ~ Courtyard by Marriott, Cromwell	4	4				19
Administrators' Breakfast: "Nakiesha, Norberto, Shi-ho and Eunhee, it's Time to get ready for snack!" Exploring Diversity in Early Childhood Settings <i>William Strader, Ed.D.</i> December 3, 2004 ~ Keeney Center, Wethersfield	7	7				10

#### STATE PLAN FOR CCDF SERVICES FOR THE PERIOD 10/1/05 – 9/30/07

<b>Early Childhood Education Initiative</b> <b>Evaluations Summary 2004-2005</b> <i>"This session offered ideas and information that will be helpful to me."</i>									
	Total # of Evals	Agree	Agree Somewhat	Disagree Somewhat	Disagree	Total # of Actual Par- ticipants			
Developing a Comprehensive Approach to Literacy in Kindergarten Miriam Trehearne, Ph.D. December 7, 2004 ~ Radisson, Cromwell	40	39	1			53			
Legal Issues Specific to Educational Programs for Young Children with Autism Spectrum Disorders Perry Zirkel, Ph.D. December 9, 2004 ~ Radisson, Cromwell	24	24				40			
The Young Thinker: Mathematics for Preschool Children Juanita Copley, Ph.D. December 14, 2004 ~ Keeney Center, Wethersfield	38	38				44			
An Introduction to Collaborative Teaching in Early Childhood Programs Kathy Bradley, Ph.D., Nancy Hines, & Kathy Piquette December 16, 2004 ~ Keeney Center, Wethersfield	20	16	4			30			
Connecticut Preschool Assessment Framework: (Intro Session C) <i>E.A. Aschenbrenner / Claudia Shuster, Ed.D.</i> January 7, 2005 ~ Courtyard by Marriott, Waterbury	34	28	6			39			
Partnering with Families Who Are Experiencing Multiple Stressors Angela Tomlin, Ph.D. January 19, 2005 ~ Radisson, Cromwell	34	20	14			53			
Home Visiting: Coaching Families and Colleagues in Early Childhood Settings Dathan Rush, MA, CCC-SLP, & MLisa Shelden, Ph.D. January 27, 2005 ~ Radisson, Cromwell	53	23	27	3		71			