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Child Care and Development Fund (CCDF) Plan
For California
FFY 2025 – 2027

This Plan describes the Child Care and Development Fund program to be administered by the State or Territory for the period from 10/01/2024 to 9/30/2027, as provided for in the applicable statutes and regulations. The Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The Lead Agency acknowledges its responsibility to adhere to the applicable laws regardless of these modifications.

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Overview

Introduction

The Child Care and Development Block Grant Act (CCDBG) (42 U.S.C. 9857 *et seq.*), together with section 418 of the Social Security Act (42 U.S.C. 618), authorize the Child Care and Development Fund (CCDF), the primary federal funding source devoted to supporting families with low incomes afford child care and increasing the quality of child care for all children. The CCDF program is administered by the Office of Child Care (OCC) within the Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services and provides resources to State, Territory, and Tribal governments via their designated CCDF Lead Agency.

CCDF plays a vital role in supporting family well-being and child development; facilitating parental employment, training, and education; improving the economic well-being of participating families; and promoting safe high-quality care and learning environments for children when out of their parents' care.

As required by CCDBG, this CCDF Plan serves as the State/Territory Lead Agency's application for a three-year cycle of CCDF funds and is the primary mechanism OCC uses to determine Lead Agency compliance with the requirements of the statute and regulations. The CCDF Lead Agencies must comply with the rules set forth in CCDBG and corresponding ACF-issued rules and regulations. The CCDF Plan is a fundamental part of OCC's oversight of CCDF and is designed to align with and complement other oversight mechanisms including administrative and financial data reporting, the monitoring process, error rate reporting, audits, and the annual Quality Progress Report.

Organization of Plan

In their CCDF Plans, State/Territory Lead Agencies must describe how they implement the CCDF program. The Plan is organized into the following sections:

1. CCDF Program Administration
2. Child and Family Eligibility and Enrollment and Continuity of Care
3. Child Care Affordability
4. Parental Choice, Equal Access, Payment Rates, and Payment Practices
5. Health and Safety of Child Care Settings
6. Support for a Skilled, Qualified, and Compensated Child Care Workforce
7. Quality Improvement Activities
8. Lead Agency Coordination and Partnerships to Support Service Delivery
9. Family Outreach and Consumer Education
10. Program Integrity and Accountability

Completing the Plan

This revised Plan aims to capture the most accurate and up-to-date information about how a State/Territory is implementing its CCDF program in compliance with the requirements of CCDF. In responding to plan questions, Lead Agencies should provide concise and specific summaries and/or bullet points as appropriate to the question. Do not insert tables or charts, add attachments, or copy manuals into the Plan. A State/Territory's CCDF Plan is intended to stand on its own with sufficient information to describe how the Lead Agency is implementing its CCDF program without need for added attachments, tables, charts, or State manuals.

The OCC recognizes that Lead Agencies use different mechanisms to establish CCDF policies, such as State statute, regulations, administrative rules, policy manuals, or policy issuances. Lead Agencies must submit their CCDF Plan no later than July 1, 2024.

Review and Amendment Process

The OCC will review submitted CCDF Plans for completeness and compliance with federal policies. Each Lead Agency will receive a letter approximately 90 days after the Plan is due that includes all Plan non-compliances to be addressed. The OCC recognizes that Lead Agencies continue to modify and adapt their programs to address evolving needs and priorities. Lead Agencies must submit amendments to their Plans as they make substantial policy and program changes during the three-year plan cycle, including when addressing non-compliances.

Appendix 1: Implementation Plan

As part of the Plan review process, if OCC identifies any CCDF requirements that are not fully implemented, OCC will communicate a preliminary notice of non-compliance for those requirements via an emailed letter. The OCC has created a standardized template for Lead Agencies to submit as their 60-day response to that preliminary notice. This template is found at Appendix 1: Lead Agency Implementation Plan. This required response via the Appendix will help create a shared understanding between OCC and the Lead Agency on which elements of a requirement are unmet, how they are unmet, and the Lead Agency's steps and associated timelines needed to fully implement those unmet elements.

CCDF Plan Submission

The CCDF Lead Agencies will submit their Plans electronically through the Child Care Automated Reporting System (CARS). CARS will include all language and questions included in the final CCDF Plan template approved by the Office of Management and Budget (OMB). Note that the format of the questions in CARS could be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities.

1 CCDF Program Administration

Strong organizational structures, operational capacity, and partnerships position States and Territories to administer CCDF efficiently, effectively, and collaboratively.

This section identifies the CCDF Lead Agency, CCDF Lead Agency leadership, and the entities and individuals who will participate in the implementation of the program. It also identifies the partners who were consulted to develop the Plan.

1.1 CCDF Leadership

The governor of a State or Territory must designate an agency (which may be an appropriate collaborative agency) or establish a joint interagency office to represent the State or Territory as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable federal laws and regulations and the provisions of this Plan, including the assurances and certifications.

1.1.1 Designated Lead Agency

Identify the Lead Agency or joint interagency office designated by the State or Territory. The OCC will send official grant correspondence, such as grant awards, grant adjustments, Plan approvals, and disallowance notifications, to the designated contact identified here.

- a. Lead Agency or Joint Interagency Office Information:
 - i. Name of Lead Agency: *California Department of Social Services*
 - ii. Street Address: *744 P Street*
 - iii. City: *Sacramento*
 - iv. State: *California*
 - v. ZIP Code: *95814*
 - vi. Web Address for Lead Agency: <https://www.cdss.ca.gov/>
- b. Lead Agency or Joint Interagency Official contact information:
 - i. Lead Agency Official First Name: *Lupe*
 - ii. Lead Agency Official Last Name: *Jaime-Mileham*
 - iii. Title: *Deputy Director, Child Care and Development Division*
 - iv. Phone Number: *(916) 951-2037*
 - v. Email Address: Lupe.Jaime-Mileham@dss.ca.gov

1.1.2 CCDF Administrator

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the State's or Territory's CCDF program. The OCC will send programmatic communications, such as program announcements, program instructions, and data collection instructions, to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program,

identify the Co-Administrator or the person with administrative responsibilities and include their contact information.

- a. CCDF Administrator contact information:
 - i. CCDF Administrator First Name: *Lupe*
 - ii. CCDF Administrator Last Name: *Jaime-Mileham*
 - iii. Title of the CCDF Administrator: *Deputy Director, Child Care and Development Division*
 - iv. Phone Number: *(916) 651-2037*
 - v. Email Address: Lupe.Jaime-Mileham@dss.ca.gov
- b. CCDF Co-Administrator contact information (if applicable):
 - i. CCDF Co-Administrator First Name: *Anna*
 - ii. CCDF Co-Administrator Last Name: *Levine*
 - iii. Title of the CCDF Co-Administrator: *Branch Chief, Program Innovation, Policy, and Research Branch*
 - iv. Phone Number: *(916) 858-9389*
 - v. Email Address: Anna.Levine@dss.ca.gov
 - vi. Description of the Role of the Co-Administrator: *As administrator of the Program Innovation, Policy, and Research Branch, the Branch Chief supports the Child Care Development Fund (CCDF) administrator and staff with development of policy and procedures in the implementation of all CCDF regulations and state statutes.*

1.2 CCDF Policy Decision Authority

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

1.2.1 Entity establishing CCDF program rules

Which of the following CCDF program rules and policies are administered (i.e., set or established) at the State or Territory level or local level? Identify whether CCDF program rules and policies are established by the State or Territory (even if operated locally) or whether the CCDF policies or rules are established by local entities, such as counties or workforce boards.

Check one of the following:

☒ *X* All program rules and policies are set or established by the State or Territory.
(If checked, skip to question 1.2.2.)

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

apply:

- i. Eligibility rules and policies (e.g., income limits) are set by the:
 - ☐ State or Territory.
 - ☐ Local entity (e.g., counties, workforce boards, early learning coalitions).
 - ☐ Other. Identify the entity and describe the policies the entity can set: [Click or tap here to enter text.](#)
- ii. Sliding-fee scale is set by the:
 - ☐ State or Territory.
 - ☐ Local entity (e.g., counties, workforce boards, early learning coalitions).
 - ☐ Other. Identify the entity and describe the policies the entity can set: [Click or tap here to enter text.](#)
- iii. Payment rates and payment policies are set by the:
 - ☐ State or Territory.
 - ☐ Local entity (e.g., counties, workforce boards, early learning coalitions).
 - ☐ Other. Identify the entity and describe the policies the entity can set: [Click or tap here to enter text.](#)
- iv. Licensing standards and processes are set by the:
 - ☐ State or Territory.
 - ☐ Local entity (e.g., counties, workforce boards, early learning coalitions).
 - ☐ Other. Identify the entity and describe the policies the entity can set: [Click or tap here to enter text.](#)
- v. Standards and monitoring processes for license-exempt providers are set by the:
 - ☐ State or Territory.
 - ☐ Local entity (e.g., counties, workforce boards, early learning coalitions).
 - ☐ Other. Identify the entity and describe the policies the entity can set: [Click or tap here to enter text.](#)
- vi. Quality improvement activities, including QIS, are set by the:
 - ☐ State or Territory.
 - ☐ Local entity (e.g., counties, workforce boards, early learning coalitions).
 - ☐ Other. Identify the entity and describe the policies the entity can set: [Click or tap here to enter text.](#)
- vii. Other. List and describe any other program rules and policies that are set at a level other than the State or Territory level: [Click or tap here to enter text.](#)

1.2.2 Entities implementing CCDF services

The Lead Agency has broad authority to operate (i.e., implement activities) through other

agencies, as long as it retains overall responsibility for CCDF. Complete the table below to identify which entity(ies) implements or performs CCDF services. Check the box(es) to indicate which entity(ies) implement or perform CCDF services.

CCDF Activity	CCDF Lead Agency	TANF Agency	Local Government Agencies	CCR&R
Who conducts eligibility determinations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> X	<input type="checkbox"/>
Who assists parents in locating child care (consumer education)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> X
Who issues payments?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> X	<input type="checkbox"/>
Who monitors licensed providers?	<input type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Who monitors license-exempt providers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Who operates the quality improvement activities?	<input type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/> X	<input type="checkbox"/> X

1.2.3 Written agreements and oversight

For any activities performed by agencies other than the Lead Agency as reported above in 1.2.1 and 1.2.2, identify the processes the Lead Agency uses to oversee and monitor CCDF administration and implementation activities to retain overall responsibility for the CCDF program.

Check and describe how the Lead Agency includes in its written agreements the required elements. Note: The contents of the written agreement may vary based on the role the agency is asked to assume or type of project but must include, at a minimum, the elements below.

a. Tasks to be performed.

- ☒ X Yes. If yes, describe: *Examples of written agreements between the state and contractors and grantees include the Department of General Services standard contract (STD 213) and a Grant Award Notification (GAN) which include the minimum required elements. The STD 213 is a standard agreement required by the Department of General Services(DGS) for all contracts with outside agencies, are governed by several state and federal laws, regulations, and administrative processes, and includes the terms of agreements, scope of work, budget detail and payment provisions, and general terms and conditions. These are monitored by contract/grant administrators through monthly or quarterly fiscal and program narrative reports.*
- ☐ No. If no, describe: *Click or tap here to enter text.*

b. Schedule for completing tasks.

- ☒ X Yes. If yes, describe: *Examples of written agreements between the state and contractors*

and grantees include the DGS standard contract (STD 213) and a GAN which include the minimum required elements. The STD 213 is a standard agreement required by the DGS for all contracts with outside agencies, which are governed by several state and federal laws, regulations, and administrative processes, and includes the terms of agreements, scope of work, including timelines, budget detail and payment provisions, and general terms and conditions. These are monitored by contract/grant administrators through monthly or quarterly fiscal and program narrative reports.

☐ No. If no, describe: [Click or tap here to enter text.](#)

c. Budget which itemizes categorical expenditures in accordance with CCDF requirements.

☒ *X Yes. If yes, describe: Examples of written agreements between the state and contractors and grantees include the DGS standard contract (STD 213) and a GAN which include the minimum required elements. The STD 213 is a standard agreement required by the DGS for all contracts with outside agencies, which are governed by several state and federal laws, regulations, and administrative processes, and includes the terms of agreements, scope of work, budget detail and payment provisions, and general terms and conditions. These are monitored by contract/grant administrators through monthly or quarterly fiscal and program narrative reports.*

☐ No. If no, describe: [Click or tap here to enter text.](#)

d. Indicators or measures to assess performance of those agencies.

☒ *X Yes. If yes, describe: Examples of written agreements between the state and contractors and grantees include the DGS standard contract (STD 213) and a GAN which include the minimum required elements. The GAN is an agreement that includes applicable certifications, assurances, terms and conditions for the grant that is sent to the grantee after their application for funds has been awarded and before the funds are disbursed. These are monitored by contract/grant administrators through monthly or quarterly fiscal reports and program narrative reports. Direct Service Contracts are monitored by California Department of Social Services (CDSS) through the contractor risk assessment and comprehensive review instrument based on Funding Terms and Conditions and Program Requirements. Additionally, CDSS reviews direct service contractors using a risk assessment and a comprehensive review instrument that is updated annually. The review instrument is guided by the requirements of current laws and regulations.*

☐ No. If no, describe: [Click or tap here to enter text.](#)

e. In addition to the written agreements identified above, describe any other monitoring and auditing processes used to oversee CCDF administration. *The CDSS uses family files data error rate specific to eligibility, need, attendance, and family fees to assess contractors and determine the percentage of their performance. Child care contractors are required to perform at a pre-determined threshold or develop a corrective action plan. The standard is a compliant/noncompliant-based review process. Contractors are reviewed every four years using a standard document. The review instrument identifies the compliance items and suggested supporting documentation for each item to demonstrate compliance. The CDSS conducts follow-up reviews to ensure that the implementation of the corrective action plan improved the contractors' performance to the desired threshold. Contractors are required to submit monthly or quarterly enrollment, attendance, and fiscal reports showing all income and expenses that go into the program for both for both subsidized and non-subsidized children. Fiscal staff may perform a review of a contractors Child Care Development Fund records and documents at any time to ensure that contractors are following all of the terms and conditions of their contract and that stage funds are spent appropriately. Lastly, contractors are required to submit annual fiscal audits to CDSS by November 15 each fiscal year. Each audit report is reviewed by department auditors for compliance with regulations and contract requirements.*

1.2.4 Information systems availability

Certification of shareable information systems.

Does the Lead Agency certify that to the extent practicable and appropriate, any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop is made available to other public agencies? This includes public agencies in other States for their use in administering child care or related programs.

☒ *X Yes.*

☐ No. If no, describe: [Click or tap here to enter text.](#)

1.2.5 Confidential and personally identifiable information

Certification of policies to protect confidential and personally identifiable information

Does the Lead Agency certify that it has policies in place related to the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds?

☒ Yes.

☐ No. If no, describe: [Click or tap here to enter text.](#)

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF Plan, and consultation with and meaningful input and feedback from a wide range of representatives is critical for CCDF programs to continually adapt to the changing needs of families, child care programs, and the workforce. Consultation involves meeting with or otherwise obtaining input from an appropriate agency in the development of the State or Territory CCDF Plan. As part of the Plan development process, Lead Agencies must consult with the following:

- (1) Appropriate representatives of general-purpose local government. General purpose local governments are defined by the U.S. Census at <https://www2.census.gov/govs/cog/g12 org.pdf>.
- (2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) or similar coordinating body pursuant to 98.14(a)(1)(vii).
- (3) Tribe(s) or Tribal organization(s) within the State. This consultation should be done in a timely manner and at the option of the Tribe(s) or Tribal organization(s).

1.3.1 Consultation efforts in CCDF Plan development

Describe the Lead Agency's consultation efforts in the development of the CCDF Plan, including how and how often the consultation occurred.

- a. Describe how the Lead Agency consulted with appropriate representatives of general-purpose local government: *On October 3, 2023, the California Department of Social Services (CDSS) Child Care and Development Division (CCDD) released a save the date announcement to all subscribers of the CCDD email distribution lists for the scheduled 2025-27 Child Care Development Fund (CCDF) State Plan Input Sessions. The distribution list includes, but is not limited to, representatives from other state agencies, Local Child Care and Development Planning Councils (LPCs), county offices of education, and Tribal organizations. The CCDD facilitated a total of eight input sessions including in-person and virtual sessions. During each of the input sessions CDSS elicited comments from the participants on different current policies and procedures identified in different sections of the state plan and possible changes the State is considering to those policies. The CDSS also consulted with local governments by means of its LPCs. The LPCs are state supported local planning entities which include representation from subsidized and non-subsidized child care and development care providers, employers, County Welfare Departments (CWD) and human services agencies, Local Educational Agencies, regional centers, colleges, county First 5 agencies, job training programs, and parent organizations to create local strategic priorities for child care and development*

services for children and families.

- b. Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body: *California's state advisory council is the Early Childhood Policy Council (ECPC), which was established in 2019 by Governor Newsom "...to elevate the needs of young children and their families as well as advise the Governor, Legislature and Superintendent of Public Instruction on statewide early learning and care and child development." The ECPC is comprised of a diverse group of individuals who are experts and practitioners in the early learning and care field, including parent advocates. An input session was facilitated during the ECPC's November 2023 meeting of the Parent Advisory and Workforce Advisory Subcommittees. Questions from relevant sections of the plan pertaining to parent engagement and workforce retention and professional development opportunities were presented and panel members, as well as the general public in attendance, provided comments and input for CDSS' consideration. Following the Advisory committees meeting, CCDD presented the results of the input session to the ECPC in its December 2023 meeting. Participants at the meeting, including council members and the general public, were afforded the opportunity to provide more feedback on the identified topics and other issues they wanted CCDD to consider. The CCDD, after reviewing and discussing all the comments received, provided recommendations to the Director of CDSS to incorporate into the state plan or hold for future consideration.*
- c. Describe, if applicable, how the Lead Agency consulted with Indian Tribes(s) or Tribal organizations(s) within the State: *The CDSS' CCDF Lead Administrator and members of the CCDD Policy Office presented an overview of the CCDF State Plan at the CDSS' Office of Tribal Affairs (OTA) monthly Advisory Committee meeting in August 2023. The overview included a description of the eight sections of the state plan, timelines for submission, and the requirement to collaborate with internal and external partners including consultation with Tribal governments in the development of the triennial plan. During the advisory committee meeting it was suggested by the Tribal governments to enter into a formal consultation between the Tribal leaders and CDSS. The OTA assisted in scheduling a formal government to government consultation with Tribal leadership throughout the state and representatives from CDSS on Friday, November 17, 2023. As part of the formal consultation, written comments were accepted, which were submitted via email to the OTA and shared with CCDD. After reviewing and discussing all the comments received, CCDD provided recommendations to the Director of CDSS to incorporate appropriate comments received into the state plan or hold for future consideration.*
- d. Identify other entities, agencies, or organizations consulted on the development of the CCDF Plan (e.g., representatives from the child care workforce, or statewide afterschool networks) and describe those consultation efforts: *At the request of the Executive Director of the California Child Care Resource and Referral (CCR&R) Network, CDSS joined the monthly meeting of the statewide association for a virtual input session on December 12, 2023, with a focus on the state plan sections related to the federal requirements of the CCR&Rs. Representatives from the various CCR&Rs throughout the state shared with CDSS some of their successes and challenges in supporting the providers with meeting the CCDF requirements including the Health and Safety requirements, consumer education information, data collection, and establishing*

partnerships to increase the supply and demand of child care throughout the state. Additionally, the CCR&Rs identified successes and challenges in providing access to trainings and professional development that are relevant and beneficial to the providers.

1.3.2 Public hearing process

Lead Agencies must hold at least one public hearing in the State or Territory, with sufficient Statewide or Territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan.

Describe the Statewide or Territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan.

- i. Date of the public hearing: *March 6, 2024*
Reminder: Must be no earlier than January 1, 2024. If more than one public hearing was held, enter one date (e.g., the date of the first hearing, the most recent hearing date, or any hearing date that demonstrates this requirement).
- ii. Date of notice of public hearing: *February 8, 2024*
- iii. Was the notice of public hearing posted publicly at least 20 calendar days prior to the date of the public hearing?
☐ *X* Yes.
☐ No. If no, describe: *Click or tap here to enter text.*
- iv. Describe how the public was notified about the public hearing, including outreach in other languages, information on interpretation services being available, etc. Include specific website links if used to provide notice.
Throughout the development of the plan, California Department of Social Services (CDSS) staff provided Child Care Development Fund (CCDF) State Plan updates at meetings with community partners, advocacy groups, and other state agencies, during training webinars, and contractor meetings, including information about the public hearing. Additionally, Child Care and Development Division (CCDD) released a division update sent via the Division's listserv on February 8, 2024, notifying the public of an in-person hearing scheduled for March 6, 2024. The listserv messages are distributed to anyone who has subscribed to the email list, which includes but is not limited to, advocate groups, child care and development program administrators, directors, staff, providers, Local Planning Council representatives, colleges, community partners, representatives from other state agencies, and individuals from the general public. Additionally, in efforts to ensure the broadest attendance, CDSS' Office of Regulations Development (ORD) sent the notice to their usual distribution list used when notifying the public of new proposed regulations.
- v. Describe how the approach to the public hearing was inclusive of all geographic regions of the State or Territory: *The public hearing was held in-person at the CDSS headquarters in downtown Sacramento on March 6, 2024. In the notice*

that went out 20 days prior to the hearing, CDSS provided a dedicated email address where written comments could be sent through 5:00pm the day of the hearing for those who were unable to attend.

- vi. Describe how the content of the Plan was made available to the public in advance of the public hearing (e.g., the Plan was made available in other languages, in multiple formats, etc.): *A link to the draft plan was attached to both of the notices sent out via the CCDD listserv and ORD listserv prior to the hearing.*
- vii. Describe how the information provided by the public was taken into consideration regarding the provision of child care services under this Plan: *All comments received from the public hearing were reviewed by the CCDF State Plan Team and recommendations for the comments to be incorporated into the plan were presented to the CDSS Director. Final decisions were made on which to include and which to hold for future consideration. Appropriate responses were incorporated into the final version submitted on July 1, 2024.*

1.3.3 Public availability of final Plan, amendments, and waivers

Lead Agencies must make the submitted and approved final Plan, any approved Plan amendments, and any approved requests for temporary waivers publicly available on a website.

- e. Provide the website link to where the Plan, any Plan amendments, and waivers (if applicable) are available. Note: A Plan amendment is required if the website address where the Plan is posted changes. [Child Care and Development Fund State Plan Website](#)
- f. Describe any other strategies that the Lead Agency uses to make submitted and approved CCDF Plan and approved Plan amendments available to the public. Check all that apply and describe the strategies below, including any relevant website links as examples.
 - i. ☒ *X Working with advisory committees. Describe: The California Department of Social Services (CDSS) provides monthly updates during the Early Childhood Policy Council meetings and Parent and Workforce Advisory subcommittee meetings, sharing progress regarding the development of the state plan, including notifying the committees when amendments have been approved and posted to the [Child Care and Development Fund State Plan Website](#). Additionally, CDSS provided updates about the development of the plan in standing monthly and quarterly meetings with community partners, such as Thriving Families California, EveryChild California, and the Tribal Child Care Association of California.*
 - ii. ☒ *X Working with child care resource and referral agencies. Describe: The CDSS provides monthly updates at meetings with the California Child Care Resource and Referral Network. The CDSS shares progress regarding the development of the state plan, including notification of when amendments have been approved and posted to the [Child Care and Development Fund State Plan Website](#).*
 - iii. ☐ *X Providing translation in other languages. Describe: The CDSS has begun conversations within the department to support providing translation of the plan and future amendments as funding is available.*

- iv. ☒ *X* Sharing through social media (e.g., Facebook, Instagram, email). Describe: *The Child Care and Development Division (CCDD) will be working with CDSS' Public Affairs and Outreach Programs to learn how they can support CCDD in using social media as a means to notify the public of Child Care Development Fund related activities.*
- v. ☒ *X* Providing notification to key constituents (e.g., parent and family groups, provider groups, advocacy groups, foundations, and businesses). Describe: *The CDSS provides updates in ongoing meetings with our community partners such as the EveryChildCA, an association that supports center-based programs, and Thriving Families California, an association that supports Alternative Payment Programs, and during monthly contractor webinars, including when approved amendments are posted to the CCDD website.*
- vi. ☐ Working with Statewide afterschool networks or similar coordinating entities for out-of-school time. Describe: *Click or tap here to enter text.*
- vii. ☐ Direct communication with the child care workforce. Describe: *Click or tap here to enter text.*
- viii. ☒ *X* Other. Describe: *Each time the state plan is amended, and the amendments have been approved by the Office of Child Care, a notification to the CCDD listserv is released with a summary of all the sections that have been changed. The notification includes a link to the CCDD website where the most recent, approved version can be found.*

2 Child and Family Eligibility and Enrollment and Continuity of Care

Stable and reliable child care arrangements facilitate job stability for parents and healthy development of children. The CCDF eligibility and enrollment policies can contribute to these goals. Policies and procedures that create barriers to families accessing CCDF, like inaccessible subsidy applications and onerous reporting requirements, interrupt a parent's ability to work and may deter eligible families from participating in CCDF.

To address these concerns, Lead Agencies must provide children with a minimum of 12 months between eligibility determinations, limit reporting requirements during the 12-month period, and ensure eligibility determination and redetermination processes do not interrupt a parent's work or school.

In this section, Lead Agencies will identify how they define eligible children and families and how the Lead Agency's eligibility and enrollment policies support access for eligible children and families.

2.1 Reducing Barriers to Family Enrollment and Redetermination

Lead Agency enrollment and redetermination policies may not unduly disrupt parents' employment, education, or job training activities to comply with the Lead Agency's or designated local entity's requirements. Lead Agencies have broad flexibility to design and implement the eligibility practices that reduce barriers to enrollment and redetermination.

Examples include developing strategies to inform families and their providers of an upcoming redetermination and the information that will be required of the family, pre-populating subsidy

renewal forms, having parents confirm that the information is accurate, and/or asking only for the information necessary to make an eligibility redetermination. In addition, Lead Agencies can offer a variety of family-friendly methods for submitting documentation for eligibility redetermination that considers the range of needs for families in accessing support (e.g., use of languages other than English, access to transportation, accommodation of parents working non-traditional hours).

2.1.1 Eligibility practices to reduce barriers to enrollment

- a. Does the Lead Agency implement any of the following eligibility practices to reduce barriers at the time of initial eligibility determination? Check all that apply and describe those elements checked.
- i. ☐ Establishing presumptive eligibility while eligibility is being determined. Describe the policy, including the populations benefiting from the policy, and identify how long the period of presumptive eligibility is. *Click or tap here to enter text.*
 - ii. ☒ Leveraging eligibility from other public assistance programs. Describe: *Effective January 1, 2024, if a member of the family has been certified as eligible to receive benefits or services in any of these means-tested government programs, Medi-Cal, CalFresh, California Food Assistance Program, California Special Supplemental Nutrition Program for Women, Infants, and Children , The Federal Food Distribution Program on Indian Reservations, Head Start, Early Head Start, or if an agency has determined a member of the family to be eligible for Head Start or Early Head Start, they are considered categorically eligible, as well as those receiving CalWORKs services.*
 - iii. ☒ Coordinating determinations for children in the same household (while still ensuring each child receives 12 months of eligibility). Describe: *California received a notice of possible non-compliance on May 8, 2024, from the Office of Child Care based on the January 2024 Cycle 2 monitoring visit. California Department of Social Services will begin the legislative and budgetary processes to make changes to Welfare and Institutions Code and regulations and will provide contractors additional technical assistance to ensure clear processes are in place for incorporating an additional family member during the existing eligibility period that ensures a minimum of 12 months eligibility for that child.*
 - iv. ☐ Self-assessment screening tools for families. Describe: *Click or tap here to enter text.*
 - v. ☒ Extended office hours (evenings and/or weekends).
 - vi. ☒ Consultation available via phone.
 - vii. ☒ Other. Describe the Lead Agency policies to process applications efficiently and make timely eligibility determinations: *Agencies are required to mail or deliver a completed Notice of Action, Application for Services, within 30 calendar days from the date the application was signed by the parent(s).*
 - viii. ☐ None.

- b. Does the Lead Agency use an online subsidy application?
- ☐ X Yes.
- ☐ No. If no, describe why an online application is impracticable. [Click or tap here to enter text.](#)
- c. Does the Lead Agency use different policies for families receiving TANF assistance?
- ☐ Yes. If yes, describe the policies: [Click or tap here to enter text.](#)
- ☐ X No.

2.1.2 Preventing disruption of eligibility activities

- a. Identify, where applicable, the Lead Agency's procedures and policies to ensure that parents do not have their employment, education, or job training unduly disrupted to comply with the State's/Territory's or designated local entity's requirements for the redetermination of eligibility. Check all that apply.
- i. ☐ X Advance notice to parents of pending redetermination.
- ii. ☐ Advance notice to providers of pending redetermination.
- iii. ☐ Pre-populated subsidy renewal form.
- iv. ☐ X Online documentation submission.
- v. ☐ Cross-program redeterminations.
- vi. ☐ X Extended office hours (evenings and/or weekends).
- vii. ☐ X Consultation available via phone.
- viii. ☐ X Leveraging eligibility from other public assistance programs.
- ix. ☐ X Other. Describe: *The contractor must make every effort to make the recertification process convenient for the families by providing early morning, evening, weekend appointments, or appointments at alternative locations as necessary. The contractor may use technology to complete the recertification process if there is no other reasonable way for the family to complete the process in person. COVID 19 restrictions created opportunities for contractors to establish new processes and extra efforts were encouraged to allow families to recertify remotely.*
- b. Does the Lead Agency use different policies for families receiving TANF assistance?
- ☐ Yes. If yes, describe the policies: [Click or tap here to enter text.](#)
- ☐ X No.

2.2 Eligible Children and Families

At eligibility determination or redetermination, children must (1) be younger than age 13; (2) reside with a family whose income does not exceed 85 percent of the State's median income (SMI) for a family of the same size and whose family assets do not exceed \$1,000,000; and (3)(a) reside with a parent or parents who are working or attending a job training or educational program (which can include job search) or (b) receive, or need to receive, protective services as defined by

the Lead Agency.

2.2.1 Eligibility criteria: age of children served

Lead Agencies may provide child care assistance for children less than 13 years of age, including continuing to provide assistance to children if they turn 13 during the eligibility period. In addition, Lead Agencies can choose to serve children up to age 19 if those children are unable to care for themselves.

- a. Does your Lead Agency serve the full federally allowable age range of children through age 12?

☒ Yes.

☐ No. If no, describe the age range of children served and the reason why you made that decision to serve less than the full range of allowable children. [Click or tap here to enter text.](#)

Note: Do not include children incapable of self-care or under court supervision, who are reported below in 2.2.1b and 2.2.1c.

- b. Does the Lead Agency extend eligibility for CCDF-funded child care to children ages 13 and older but below age 19 who are physically and/or mentally incapable of self-care?

☐ No.

☒ Yes.

- i. If yes, the upper age is (may not equal or exceed age 19): *18*

- ii. If yes, provide the Lead Agency definition of physical and/or mental incapacity: *Children who are physically and/or mentally incapable of self-care are children with exceptional needs. Welfare and Institution Code section 10213.5 defines children above the age of 18 with exceptional needs who have been determined to be eligible for special education and related services by an individualized education program team according to the special education requirements contained in Part 30 (commencing with Section 56000) of Division 4 of Title 2 of the Education Code, and who meet eligibility criteria described in Section 56026 of the Education Code, and Article 2.5 (commencing with Section 56333) of Chapter 4 of Part 30 of Division 4 of Title 2 of the Education Code, and Title 5, California Code of Regulations, Sections 3030 and 3031. These children must have an active individualized education program, must be receiving early intervention services or appropriate special education and related services, and must be children who require the special attention of adults in a child care setting. This includes children with intellectual disabilities, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance (also referred to as emotional disturbance), orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities, who need special education and related services consistent with Section 1401(3)(A) of Title 20 of the United States Code.*

- c. Does the Lead Agency extend eligibility for CCDF-funded child care to children ages 13 and older but below age 19 who are under court supervision?

☐ No.

☒ Yes. If yes, and the upper age is (may not equal or exceed age 19): 18

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

i. “residing with”: *Living within the same household.*

ii. “in loco parentis”: *Any other adult living with a child who has responsibility for the care and welfare of the child.*

2.2.2 Eligibility criteria: reason for care

Lead Agencies have broad flexibility on the work, training, and educational activities required to qualify for child care assistance. Lead Agencies do not have to set a minimum number of hours for families to qualify for work, training, or educational activities, and there is no requirement to limit authorized child care services strictly based on the work, training, or educational schedule/hours of the parent(s). For example, the Lead Agency can include travel or study time in calculating the amount of needed services.

How does the Lead Agency define the following terms for the purposes of determining CCDF eligibility?

a. Identify which of the following activities are included in your definition of “working” by checking the boxes below:

i. ☒ An activity for which a wage or salary is paid.

ii. ☒ Being self-employed.

iii. ☐ During a time of emergency or disaster, partnering in essential services.

iv. ☐ Participating in unpaid activities like student teaching, internships, or practicums.

v. ☒ Time for meals or breaks.

vi. ☒ Time for travel.

vii. ☒ Seeking employment or job search.

viii. ☒ Other. Describe: *Sleep time is permitted if the parent is employed anytime between 10:00pm and 6:00am, not to exceed the number of hours authorized for employment and travel between those hours. Sleep time is not provided when there is a parent in the family available and capable of providing care for the family’s child(ren) during the time requested or supervision of the family’s child(ren) is(are) otherwise provided by scheduled time in a public education program available to school-age children, or a private school in which the child(ren) is(are) enrolled and attending; or a time when a child(ren) is(are) receiving any other child care and development services.*

b. Identify which of the following activities are included in your definition of “attending job training” by checking the boxes below:

i. ☒ Vocational/technical job skills training.

ii. ☒ Apprenticeship or internship program or other on-the-job training.

- iii. ☐ English as a Second Language training.
 - iv. ☐ Adult Basic Education preparation.
 - v. ☐ Participation in employment service activities.
 - vi. ☒ Time for meals and breaks.
 - vii. ☒ Time for travel.
 - viii. ☒ Hours required for associated activities such as study groups, lab experiences.
 - ix. ☒ Time for outside class study or completion of homework.
 - x. ☐ Other. Describe: [Click or tap here to enter text.](#)
- c. Identify which of the following diplomas, certificates, degrees, or activities are included in your definition of “attending an educational program” by checking the boxes below:
- i. ☒ Adult High School Diploma or GED.
 - ii. ☒ Certificate programs (12-18 credit hours).
 - iii. ☒ One-year diploma (36 credit hours).
 - iv. ☒ Two-year degree.
 - v. ☒ Four-year degree.
 - vi. ☒ Travel to and from classrooms, labs, or study groups.
 - vii. ☒ Study time.
 - viii. ☒ Hours required for associated activities such as study groups, lab experiences.
 - ix. ☒ Time for outside class study or completion of homework.
 - x. ☐ Applicable meal and break times.
 - xi. ☒ Other. Describe: *Education is also defined as engaged in an educational program for English language learners or to attain a high school diploma or General Education Development certificate, or High School Equivalency certificate. Eligibility is limited in total to six years from the initiation of services based on enrollment in an education program. On-line or televised instructional classes that are unit bearing classes from an accredited training institution are considered attending education and are counted as class time at one hour a week for each unit.*
- d. Does the Lead Agency impose a Lead Agency-defined minimum number of hours of activity for eligibility?
- ☒ No.
 - ☐ Yes.
- If yes, describe any Lead Agency-imposed minimum requirement for the following:
- ☐ Work. Describe: [Click or tap here to enter text.](#)
 - ☐ Job training. Describe: [Click or tap here to enter text.](#)

- ☐ Education. Describe: [Click or tap here to enter text.](#)
- ☐ Combination of allowable activities. Describe: [Click or tap here to enter text.](#)
- ☐ Other. Describe: [Click or tap here to enter text.](#)
- e. Does the Lead Agency allow parents to qualify for CCDF assistance based on education and training without additional work requirements?
- ☒ Yes.
- ☐ No. If no, describe the additional work requirements: [Click or tap here to enter text.](#)
- f. Does the Lead Agency extend eligibility to specific populations of children otherwise not eligible by including them in its definition of “children who receive or need to receive protective services?”
- Note: A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are *not* working or are *not* in education/training activities, but this provision should be included in the Lead Agency’s protective services definition.
- ☐ No. If no, skip to question 2.2.3.
- ☒ Yes. If yes, answer the questions below:
- Provide the Lead Agency’s definition of “protective services” by checking below the sub-populations of children that are included:
- ☒ Children in foster care.
- ☐ Children in kinship care.
- ☒ Children who are in families under court supervision.
- ☒ Children who are in families receiving supports or otherwise engaged with a child welfare agency.
- ☐ Children participating in a Lead Agency’s Early Head Start - Child Care Partnerships program.
- ☐ Children whose family members are deemed essential workers under a governor-declared state of emergency.
- ☐ Children experiencing homelessness.
- ☐ Children whose family has been affected by a natural disaster.
- ☐ Other. Describe: [Click or tap here to enter text.](#)
- g. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis?
- ☐ No.
- ☒ Yes.
- h. Does the Lead Agency waive the eligible activity (e.g., work, job training, education, etc.) requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis?

☐ No.

☒ Yes.

- i. Does the Lead Agency use CCDF funds to provide respite care to custodial parents of children in protective services?

☒ No.

☐ Yes.

2.2.3 Eligibility criteria: deciding entity on family income limits

How are income eligibility limits established?

☒ There is a statewide limit with no local variation.

☐ There is a statewide limit with local variation. Provide the number of income eligibility tables and describe who sets the limits: [Click or tap here to enter text.](#)

☐ Eligibility limits are established locally only. Provide the number of income eligibility tables and describe who sets the limits: [Click or tap here to enter text.](#)

☐ Other. Describe: [Click or tap here to enter text.](#)

2.2.4 Initial eligibility: income limits

- a. Complete the appropriate table to describe family income limits.

- i. Complete the table below to provide the statewide maximum income eligibility percent and dollar limit or threshold:

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1	\$7,759	85 percent	\$6,595/mo.
2	\$7,759	85 percent	\$6,595/mo.
3	\$8,790	85 percent	\$7,472/mo.
4	\$10,249	85 percent	\$8,712/mo.
5	\$11,889	85 percent	\$10,106/mo.

- ii. Does the Lead Agency certify that they use other funds if the income eligibility limit percent exceeds 85% SMI?

☐ X Not applicable. The Lead Agency does not allow income eligibility limits above 85% SMI.

☐ Yes, the Lead Agency certifies that they use other funds (non-CCDF funds) for families with income that exceeds 85% SMI.

☐ No. The Lead Agency establishes income eligibility limits above SMI and includes CCDF funds to pay for families with income that exceeds 85% SMI. If checked, describe: [Click or tap here to enter text.](#)

- b. Complete the table below if the Lead Agency has local variation in the maximum income eligibility limit. Complete the table for the region/locality with the highest eligibility limit, region/locality with the lowest eligibility limit, and the region/locality that is most populous:

- i. Region/locality with the highest eligibility limit:

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
2	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
3	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
4	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
5	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

- ii. Region/locality with the lowest eligibility limit:

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
2	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
3	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
4	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
5	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

iii. Region/locality that is most populous:

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1	<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>
2	<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>
3	<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>
4	<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>
5	<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>	<i>Click or tap here to enter text.</i>

iv. Does the Lead Agency certify that they use other funds if the income eligibility limit percent exceeds 85% SMI?

☐ *X* Not applicable. The Lead Agency does not allow income eligibility limits above 85% SMI.

☐ Yes, the Lead Agency certifies that they use other funds (not CCDF funds) for families with income that exceeds 85% SMI.

☐ No. The Lead Agency establishes income eligibility limits above 85% SMI and includes CCDF funds to pay for families with income that exceeds 85% SMI. If checked, describe: *Click or tap here to enter text.*

c. How does the Lead Agency define “income” for the purposes of eligibility at the point of initial determination? Check all that apply:

i. ☐ *X* Gross wages or salary.

ii. ☐ *X* Disability or unemployment compensation.

iii. ☐ *X* Workers’ compensation.

iv. ☐ *X* Spousal support, child support.

v. ☐ *X* Survivor and retirement benefits.

vi. ☐ *X* Rent for room within the family’s residence.

vii. ☐ *X* Pensions or annuities.

viii. ☐ *X* Inheritance.

ix. ☐ *X* Public assistance.

x. ☐ *X* Other. Describe: *Other countable income sources include commissions, overtime pay, tips, bonuses, gambling or lottery winnings; wages for migrant, agricultural, or seasonal work; gross income from self-employment less business expenses with the exception of wage draws; financial assistance for housing costs or car payments paid*

as part of or in addition to spousal or child support; dividends, interest on bonds, income from estates or trusts, net rental income or royalties; financial assistance received for the care of a child living with an adult who is not the child's biological or adoptive parent; veteran's pensions; allowances for housing or automobiles provided as part of compensation; insurance or court settlements for lost wages or punitive damages; net proceeds from the sale of real property, stocks, or inherited property and other enterprise for gain. Some exclusions to countable income are noted in the definition of "adjusted monthly income" in California Code of Regulations, Title 5, Section 18078, including the exclusion of specified foster care payments and guaranteed income payments as countable income.

- d. What is the effective date for these income eligibility limits? *July 1, 2024*
- e. Income limits must be established and reported in terms of current SMI based on the most recent data published by the Bureau of the Census, even if the federal poverty level is used in implementing the program.

What federal data does the Lead Agency use when reporting the income eligibility limits?

☐ LIHEAP. If checked, provide the publication year of the LIHEAP guideline estimates used by the Lead Agency: *Click or tap here to enter text.*

☐ *X* Other. Describe: *Source: 2022 American Community Survey Public Use Microdata Sample File.*

- f. Provide the direct URL/website link, if available, for the income eligibility limits. [*2024-25 Income Ranking Table*](#)

2.2.5 Income eligibility: irregular fluctuations in earnings

Lead Agencies must take into account irregular fluctuations in earnings in initial eligibility determination and redetermination processes. The Lead Agency must ensure that temporary increases in income, including temporary increases that can result in a monthly income exceeding 85 percent of SMI from seasonal employment or other temporary work schedules, do not affect eligibility or family co-payments.

Check the processes that the Lead Agency uses to take into account irregular fluctuations in earnings.

- i. ☐ *X* Average the family's earnings over a period of time (e.g., 12 months).

Identify the period of time: When a family experiences income fluctuation, a family may choose to provide up to the 12 preceding months of income information as necessary for purposes of determining income eligibility or calculating a family fee. The adjusted monthly income must be determined by averaging the total countable income from at least two months, as applicable based on the income provided, to determine average adjusted monthly income for purposes of determining income eligibility or calculating a family fee.

- ii. ☐ Request earning statements that are most representative of the family's monthly income.
- iii. ☐ Deduct temporary or irregular increases in wages from the family's standard income level.

- iv. ☐ Other. Describe the other ways the Lead Agency takes into account irregular fluctuations in earnings: [Click or tap here to enter text.](#)

2.2.6 Family asset limit

- a. When calculating income eligibility, does the Lead Agency ensure each eligible family does not have assets that exceed \$1,000,000?
- ☒ Yes.
- ☐ No. If no, describe: [Click or tap here to enter text.](#)
- b. Does the Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?
- ☒ No.
- ☐ Yes. If yes, describe the policy or procedure: [Click or tap here to enter text.](#)

2.2.7 Additional eligibility criteria

Aside from the eligibility conditions or rules which have been described in 2.2.1 through 2.2.6, is any additional eligibility criteria applied during:

- a. ☒ Eligibility determination? If checked, describe: *At initial eligibility, the family is required to meet at least one of the criteria of eligibility and one criterion of need to be eligible for services. Families are then prioritized to receive services per Welfare and Institutions Code 10271 (b). As time and funding permit, California Department of Social Services plans to review and adopt processes to remove barriers to services by providing streamlined eligibility and prioritize resources to those in need consistent with the recommendations noted in the recommendations of the 2019 Assembly Blue Ribbon Commission on Early Childhood Education and the 2020 Master Plan for Early Learning and Care.*
- b. ☒ Eligibility redetermination? If checked, describe: *At initial eligibility, the family is required to meet at least one of the criteria of eligibility and one criterion of need to be eligible for services.*

2.2.8 Documentation of eligibility determination

Lead Agencies must document and verify that children receiving CCDF funds meet eligibility criteria at the time of eligibility determination and redetermination.

Check the information that the Lead Agency documents and verifies at initial determination and redetermination and describe what information is required and how often.

Required at Initial Determination	Required at Redetermination	Description
<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X	Applicant identity. Describe how you verify: <i>At initial determination and redetermination, the applicant(s) applying for services shall provide applicable information on the application for child care and development services. This includes the applicant's names, address, phone numbers, and email address. Documentation collected to</i>

		verify identity may include a valid form of identification or other documentation that verifies the families resides in California, per California Code of Regulations, Title 5 (5CCR) sections 18107 and 18083.
<input type="checkbox"/> X	<input type="checkbox"/> X	Applicant's relationship to the child. Describe how you verify: <i>At initial determination and redetermination, the applicant(s) applying for services must provide applicable information on the application for child care and development services that identifies the applicant's relationship to the child. In addition, the families are to provide documentation that supports this relationship such as birth certificates, court orders regarding custody, adoption records, county welfare records, or other reliable documentation that indicates the applicant's relationship to the child receiving services per 5 CCR Section 18083.1.</i>
<input type="checkbox"/> X	<input type="checkbox"/>	Child's information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe how you verify: <i>Families provide a birth certificate or vital record to verify the child's information that is reported on the application for services.</i>
<input type="checkbox"/> X	<input type="checkbox"/> X	Work. Describe how you verify: <i>At both initial determination and redetermination, the family is to provide paystubs, letters of employment, self-employment bookkeeping records, work schedules, or other documentation to verify employment. If the parent is unable to provide these, the parent can submit an independent verification of employment and the contractor must reach out to the employer to verify.</i>
<input type="checkbox"/> X	<input type="checkbox"/> X	Job training or educational program. Describe how you verify: <i>For an educational program or vocational training, the family is to provide documentation of the days and hours of enrollment in the program, which includes at least: 1) the name of the institution that is providing instruction or training, 2) the parent's current class schedule that is either an electronic print-out from the education program or, if unavailable, a document that includes the classes in which the parent is currently enrolled, the days of the week and times of the classes and a registration confirmation from the program.</i>
<input type="checkbox"/> X	<input type="checkbox"/> X	Family income. Describe how you verify: <i>The family is to provide all sources of countable income; this may include paystubs, letter from the employer regarding wage information, recent tax returns, or any additional documentation that supports the parents reported income on the application for services.</i>
<input type="checkbox"/> X	<input type="checkbox"/> X	Household composition. Describe how you verify: <i>At both initial determination and redetermination, the family is required to provide the names of all adults in the</i>

		<i>household and documentation verifying age of all children under the age of 18 to determine total family size. This documentation must demonstrate the relationship of the adults on the application to the children. Documentation may be from a birth certificate, court orders regarding child custody, adoption records, foster care placement records, school or medical records, County Welfare Department records, or other reliable documents indicating the relationship. These are reviewed by the agency before certifying a family for services.</i>
<input type="checkbox"/> X	<input type="checkbox"/> X	<i>Applicant residence. Describe how you verify: Currently families are to provide documentation of California residence; this may include a valid ID with address, rental agreement, utility bill, or other valid documentation of current residency, per 5 CCR Section 18107.</i>
<input type="checkbox"/> X	<input type="checkbox"/> X	<i>Other. Describe how you verify: As time and funding permit, California Department of Social Services (CDSS) plans to review and adopt processes to remove barriers to services by providing streamlined eligibility and prioritizing resources to those in need consistent with the recommendations in the 2020 Master Plan for Early Learning and Care. Since CDSS administers many other support service programs for vulnerable populations, the Department is also evaluating how to support these vulnerable populations across programs.</i>

2.2.9 Exception to TANF work requirements

Lead Agencies must ensure that families with young children participating in TANF will be informed of their right not to be sanctioned under the TANF work requirement if the custodial parent has a demonstrated inability to obtain child care for a child under age six, in accordance with Section 407(e)(2) of the Social Security Act.

- a. Identify the TANF agency that established these criteria or definitions: *The California Department of Social Services administers the Temporary Assistance for Needy Families program in California and establishes the following criteria or definitions.*
- b. Provide the following definitions established by the TANF agency:
 - i. “Appropriate child care”: *Appropriate early learning and care is defined as early learning and care chosen by the parent that meets the needs of the child and parent(s). Early learning and care are either licensed for the appropriate age group, or special needs category, or is license-exempt and the parents and providers have completed the Health and Safety Self-Certification form and the provider meets TrustLine requirements, unless the early learning and care arrangement is exempt from the TrustLine requirements.*
 - ii. “Reasonable distance”: *Reasonable distance is defined as the distance customarily traveled by working families in accessing early learning and care in the community.*
 - iii. “Unsuitability of informal child care”: *Informal early learning and care is unsuitable*

when the caregiver is not allowed to be registered through the TrustLine system in accordance with the TrustLine regulations or would otherwise be denied payment for early learning and care services that are exempt from licensure because of a violent felony conviction.

- iv. “Affordable child care arrangements”: *Affordable early learning and care is early learning and care where the total cost to the family does not exceed the regional market rate plus family fees established by the state in accordance with the family fee schedule.*
- c. How are parents who receive TANF benefits informed about the exception to the individual penalties associated with the TANF work requirements?
 - i. ☒ In writing
 - ii. ☐ Verbally
 - iii. ☐ Other. Describe: *Click or tap here to enter text.*

2.3 Prioritizing Services for Vulnerable Children and Families

Lead Agencies must give priority for child care assistance to children with special needs, families with very low incomes (considering family size), and children experiencing homelessness. A Lead Agency has the flexibility to prioritize other populations of children.

Note: Statute defines children with disabilities, and CCDF rule gives flexibility to Lead Agencies to include vulnerable populations in their definition of children with special needs.

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

2.3.1 Lead Agency definition of priority groups

Describe how the Lead Agency defines:

- a. “Children with special needs.” *The California Department of Social Services (CDSS) defines children with special needs as “children with exceptional needs” per Welfare and Institutions Code (WIC) section 10213.5 (I). “Children with exceptional needs” means infants and toddlers under three years of age who have been determined to be eligible for early intervention services pursuant to the California Early Intervention Services Act (Title 14 (commencing with Section 95000) of the Government Code) and its implementing regulations. These children include an infant or toddler with a developmental delay or established risk condition, or who is at high risk of having a substantial developmental disability, as defined in subdivision (a) of Section 95014 of the Government Code. These children must have active individualized family service plans, must be receiving early intervention services, and must be children who require the special attention of adults in a childcare setting. “Children with Exceptional Needs” also means children 3 to 21 years of age, inclusive, who have been determined to be eligible for special education and related services by an individualized education program team according to the special education requirements contained in Part 30 (commencing with Section 56000) of Division 4 of Title 2 of the Education Code, and who meet eligibility criteria described in Section 56026 of the Education Code and, Article 2.5 (commencing with Section 56333) of Chapter 4 of Part 30 of Division 4 of Title 2 of the Education Code, and California Code of Regulations, Title 5, Sections 3030 and 3031. These children must have an active*

individualized education program, must be receiving early intervention services or appropriate special education and related services, and must be children who require the special attention of adults in a childcare setting. These children include children with intellectual disabilities, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance (also referred to as emotional disturbance), orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities, who need special education and related services consistent with Section 1401(3)(A) of Title 20 of the United States Code.

- b. *“Families with very low incomes.” The CDSS does not have a definition for families with very low incomes. Children who are receiving Child Protective Services or are identified as being abused, neglected, exploited or at risk are enrolled first. Then children and families are given priority based on family eligibility based on income and family size. Families are then enrolled based on the family income eligibility. Per WIC section 10271.5, family eligibility is determined as at or below 85 percent of the state median income.*

2.3.2 Prioritization of child care services

Identify how the Lead Agency will prioritize child care services for the following children and families.

- a. Complete the table below to indicate how the identified populations are prioritized.

Population Prioritized	Prioritize for enrollment in child care services	Serve without placing on waiting list	Waive co-payments as described in 3.3.1	Pay higher rate for access to higher quality care	Use grants or contracts to reserve spots	Other
Children with special needs	<input checked="" type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/> Describe: Click or tap here to

Population Prioritized	Prioritize for enrollment in child care services	Serve without placing on waiting list	Waive co-payments as described in 3.3.1	Pay higher rate for access to higher quality care	Use grants or contracts to reserve spots	Other
						<i>enter text.</i>
Families with very low incomes	<input type="checkbox"/> <i>X</i>	<input type="checkbox"/>	<input type="checkbox"/> <i>X</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe: <i>Click or tap here to enter text.</i>
Children experiencing homelessness, as defined by CCDF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe: <i>Click or tap here to enter text.</i>
(Optional) Families receiving TANF, those attempting to transition off TANF, and those at risk of becoming dependent on TANF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <i>X</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe: <i>Click or tap here to enter text.</i>

b. Does the Lead Agency define any other priority groups?

☐ No.

☐ *X* Yes. If yes, identify the populations prioritized and describe how the Lead Agency prioritizes services: *Per Welfare and Institutions Code section 10271, first priority must be given to neglected or abused children who are recipients of child protective services, or children who are at risk of being neglected or abused, upon written referral from a legal, medical, or social services agency. Second priority must be given to eligible families, regardless of the number of parents in the home, who are income eligible. Within this priority, families with the lowest gross monthly income in relation to family size, as determined by a schedule adopted by the department, must be admitted first. If two or more families are in the same priority in relation to income, the family that has a child with exceptional needs must be admitted first. If there is no family of the same priority with a child with exceptional needs, the family of the same priority in which the primary home language is a language other than English must be admitted first. If there is no family of the same priority in which the primary home language is a language other than English, the family of the same priority that has been on the waiting list for the longest time must be admitted first.*

2.3.3 Enrollment and grace period for children experiencing homelessness

Lead Agencies must allow (after an initial eligibility determination) children experiencing homelessness to receive CCDF services while required eligibility documentation is obtained.

Lead Agencies must establish a grace period that allows children experiencing homelessness and children in foster care to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with State, Territory, or local immunization and other health and safety requirements. The length of such a grace period must be established in consultation with the State, Territorial, or Tribal public health agency.

Note: Any payment for such a child during the grace period may not be considered an error or improper payment.

- a. Describe the strategies to allow CCDF enrollment of children experiencing homelessness while required eligibility documentation is obtained: *"Families experiencing homelessness" is defined as set forth in Section 11302 of Title 42 of the United States Code, known as the McKinney-Vento Homeless Assistance Act. A family experiencing homelessness may establish both eligibility and need with a written referral dated within three months prior to the application for services, which identifies the child as experiencing homelessness or a written parental declaration, signed under penalty of perjury, that the family is experiencing homelessness as described in California Code of Regulations, Title 5, Section 18090. Additionally, the contractor must permit the enrollment of children to begin immediately upon the parent signing the application for services when the basis for eligibility is family experiencing homelessness. The parent must provide all required documentation, including immunization records, within 30 days from the date the application for services is signed.*
- b. Describe the grace period for each population below and how it allows them to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements.

- i. Provide the policy for a grace period for:

Children experiencing homelessness: *The grace period for obtaining the immunization records of families who are unhoused can be considered the 30-day period between the parent signing the application of services and the day the contractor accepts or denies the application. Contractors are allowed to enroll children experiencing homelessness without immunization records, giving families a grace period to obtain/provide proof of immunizations.*

Children who are in foster care: *Child care must be offered to a foster child with unavailable immunization or other health and safety requirements. The child care contractor must still obtain the records. A licensee must have 30 days after the enrollment of a child to secure records requiring information from sources not in the control of the licensee, staff person, or child. An extension can be granted where the licensee can demonstrate that further delays are beyond the control of the licensee. Licensees have up to 30 calendar days to receive a written medical assessment of the child, which includes required immunizations. An extension can be granted to the licensee if they can demonstrate that further delays are beyond their controls.*

- ii. Does the Lead Agency certify that the length of the grace period was established in consultation with the State, Territorial, or Tribal public health agency?
 - ☒ *X* Yes.
 - ☐ No. If no, describe: *Click or tap here to enter text.*
- c. Describe how the Lead Agency coordinates with licensing agencies and other relevant State, Territorial, Tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements: *The California Department of Social Services (CDSS) is also the licensing agency and follows California Code of Regulations, Title 22. General guidance from CDSS' Community Care Licensing Division (CCLD) is that a child who is experiencing homelessness may be admitted immediately even if the child arrives without immunization records. Contractors should utilize their resources to make sure these students have received all required immunizations as soon as possible. It is expected that if there is a delay in obtaining immunizations, this information will be documented and readily available during inspection by CCLD.*

2.4 Lead Agency Outreach to Families Experiencing Homelessness, Families with Limited English Proficiency, and Persons with Disabilities

The Lead Agency must conduct outreach and provide services to families with limited English proficiency, families experiencing homelessness, and persons with disabilities.

2.4.1 Families with limited English proficiency and persons with disabilities: outreach and services

- a. Check the strategies the Lead Agency or partners utilize to conduct outreach and provide services to eligible families with limited English proficiency. Check all that apply.
 - i. ☒ *X* Application in languages other than English (application and related documents, brochures, provider notices).
 - ii. ☒ *X* Informational materials in languages other than English.
 - iii. ☒ *X* Website in languages other than English.
 - iv. ☒ *X* Lead Agency accepts applications at local community-based locations.
 - v. ☒ *X* Bilingual caseworkers or translators available.
 - vi. ☒ *X* Bilingual outreach workers.
 - vii. ☒ *X* Partnerships with community-based organizations.
 - viii. ☒ *X* Collaboration with Head Start, Early Head Start, or Migrant and Seasonal Head Start.
 - ix. ☒ *X* Home visiting programs.
 - x. ☒ *X* Other. Describe: *Our state regulations governing the information that is given to parents states that if the parent(s) speak(s) a language other than English or is (are) hearing impaired, the information shall be provided either through written materials or by presentation of an interpreter in the language the parent understands (California Code of Regulations, Title 5, Section 18222).*

- xi. Check the strategies the Lead Agency or partners utilize to conduct outreach and provide services to eligible families with a person(s) with a disability. Check all that apply. ☐ Applications and public informational materials available in braille and other communication formats for access by individuals with disabilities.
- xii. ☒ Websites that are accessible (e.g., Section 508 of the Rehabilitation Act).
- xiii. ☒ Caseworkers with specialized training/experience in working with individuals with disabilities.
- xiv. ☒ Ensuring accessibility of environments and activities for all children.
- xv. ☒ Partnerships with State and local programs and associations focused on disability- related topics and issues.
- xvi. ☐ Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers.
- xvii. ☒ Partnerships with State and local IDEA Part B, Section 619 and Part C providers and agencies.
- xviii. ☒ Availability and/or access to specialized services (e.g., mental health, behavioral specialists, therapists) to address the needs of all children.
- xix. ☐ Other. Describe: [Click or tap here to enter text.](#)

2.4.2 Families experiencing homelessness: Outreach and technical assistance efforts

- a. Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness and their families.
 - i. ☒ Lead Agency accepts applications at local community-based locations.
 - ii. ☒ Partnerships with community-based organizations.
 - iii. ☒ Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care.
 - iv. ☒ Other. Describe: [Local Education Agencies partner with their McKinney- Vento liaisons to support families experiencing homelessness.](#)
- b. The Lead Agency must provide training and technical assistance (TA) to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness.
 - i. Describe the Lead Agency's training and TA efforts for providers in identifying and serving children and their families experiencing homelessness. [The California Department of Social Services \(CDSS\) provides, at no cost to providers, professional development and training opportunities and resources to support families experiencing homelessness. Responsive Early Education for Young Children and Families Experiencing Homelessness is a publication](#)

available to providers which provides essential factual information and resources about the extent of early childhood homelessness, in addition to concrete research-based strategies teachers can implement that benefit all of the children in their care and are essential for young children and their families impacted by homelessness. Providers can receive training to accompany this publication through the Program for Infant/Toddler Care , the California Preschool Instructional Network , and through self-paced online training modules available on California Early Childhood Online (CECO). The CDSS supported Bridge Program for Foster Children includes Trauma-Informed Care training and coaching, delivered to the early childhood education workforce through local Resource and Referrals, which addresses many of the needs of families and children who are experiencing homelessness. If the workforce is participating in programs like the Workforce Pathways Grant, Quality Counts California, the Child Care Initiative Project, etc., they may be eligible for incentives including stipends.

- ii. Describe the Lead Agency’s training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness. *The CDSS’ Child Care and Development Division (CCDD) staff attend trainings provided at the national and state level. Staff share the information from these trainings with other state staff. These trainings focus on how contractors can meet the regulatory requirements in identifying and serving families experiencing homelessness. The CCDD Program Quality Improvement Branch provides webinars and cluster trainings on the eligibility and need requirements associated with families experiencing homelessness. The guidance includes immediate measures allowable by program regulations to enroll families experiencing homelessness and prioritizing families experiencing homelessness according to California Code of Regulations, Title 5, Section 18090. Additionally, CDSS provides resources to support families experiencing homelessness. A set of online training modules on supporting families who are experiencing homelessness are available to providers as well as CDSS’ staff, contractors, and resource and referral staff through CECO <https://www.caearlychildhoodonline.org/>*

2.5 Promoting Continuity of Care

Lead Agencies must consider children’s development and promote continuity of care when authorizing child care services and must establish a minimum 12-month period for each child, both at the initial eligibility determination and redetermination.

2.5.1 Children’s development

Describe how the Lead Agency’s eligibility, enrollment, reporting, and redetermination policies promote continuity of care in order to support children’s development. *The California Department of Social Services promotes continuity of care by implementation of 24-month eligibility, effective July 1, 2022, which also lessens the administrative burden for both families and providers. When 24-month eligibility was implemented, regulation changes also eliminated the need for families to report any changes during the eligibility period, unless the family’s income exceeds 85% of the state median income, the family moved out of state, or the family wants to*

voluntarily report changes to change their schedule or decrease their family fees.

2.5.2 Minimum 12-month eligibility

Lead Agencies must establish a minimum 12-month eligibility period for each child, both at the initial eligibility determination and at redetermination to support continuity in child care assistance and reduce barriers to families retaining eligibility. This requirement is:

- Regardless of changes in income, Lead Agencies may not terminate CCDF assistance during the minimum 12-month period if a family has an increase in income that exceeds the Lead Agency's income eligibility threshold but not the federal threshold of 85 percent of SMI; and
 - Regardless of temporary changes in participation in work, training, or educational activities.
- a. Does the Lead Agency certify that their policies or procedures provide a minimum 12-month eligibility period for each child at initial eligibility determination?
- ☐ X Yes.
- ☐ No. If no, describe: [Click or tap here to enter text.](#)
- b. Does the Lead Agency certify that its definition of "temporary change" includes each of the minimum required elements?
1. Any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness.
 2. Any interruption in work for a seasonal worker who is not working between regular industry work seasons.
 3. Any student holiday or break for a parent participating in a training or educational program.
 4. Any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program.
 5. Any cessation of work or attendance at a training or educational program not listed above. In these cases, only, Lead Agencies may establish a period of 3 months or longer.
 6. Any change in age, including a child turning 13 years old during the minimum 12-month eligibility period.
 7. Any changes in residency within the State or Territory.
- ☐ X Yes.
- ☐ No. If no, describe: [Click or tap here to enter text.](#)
- c. Are the policies different for redetermination?
- ☐ X No.
- ☐ Yes. If yes, provide the additional/varying policies for redetermination: [Click or tap here to enter text.](#)

2.5.3 Job search and continued assistance

- a. Does the Lead Agency consider seeking employment (engaging in a job search) as an eligible activity at initial eligibility determination and/or at the minimum 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of 3 months of job search.) Check all that apply:
- i. ☒ Yes. The Lead Agency does consider seeking employment (engaging in a job search) as an eligible activity at initial eligibility determination. If yes, describe: *Families eligible for services based on seeking employment are provided with services at the time of initial eligibility determination for no less than 12 months in CalWORKs Stage 1, Stage 2 and Stage 3 and for no less than 24 months in all other programs administered by California Department of Social Services (CDSS) and funded by Child Care Development Fund (CCDF), and services as requested by the parent may be offered full-time or part time.*
 - ii. ☒ Yes. The Lead Agency does consider seeking employment (engaging in a job search) as an eligible activity at redetermination. If yes, describe: *Families eligible for services based on seeking employment are provided with services at the time of redetermination for no less than 12 months in CalWORKs Stage 1, Stage 2 and Stage 3 and for no less than 24 months in all other programs administered by CDSS and funded by CCDF, and services as requested by the parent may be offered full-time or part time.*
 - iii. ☐ No. The Lead Agency does not consider seeking employment (engaging in a job search) as an eligible activity at initial eligibility determination or redetermination.
- b. Does the Lead Agency continue assistance during the minimum 12-month eligibility period when a parent has a non-temporary loss or cessation of eligible activity?
- ☒ Yes. The Lead Agency continues assistance.
 - ☐ No, the Lead Agency discontinues assistance.
- i. If no, describe the Lead Agency's policies for discontinuing assistance due to a parent's non-temporary change: *Click or tap here to enter text.*
 - ii. If no, describe what specific actions/changes trigger the job-search period after each such loss or cessation: *Click or tap here to enter text.*
 - iii. If no, how long is the job-search period where a family can continue assistance (must be at least 3 months)? *Click or tap here to enter text.*
- c. The Lead Agency may discontinue assistance prior to the next minimum 12-month redetermination in the limited circumstances listed below. Check and provide the policy for all circumstances in which the Lead Agency chooses to discontinue assistance prior to the next minimum 12-month redetermination:
- i. ☐ Not applicable.
 - ii. ☒ Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

Provide the Lead Agency's policy defining the number of unexplained absences identified as excessive: *Unexplained absences are defined as when there has been no communication with the provider or contractor*

for seven consecutive calendar days and a total of 30 consecutive calendar days.

- iii. ☒ A change in residency outside of the State or Territory.

Provide the Lead Agency's policy for a change in residency outside the State or Territory: *To be eligible for child care and development services the child must live in the State of California while services are being received.*

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

Provide the Lead Agency's definition of fraud/intentional program violations that lead to discontinued assistance: *Based on Welfare and Institutions Code (WIC) Section 10980, fraud is defined as when any person willfully and knowingly, with the intent to deceive, makes a false statement or representation or knowingly fails to disclose a material fact in order to obtain aid under the provisions of Division 9 ("Public Social Services"), of California's WIC, or who, knowing he or she is not entitled thereto, attempts to obtain aid or to continue to receive aid to which he or she is not entitled, or to receive a larger amount than that to which he or she is legally entitled. Additionally, fraud occurs when any person knowingly makes more than one application for aid under the provisions of Division 9 ("Public Social Services"), of California's WIC, with the intent of establishing multiple entitlements for any person for the same period or who makes an application for that aid for a fictitious or nonexistent person or by claiming a false identity for any person.*

2.5.4 Reporting changes during the minimum 12-month eligibility period

Lead Agencies may only require families to report changes that impact a family's eligibility, including only if the family's income exceeds 85 percent of the SMI, taking into account irregular fluctuations in income, or there is a non-temporary change in the parent's work, training, or education status, during the 12-month eligibility period. Lead Agencies may also require families to report that enable the lead agency to contact the family or pay providers, such as a new telephone number or address.

Note: The response below should exclude reporting requirements for a graduated phase-out, which are described in question 2.5.5.

Does the Lead Agency limit what families must report during the 12-month eligibility period to the changes described above?

☒ Yes.

☐ No. If no, describe: *Click or tap here to enter text.*

2.5.5 Policies and procedures for graduated phase-out of assistance at redetermination

Lead Agencies that establish initial family income eligibility below 85 percent of SMI must provide a graduated phase-out of assistance for families whose income has increased above the Lead Agency's initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of SMI.

Lead Agencies that provide a graduated phase-out must implement a two-tiered eligibility threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

- (i) 85 percent of SMI for a family of the same size; or,
- (ii) An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold that:
 - (A) Takes into account the typical household budget of a family with a low income
 - (B) Provides justification that the second eligibility threshold is:
 - (1) Sufficient to accommodate increases in family income over time that are typical for workers with low incomes and that promote and support family economic stability
 - (2) Reasonably allows a family to continue accessing child care services without unnecessary disruption

At redetermination, a child must be considered eligible if their parents are participating in an eligible activity even if their income exceeds the Lead Agency's initial eligibility income limit as long as their income does not exceed the second tier of eligibility. Note that once determined eligible, the child must be considered eligible for a full minimum 12-month eligibility period, even if the parents' income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

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

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

- a. ☒ Not applicable. The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and therefore is not required to provide a graduated phase-out period. (If checked, skip to question 3.1.1.)
- b. ☐ The Lead Agency sets the second tier of eligibility at 85 percent of SMI. If checked, describe the policies and procedures: [Click or tap here to enter text.](#)
 - i. ☐ Lead Agency adjusts the family's co-pay during the graduated phase-out period. If checked, describe how the Lead Agency gradually adjusts co-payment for families under a graduated phase-out period in proportion to a family's income growth. Include information on the percentage or amount of change made in the co-payment during graduated phase-out: [Click or tap here to enter text.](#)
 - ii. ☐ Lead Agency requires additional reporting requirements during the graduated phase-out period. If checked, describe: [Click or tap here to enter text.](#)
- c. ☐ The Lead Agency sets the second tier of eligibility at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold. If checked, provide the following information:

- i. Provide the income level (\$/month) and the percent of SMI for the second tier of eligibility for a family of three: [Click or tap here to enter text.](#)
- ii. Describe how the second eligibility threshold takes into account the typical household budget of a low-income family: [Click or tap here to enter text.](#)
- iii. Describe how the second eligibility threshold is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability: [Click or tap here to enter text.](#)
- iv. Describe how the second eligibility threshold reasonably allows a family to continue accessing child care services without unnecessary disruption: [Click or tap here to enter text.](#)
- v. ☐ Lead Agency adjusts the family's co-pay during the graduated phase-out period. If checked, describe how the Lead Agency gradually adjusts co-payment for families under a graduated phase-out period in proportion to a family's income growth. Include information on the percentage or amount of change made in the co-payment during graduated phase-out: [Click or tap here to enter text.](#)
- vi. ☐ Lead Agency requires additional reporting requirements during the graduated phase-out period. If checked, describe: [Click or tap here to enter text.](#)

3 Child Care Affordability

CCDF subsidies make child care more affordable for eligible families, providing access to a greater range of child care options that allow parents to work, go to school, or enroll in training and they allow parents to access higher quality care options that better support children's development . CCDF requires some families participating in CCDF to pay an affordable co-payment set by the Lead Agency to cover a part of their care. But co-payments can be a significant and destabilizing financial strain on family budgets and a barrier to parent employment, and the CCDBG Act requires that the co-payment amount not be a barrier to families participating in CCDF. Lead Agencies may not set parent co-payments above 7% of family income regardless of gradual phase-out policies and regardless of the number of children receiving assistance. Lead Agencies are encouraged to set co-payments much lower than 7% to make child care more affordable for more families and have broad flexibility to waive co-payments for many participants. Lead Agencies must ensure that the total payment to a child care provider is not reduced because of family's lowered or waived co-payment.

In this section, Lead Agencies will identify how they determine an eligible family's co-payment, the policies in place to waive or ensure co-payments are affordable for families, and how the Lead Agency improves access for children and families in economically and/or socially marginalized communities.

3.1 Family Co-payments

Lead Agencies must establish and periodically revise a sliding-fee scale for families receiving CCDF services that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) and does not create a barrier to receiving CCDF assistance. In addition to income and the size of the family, the Lead Agency may use other factors as

appropriate when determining family contributions/co-payments. Lead Agencies may not use price of care or amount of subsidy payment in determining co-payments. Lead Agencies must ensure that the total payment to a child care provider is not reduced because of family's lowered or waived co-payment.

3.1.1 Family co-payment

Lead Agencies may not charge any family more than 7% of a family's gross income, regardless of the number of children participating in CCDF.

- a. What is the maximum percent of a family's gross income any family could be charged as a co-payment? [1%](#)
- b. Does the Lead Agency certify that their sliding fee scales are always based on income and family size (regardless of how many different scales they may use)?
☐ [X](#) Yes.
☐ No. If no, describe: [Click or tap here to enter text.](#)

3.1.2 Sliding fee scale

Provide the CCDF co-payments for eligible families in the table(s) below according to family size for one child in care.

- a. Is the sliding fee scale set statewide?
☐ [X](#) Yes.
☐ No. If no, describe how the sliding fee scale is set: [Click or tap here to enter text.](#)
- b. Complete the table below. If the sliding fee scale is not set statewide, complete the table for the most populous locality:

	A	B	C	D	E	F
Family Size	Lowest income at initial eligibility where the family is first charged a co-pay (greater than \$0).	What is the monthly co-payment for a family of this size based on the income level in (A)?	What percentage of income is the co-payment in (B)?	Highest income at initial eligibility where a family is charged a co-pay before a family is no longer eligible.	What is the monthly co-payment for a family of this size based on the income level in (D)?	What percentage of income is this co-payment in (E)?
1	\$5,819/mon	\$58.10 full-time	1%	\$6,595/mon	\$65.90 full-time	1%
2	\$5,819/mon	\$58.10 full-time	1%	\$6,595/mon	\$65.90 full-time	1%

3	\$6,593/mon	\$58.10 full-time	1%	\$7,472/mon	\$65.90 full-time	1%
4	\$7,687/mon	\$58.10 full-time	1%	\$8,712/mon	\$65.90 full-time	1%
5	\$8,917/mon	\$58.10 full-time	1%	\$10,106/mon	\$65.90 full-time	1%

- c. What is the effective date of the sliding-fee scale(s)? *July 1, 2024.*
- d. Provide the link(s) to the sliding-fee scale(s): [2024-25 Family Monthly Fee Schedule](#)
- e. Does the Lead Agency allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment?
- ☐ No.
- ☒ Yes.
- If yes:
- i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy does not provide a barrier and promotes affordability and access for families: *Families may choose providers that charge higher rates and must pay the difference between the ceiling and the rate the provider charges. The California Department of Social Services (CDSS) does not have authority under state law to fund the difference in cost between the ceiling and the providers rates. This policy supports the ability of parents to choose any provider, regardless of costs, which provides greater access to choices for vulnerable children and families.*
- ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families: *Families may choose higher rate providers. When doing so, they must pay the difference between the ceiling and the rate the provider charges. While CDSS has not collected data in the past, in fiscal year 2021-22 the budget included a \$4.8 million investment to support planning and initial implementation for the design of a new statewide data system. This system, known as Brilliant Beginnings, will replace the legacy systems that CDSS has been using since the transfer of programs from the California Department of Education. The system will strengthen the administrative process used for data collection and to help mitigate the current data deficit, while also meeting the needs of children, families, and the workforce.*

3.2 Calculation of Co-Payment

Lead agencies must calculate a family's contribution (or co-payment), taking into account income and family size, and Lead Agencies may choose to consider other factors in their calculation.

3.2.1 Family co-payment calculation

a. How is the family's contribution calculated, and to whom is it applied? Check if the fee is a dollar amount or if the fee is a percent of income below, and then check all that apply under the selection, as appropriate.

- i. ☐ The fee is a dollar amount and (check all that apply):
- ☐ The fee is per child, with the same fee for each child.
 - ☐ The fee is per child and is discounted for two or more children.
 - ☐ The fee is per child up to a maximum per family.
 - ☐ No additional fee is charged after a certain number of children.
 - ☐ The fee is per family.
 - ☐ The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe: [Click or tap here to enter text.](#)
 - ☐ Other. Describe: [Click or tap here to enter text.](#)

- ii. ☒ The fee is a percent of income and (check all that apply):
- ☐ The fee is per child, with the same percentage applied for each child.
 - ☐ The fee is per child, and a discounted percentage is applied for two or more children.
 - ☐ The fee is per child up to a maximum per family.
 - ☐ No additional percentage is charged after a certain number of children.
 - ☒ The fee is per family.
 - ☐ The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe: [Click or tap here to enter text.](#)
 - ☐ Other. Describe: [Click or tap here to enter text.](#)

b. Does the Lead Agency use other factors in addition to income and family size to determine each family's co-payment? (Lead Agencies may not use price of care or amount of subsidy payment in determining co-payments).

☐ No.

☒ Yes.

If yes, check and describe those additional factors below:

- i. ☒ Number of hours the child is in care. Describe: *Families with a certified need for services under 130 hours per month will be assessed a part-time fee; families with a certified need for services of 130 hours or more per month will be assessed a full-time fee.*
- ii. ☐ Quality of care (as defined by the Lead Agency). Describe: [Click or tap here to enter text.](#)
- iii. ☐ Other. Describe: [Click or tap here to enter text.](#)

- c. Describe any other policies the Lead Agency uses in the calculation of family co-payment to ensure it does not create a barrier to access. Check all that apply:
- i. ☐ Base co-payments on only a portion of the family's income. For instance, only consider the family income over the federal poverty level.
 - ii. ☐ Base co-payments on the number of children in the family and reduce a portion of the co-payments as the number of children being served increases.
 - iii. ☐ Other. Describe: [Click or tap here to enter text.](#)

3.3 Waiving Family Co-payment

3.3.1 Waiving family co-payment

The Lead Agency may waive family contributions/co-payments for many families to lower their costs and maximize affordability for families. Lead Agencies have broad flexibility in determining for which families they will waive co-payments.

Does the Lead Agency waive family contributions/co-payments?

- ☐ No, the Lead Agency does not waive any family contributions/co-payments. (Skip to question 4.1.1.)
- ☒ Yes. If yes, identify and describe which family contributions/co-payments waived.
 - i. ☒ Families with an income at or below 100% of the Federal Poverty Level for families of the same size.
 - ii. ☒ Families with an income above 100% but at or below 150% of the Federal Poverty Level for families of the same size.
 - iii. ☐ Families experiencing homelessness.
 - iv. ☐ Families with children with disabilities.
 - v. ☐ Families enrolled in Head Start or Early Head Start.
 - vi. ☒ Children in foster care or kinship care, or otherwise receiving or needing to receive protective services. Describe the policy: *Families with children who have been identified as, at risk of being, abused, neglected, or exploited may be exempt from paying a family fee for 12 months when the referral indicates that the fee is waived [Welfare and Institutions Code (WIC) Section 10291(a)]. Families with children who are receiving Child Protective Services may be exempt from paying a family fee for 12 months [WIC Section 10291(a)].*
 - vii. ☒ Families meeting other criteria established by the Lead Agency. Describe the policy: *Families with an adjusted monthly family income below 75 percent of the state median income. [WIC Section 10290(e)(2)(B)]. Families receiving CalWORKs cash aid [WIC Section 10291(b)]. Families enrolled in the Federal Based Migrant Program and those receiving Child Care and Development Services for Children with Special Needs (CHAN) [California Code of Regulations, Title 5 Sections 18110 (c) and (d)]. Families "experiencing homelessness" are exempt from paying family fees in San Francisco County as stated in their Child Care Subsidy Plans which allow approved policy flexibilities to supersede state*

law (WIC Chapter 19 commencing with Section 10350 and Chapter 20 commencing with Section 10360). Additionally, families enrolled through the Children with Severe Disabilities program are exempt from paying family fees.

4 Parental Choice, Equal Access, Payment Rates, and Payment Practices

Core purposes of CCDF are to provide participating parents' choice in their child care arrangements and provide their children with equal access to child care compared to those children not participating in CCDF. CCDF requirements approach equal access and parental choice comprehensively to meet these foundational program goals. Providing access to a full range of child care providers helps ensure that families can choose a child care provider that meets their family's needs. CCDF payment rates and practices must be sufficient to support equal access by allowing child care providers to recruit and retain skilled staff, provide high-quality care, and operate in a sustainable way. Supply-building strategies are also essential.

This section addresses many of the CCDF provisions related to equal access, including access to the full range of providers, payment rates for providers, co-payments for families, payment practices, differential payment rates, and other strategies that support parental choice and access by helping to ensure that child care providers are available to serve children participating in CCDF.

In responding to questions in this section, OCC recognizes that each Lead Agency identifies and defines its own categories and types of care. OCC does not expect Lead Agencies to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

4.1 Access to Full Range of Provider Options

Lead Agencies must provide parents a choice of providers and offer assistance with child care services through a child care certificate (or voucher) or with a child care provider that has a grant or contract for the provision of child care services. Lead Agencies are reminded that policies and procedures should not restrict parental access to any type or category of care or provider (e.g., center care, home care, in-home care, for-profit provider, non-profit provider, or faith-based provider, etc.).

4.1.1 Parent choice

- a. Identify any barriers to provider participation, including barriers related to payment rates and practices, (including for family child care and in-home providers), based on provider feedback, public comment, and reports to the Lead Agency: *The California Department of Social Services and other state representatives meet regularly with the Child Care Providers United - CA (CCPU), a provider organization which acts as the representative for the family child care homes and family, friend and neighbor child care and development workforce on matters related to child care subsidy programs. Assembly Bill (AB) 378 (Chapter 385, Statutes of 2019), established the scope of representation of the CCPU, and requires the Governor, through a California Department of Human Resources designee, to meet and confer in good faith on all matters within the scope of representation (also established via AB 378). The scope of bargaining includes many issues that have been identified by providers and public comments as barriers to provider participation, including barriers related to payment*

rates and practices, such as a need for rates that cover the cost of care, the impact of the expansion of transitional kindergarten on the definitions of part-time and full-time care, and the need for reimbursement based on certified need, as well as payment timeliness. Article 7 of the successor Agreement between State of California and Child Care Providers Union contains provisions that address barriers related to payment rates and practices. Some of the provisions became effective upon full ratification of the Agreement via SB 140 on September 13, 2023. Those re-defining part-time and full-time care and related to the timeliness of payments, became effective March 1, 2024. The Agreement calls for submission of necessary information to support use of a Single Rate Structure utilizing the Alternative Methodology to the Administration for Children and Families no later than July 1, 2024. Center-based providers, who are not represented by CCPU, have identified similar barriers regarding provider participation, including during the Universal Pre-Kindergarten (UPK) Mixed Delivery Quality and Access Workgroup and Rate and Quality Advisory Panel meetings. The Senate Bill 140 incorporated provisions parallel to those in the Agreement in order to address these barriers for centers. Additionally, in recent state plan input sessions, our community partners have highlighted the importance of providing clear communications via Child Care Bulletins on how to implement these new requirements and the Department of Social Services is working to release Child Care Bulletins as needed.

- b. Does the Lead Agency offer child care assistance through vouchers or certificates?
☐ X Yes.
☐ No.
- c. Does the Lead Agency offer child care assistance through grants or contracts?
☐ X Yes.
☐ No.
- d. Describe how the parent is informed that the child care certificate allows the option to choose from a variety of child care categories, such as private, not-for-profit, faith-based providers; centers; family child care homes; or in-home providers: *The contracting agency responsible for enrolling and certifying will inform the family of their child care options. Contractors will support the family in identifying a provider that meets their child care needs while maximizing parental choice. For voucher-based programs, the Child Care Certificate is not linked to a specific provider. Contractors work with the resource and referral agency staff using a database called MyChildCarePlan.org that includes a full range of existing child care services available within the family's geographical area per Welfare and Institution Code ([WIC 10219\(a\)\(1\)\(A\)](#)). The site is available statewide and allows families to enter their zip code to get connected with the resource and referral program that provides referral services in their area as well as see a list of providers ([Find Child Care](#)). The database contains a full range of child care options such as family child care home, public and private child care, full and part-time, infant, toddler, preschool, and school age. Families identify preferences and the database provides options for the family including: type of program, hours of service, ages of children served, fees and eligibility for service, and program information. Some alternative payment program agencies are co-located with a resource and referral program and will collaborate with the voucher*

staff enrolling the family to provide them with a list of providers in their area that meet their child care preferences. Resource and referral programs are required per WIC 10219(2)(A)(ii) to publicize their services through a range of media sources such as, but not limited to, social media, radio, and fliers. Direct service, voucher based, and resource and referral programs must develop and provide written materials on the services available to families related to their contract type and make them available to the public via hard copy and/or electronically. Within the written materials voucher-based programs will identify the range of providers and services available to families to select from to support parental choice.

- e. *Describe what information is included on the child care certificate: The Child Care Certificate is not provided until the contracting agency completes the Confidential Application for Child Development Services and Certification of Eligibility (CCD 26) and has verified the days and hours of care needed based on eligibility and need documentation provided. The parent will sign the CCD 26 and the agency authorized representative will certify the family for child care services. The agency staff issues a Notice of Action (NOA – CCD 7617) indicating the following information: child(ren) receiving services, start date, parent information, approved days and hours per week, family fee information, eligibility and need criteria coinciding with the supporting documentation, and parent appeal process. If the type of care is direct service, the center information will also be on the NOA, which may act as the Child Care Certificate for some contractors. For other contractors, they may issue a separate Child Care Certificate that includes all the information listed above. For voucher-based programs, the contracting agencies issue the NOA with all the pertinent information. In addition, many agencies provide a Child Care Certificate that includes all the above-mentioned information and the Regional Market Rate Ceiling that is applicable to the type of provider the parent chooses, age of the child, and certified need. To facilitate parental choice, parents are given the flexibility to choose the provider that best fits their wants and needs. In most instances, the parent comes to the agency already having selected a provider. In this case, the Child Care Certificate would already have the provider's name on it.*

4.2 Assess Market Rates and Analyze the Cost of Child Care

To establish subsidy payment rates that ensure equal access, Lead Agencies must collect and analyze statistically valid and reliable data and have the option to conduct either a (1) market rate survey (MRS) reflecting variations in the price to parents of child care services by geographic area, type of provider, and age of child, or (2) an ACF pre-approved alternative methodology, such as a cost estimation model, which estimates the cost of care by incorporating both data and assumptions to estimate what expected costs would be incurred by child care providers and parents under different scenarios. All Lead Agencies must analyze the cost of providing child care through a narrow cost analysis or pre-approved alternative methodology.

Prior to conducting the MRS or pre-approved alternative, Lead Agencies must consult with the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i)) or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities; and organizations representing child care caregivers, teachers, and directors. Prior to conducting the MRS or pre-approved alternative methodology, Lead Agencies must consult with

the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i)) or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities; and organizations representing child care caregivers, teachers, and directors.

Note: Any Lead Agency considering using an alternative methodology instead of a market rate survey to set payment rates, is required to submit a description of its proposed approach to OCC for pre-approval in advance of developing and conducting the alternative methodology. Advance approval is not required if the Lead Agency plans to implement both an MRS and an alternative methodology to set rates at a percentile of the market rate, but a Lead Agency conducting a limited market rate survey and using it to inform their cost model would need pre-approval for this approach. In its request for ACF pre-approval, a Lead Agency must provide details on the following elements of their proposed alternative methodology:

- Overall approach and rationale for using proposed methodology
- Description of stakeholder engagement
- Data collection timeframe (if applicable)
- Description of the data and assumptions included in the methodology, including how these elements will yield valid and reliable results from the model
- Description of how the methodology will capture the universe of providers, and reflect variations by provider type, age of children, geographic location, and quality

4.2.1 Completion of the market rate survey or ACF pre-approved alternative methodology

Did the Lead Agency conduct a statistically valid and reliable MRS or ACF pre-approved alternative methodology to meet the CCDF requirements to assess child care prices and/or costs and determine payment rates? Check only one based on which methodology was used to determine your payment rates.

- a. ☐ Market rate survey.
- i. When were the data gathered (provide a date range; for instance, September – December 2023)? [Click or tap here to enter text.](#)
- b. ☒ ACF pre-approved alternative methodology.
- i. ☐ The alternative methodology was completed.
- ii. ☒ The alternative methodology is in process.

If the alternative methodology was completed:

When were the data gathered and when was the study completed? [Not applicable.](#)

Describe any major differences between the pre-approved methodology and the final methodology used to inform payment rates. Include any major changes to stakeholder engagement, data, assumptions or proposed scenarios. [Click or tap here to enter text.](#)

If the alternative methodology is in progress:

Provide a status on the alternative methodology and timeline (i.e., dates when the

alternative methodology activities will be conducted, any completed steps to date, anticipated date of completion, and expected date new rates will be in effect using the alternative methodology).

Engagement Activities: *California Department of Social Services (CDSS), in partnership with external contractor Prenatal to Five Fiscal Strategies (P5FS), has carried out all of the alternative methodology engagement activities outlined in the approved approach. Seven meetings of the Rate and Quality Advisory Panel (RQAP), a representative community body tasked with advising the alternative methodology process, were held from May 2023 to May 2024. These meetings were open to the public and covered all elements of the process from data collection and provider engagement approach to data analysis to input on cost model functioning and application of selection points within the cost model. The RQAP will continue to meet regularly throughout FY 24-25 to provide feedback to the alternative methodology process. Additionally, the Early Childhood Policy Council (ECPC), California's child care state advisory council, has been engaged through its quarterly meetings in review and advisement on the alternative methodology approach, analysis, and results. Alternative methodology remains a standing topic at ECPC meetings to allow for ongoing updates and opportunities to receive feedback.*

In addition to the official advisory bodies referenced, CDSS and P5FS consulted with many other groups and individuals to inform the cost study and cost model, to assure that all aspects of the work are informed through an equity lens, and to ensure that constituents are fully informed of the alternative methodology approach and able to contribute to related activities. Other advisors who have been consulted at different points in the process have included child care and early learning programs; leaders from groups representing programs and providers; program experts from both CDSS and the California Department of Education (CDE); subject-matter experts from organizations such as the Child Care Law Center, Child Trends, the University of California, Berkeley Center for the Study of Child Care Employment, and the University of Southern California Equity Research Institute; historically marginalized communities, including people of color and tribal communities; organizations that include the child care and early learning workforce in their membership; child care resource and referral agencies; local First 5 commissions; multi-site networks; entities administering subsidy payments and child care and development contracts, and others.

In California, subsidy reimbursement rates and other matters within the scope of representation are bargained by the State and the Child Care Providers United (CCPU) union, which represents family child care providers. In FY23-24, a Rate and Quality System Structure Review Joint Labor Management

Committee comprised of representatives from the State and CCPU met and arrived at consensus on the elements of the new Single Rate Structure to be informed by alternative methodology.

These constituents have been engaged both before and after data collection to provide content input on the cost survey approach and reach; the elements that frame the model; the cost estimation model; and the model's data-gathering and analysis assumptions.

Cost Study and Data Collection: *To address the alternative methodology process, P5FS developed a comprehensive data collection and analysis plan, which was reviewed and informed by feedback from CDSS, CDE, CCPU and the RQAP. This same group of stakeholders was continuously engaged throughout the data collection and analysis phase to help guide the various activities of the workplan, including development of questions for the survey and input sessions. Data collection to inform the alternative methodology cost model was conducted in multiple ways to ensure that the full universe of California child care providers and programs was represented. In total, some 1,000 organizations were included in the outreach plan. Methods of data collection included the following:*

Survey: *The survey was administered from July through October 2023 in several languages, including English, Spanish, Mandarin, Cantonese, Russian, Somali and Arabic. The survey was promoted through multiple distribution and communication channels, including through email, direct mail, newsletters, meeting announcements and use of incentives. The survey sought to understand current provider/program costs and how costs differ by county, provider type, characteristics of children and families served, child ages served, and community need index. All child care and development and preschool providers, including child care and development centers, family child care homes, tribal programs, and license-exempt family, friend, and neighbor providers were invited to complete the survey. Responses were analyzed and underrepresented groups received additional outreach.*

Input sessions: *Beginning in July 2023, over 100 input sessions were scheduled across multiple dates and times in English, Spanish, Arabic and Somali. The goal of these sessions was to gather more in-depth, qualitative data on the barriers to providing quality care and the costs that providers/programs face, and to gain a deeper understanding of true costs. Sessions explored richer and more detailed data beyond what can be collected in a survey, and facilitated understanding of what it should cost to run a program, as opposed to the current costs, which reflect current market rates and parents' ability to pay. All providers invited to complete the survey were also invited to a virtual input*

session, as were other entities that work with providers/programs.

Interviews: To facilitate access for providers/programs who were unable, or preferred not to, complete a survey, P5FS conducted one-on-one interviews to collect their data.

Topical ad-hoc groups: To broaden the input gathered and understand costs related to serving children and families in special circumstances, from October to December 2023 P5FS also hosted eight "ad hoc groups" to hear from various entities that support providers. The ad hoc session topics included: Family Child Care Home Education Networks, Multi-Language Learners, Children Experiencing Delays and Disabilities, Care During Non-Traditional Hours, Geographic Considerations, Migrant Programs, California State Preschool Programs and Child Welfare. The goal of these sessions was to understand how costs, cost drivers and barriers to quality differ for providers serving children in special circumstances.

In total, P5FS received input from over 10,000 providers across the State through the survey and/or input sessions. The respondents were 58% family child care providers, 27% centers, and 15% friend, family and neighbor (FFN) providers. Data on the number of unlicensed FFN providers in California is not available, but P5FS was able to analyze the proportionate participation of licensed family child care and center providers. To do so, FFN providers were removed from the total count of respondents, revealing that among licensed providers, FCCs represented 69% of participants in the data gathering as compared to 71% of all licensed providers in California, and centers represented 31% of participants in the data gathering as compared to 29% of all licensed facilities. Furthermore, participants came from all of California's 58 counties, and their geographic distribution closely mirrored the distribution of all licensed programs (both FCCs and centers) across counties. A total of 464 participants engaged in over 100 input sessions conducted both virtually and in person. The vast majority of participants were FCC home providers who made up around 80% of participants. Center based participants represented 19% of participants, and FFNs represented 2%.

Cost Model Development: The state of California, in partnership with RQAP, CDE, CCPU, the ECPC, and other partners, developed a dynamic cost estimation tool. The cost estimation model that P5FS developed for California is a robust analytic and modeling tool informed by data from alternative methodology data collection activities in 2023. The tool allows users to understand how the cost of care changes depending upon variables such as licensing requirements, program type, characteristics and ages of children served, number of children served, geographic location, contract regulations for contracted slots and

others. In addition, the tool factors in subsidy levels and other forms of revenue, providing insight into the extent to which current revenue levels support or fall short of expenses under different scenarios.

Rate Setting and Implementation: The final step of the alternative methodology process, rate setting and implementation, is pending completion aligning with the State's FY 25-26 budget development cycle. At this step, the cost estimation model will be used to inform the State's rate setting and implementation. Pursuant to the 2023-2025 Memorandum of Understanding (MOU) with CCPU, rate setting will occur following Administration for Children and Families (ACF) approval of the July 2024 CCDF State Plan submission. Within 60 days of federal approval of the July 2024 State Plan submission, the department shall provide CCPU and also the Senate Health and Human Services budget subcommittees, Assembly and Senate Education budget subcommittees, and the Legislative Analyst's Office an outline of implementation components for the approved single rate structure. For a period of 30 days, the Legislature and CCPU will have the opportunity to review and provide feedback regarding draft guidance for implementation of policies. At 90 days subsequent to ACF approval, the State and CCPU will re-open the Articles of the MOU related to Rates and the Cost of Care Plus Rate for good faith negotiations to restructure the current subsidy reimbursement rates, and the associated funding, to be applied to family child care providers consistent with the ACF-approved Single Rate Structure, and the implementation thereof. Rate setting will occur for non-CCPU- represented provider/program types through the budget process, concurrent with and informed by rate negotiations for family child care providers. Rates will take effect when any other activities reasonably necessary to implementation have occurred such as regulatory and policy guidance, training for contractors, and updates to contracts and necessary data systems.

c. Consultation on data collection methodology.

Describe when and how the Lead Agency engaged the following partners and how the consultation informed the development and execution of the MRS or alternative methodology, as appropriate.

- i. State Advisory Council or similar coordinating body: *A central component of (P5FS's approach to conducting the alternative methodology is broad engagement with diverse early care and education entities and partners across the State. The Early Childhood Policy Council (ECPC) has 27 members appointed by the Governor and the Legislature and includes both a Parent and a Workforce Advisory Committee. As stated on the ECPC webpage, it was established "...to elevate the needs of young children and their families as well as advise the Governor, Legislature, and Superintendent of Public Instruction on statewide early learning and care and child development." The ECPC is*

comprised of a diverse group of individuals who are experts, including practitioners in the early learning and care field as well as parents and providers. The ECPC and Parent and Workforce Advisory Committees reviewed and provided advisement on all aspects of the alternative methodology approach, analysis, and results through their regularly scheduled meetings. During the meetings, the CCDF administrator gave updates on the progress of implementation and elicited input from the council members.

- ii. Local child care program administrators: *The CDSS and P5FS also consulted with a diverse group of advisors to support cost model development and ensure all aspects of the cost model development and alternative methodology activities are informed through an equity lens. These advisors consisted of child care and early learning programs, leadership from groups representing programs and providers, and program experts from both the CDSS and CDE.*
- iii. Local child care resource and referral agencies: *The CDSS and P5FS also conducted listening sessions with organizations that included the child care and early learning workforce in their membership, child care resource and referral agencies, local First 5 commissions, multi-site networks, entities administering subsidy payments and child care contracts, and others. Engagement with these groups was intended to ensure that constituents have a full understanding of and can contribute to the alternative methodology approach, the requests related to data collection, and the anticipated benefits of the cost-based approach to rate setting.*
- iv. Organizations representing child care caregivers, teachers, and directors from all settings and serving all ages: *Several program and provider groups and entities representing the child care and early learning sector have been involved in rate reform work in California for the last several years, including providing guidance on the development of the cost model tools. A Rate & Quality Systems Joint Labor Management Committee and the California Rate and Quality Workgroup (both legislatively formed to respond to the need for subsidy rate reform in the state) were active advisors in a cost modeling process that informed the final report from Rate and Quality Workgroup, which included a recommendation to move to a cost-based approach to rate setting and to pursue alternative methodology for California's Child Care and Development Fund (CCDF) rate setting. The Rate and Quality Workgroup was charged with assessing the methodology for establishing reimbursement rates and the existing quality standards for child care and development and preschool programs, including, but not limited to, licensing standards and regulations for equity and accessibility to all program types and settings.*
- v. Other. Describe: *Click or tap here to enter text.*

d. An MRS must be statistically valid and reliable.

An MRS can use administrative data, such as child care resource and referral data, if it is representative of the market. Please provide the following information about the market rate survey:

- i. When was the market rate survey completed? *Not applicable.*
- ii. What was the time period for collecting the information (e.g., all of the prices in

- the survey are collected within a three-month time period)? *Not applicable.*
- iii. Describe how it represented the child care market, including what types of providers were included in the survey: *Not applicable.*
 - iv. What databases are used in the survey? Are they from multiple sources, including licensing, resource and referral, and the subsidy program? *Not applicable.*
 - v. How does the survey use good data collection procedures, regardless of the method for collection (mail, telephone, or web-based survey)? *Not applicable.*
 - vi. What is the percent of licensed or regulated child care centers responding to the survey? *Not applicable.*
 - vii. What is the percent of licensed or regulated family child care homes responding to the survey? *Not applicable.*
 - viii. Describe if the survey conducted in any languages other than English: *Not applicable.*
 - ix. Describe if data were analyzed in a manner to determine price of care per child: *Not applicable.*
 - x. Describe if data were analyzed from a sample of providers and if so, how the sample was weighted: *Not applicable.*
- e. Price variations reflected.

The market rate survey data or ACF pre-approved alternative methodology data must reflect variations in child care prices or cost of child care services in specific categories.

- i. Describe how the market rate survey or pre-approved alternative methodology reflected variation in geographic area (e.g., county, region, urban, rural). Include information on whether parts of the State or Territory were not represented by respondents and include information on how prices or costs could be linked to local geographic areas. *California's data collection using alternative methodology included a survey, interviews and over 100 virtual input sessions, which yielded feedback from over 10,000 providers representing the full diversity of the state's child care and development field. Additionally, a focus group was held to drill down on geographic considerations in the cost of care. Researchers gathered cost data, analyzed it by sub-state regions and took steps to ensure that cost study respondents were representative of each geographic region. Where available and appropriate, extant data on costs at the sub-state level were utilized. For example, various sources of wage data available at the sub-state level were utilized to understand regional variation in wages and cost of living (i.e., minimum wage data, Bureau of Labor Statistics data and data from the MIT Living Wage Calculator).*
- ii. Describe how the market rate survey or pre-approved alternative methodology reflected variation in type of provider (e.g., licensed providers, license-exempt providers, center-based providers, family child care home providers, home based providers). *California's data collection using alternative methodology included a survey, interviews and over 100 virtual input sessions, which yielded feedback from over 10,000 providers representing the full diversity of the state's child care and development field. Additionally, focus groups were held to drill down on*

considerations specific to certain types of providers, such as state preschool programs and Family Childcare Home Education Networks. Participating providers included license-exempt friend, family and neighbor providers, licensed home-based providers, licensed center-based providers and state preschool programs. Data was disaggregated and analyzed by provider type.

- iii. Describe how the market rate survey or pre-approved alternative methodology reflected age of child (e.g., infant, toddler, preschool, school-age): *California's data collection using alternative methodology included a survey, interviews and over 100 virtual input sessions, which yielded feedback from over 10,000 providers representing the full diversity of the state's child care and development field. Participating providers served the full array of children from birth to age 13. Data was disaggregated and analyzed by age of child served.*
- iv. Describe any other key variations examined by the market rate survey or ACF pre-approved alternative methodology, such as quality level: *Focus groups were held on special topics to better understand the drivers of quality and the associated cost of care. For example, focus groups explored what it takes to effectively serve multi-language learners, children experiencing delays and disabilities, children in migrant families, and child welfare involved children.*

4.2.2 Cost analysis

If a Lead Agency does not complete a cost-based pre-approved alternative methodology, they must analyze the cost of providing child care services through a narrow cost analysis. A narrow cost analysis is a study of what it costs providers to deliver child care at two or more levels of quality: (1) a base level of quality that meets health, safety, staffing, and quality requirements, and (2) one or more higher levels of quality as defined by the Lead Agency. The narrow cost analysis must estimate costs by levels of quality; include relevant variation by provider type, child's age, or location; and analyze the gaps between estimated costs and payment rates to inform payment rate setting. Lead agencies are not required to complete a separate narrow cost analysis if their pre-approved alternative methodology addresses all of the components required in the narrow cost analysis.

Describe how the Lead Agency analyzed the cost of child care through a narrow cost analysis or pre-approved alternative methodology for the FFY 2025–2027 CCDF Plan, including:

- a. How did the Lead Agency conduct a narrow cost analysis (e.g., a cost model, a cost study, existing data or data from the Provider Cost of Quality Calculator)? *California is in the process of completing the Administration for Children and Families (ACF) pre-approved Alternative Methodology. Therefore, a narrow cost analysis was not conducted.*
- b. In the Lead Agency's analysis, were there any relevant variations by geographic location, category of provider, or age of child? *California is in the process of completing the ACF pre-approved Alternative Methodology. Once finalized, the State Plan will be updated with this response.*
- c. What assumptions and data did the Lead Agency use to determine the cost of care at the base level of quality (e.g., ratios, group size, staff compensations, staff training, etc.)? *California is in the process of completing the ACF pre-approved Alternative Methodology. Once finalized, the State Plan will be updated with this response.*
- d. How does the Lead Agency define higher quality and what assumptions and data did the

Lead Agency use to determine cost at higher levels of quality (e.g., ratio, group size, staffing levels, staff compensation, professional development requirements)? A Lead Agency can use a quality improvement system or other system of quality indicators (e.g., accreditation, pre-Kindergarten standards, Head Start Program Performance Standards, or State-defined quality measures). *California is in the process of completing the ACF pre-approved Alternative Methodology. Once finalized, the State Plan will be updated with this response.*

- e. What is the gap between cost and price, and how did the Lead Agency consider this while setting payment rates? Did the Lead Agency target any rate increases where gaps were the largest or develop any long-term plans to increase rates based on this information? *California is in the process of completing the ACF pre-approved Alternative Methodology. Once finalized, the State Plan will be updated with this response.*

4.2.3 Publicly available report on the cost and price of child care

The Lead Agency must prepare a detailed report containing the results of the MRS or ACF pre-approved alternative methodology and include the Narrow Cost Analysis if an ACF pre-approved alternative methodology was not conducted.

The Lead Agency must make this report widely available no later than 30 days after completion of the report, including posting the results on the Lead Agency website. The Lead Agency must describe in the detailed report how the Lead Agency took into consideration the views and comments of the public or stakeholders prior to conducting the MRS or ACF pre-approved alternative methodology.

Describe how the Lead Agency made the results of the market rate survey or ACF pre-approved alternative methodology report widely available to the public by responding to the questions below.

- i. Provide the date the report was completed: *California is in the process of completing the Administration for Children and Families (ACF) pre-approved Alternative Methodology. A detailed cost estimation report presenting the results of California's alternative methodology process will be submitted to the ACF by July 1, 2025. Once finalized, the State Plan will be amended to update this response.*
- ii. Provide the date the report containing results was made widely available (no later than 30 days after the completion of the report): *California is in the process of completing the ACF pre-approved Alternative Methodology. A detailed cost estimation report presenting the results of California's alternative methodology process will be publicly posted within 30 days of completion of the report, i.e., by August 1, 2025). Once finalized, the State Plan will be amended to update this response.*
- iii. Provide a link to the website where the report is posted and describe any other strategies the Lead Agency uses to make the detailed report widely available: *California is in the process of completing the ACF pre-approved Alternative Methodology. Once the detailed cost estimation report is completed, it will be posted to the Lead Agency's Rate Reform and Quality website at <https://www.cdss.ca.gov/inforesources/child-care-and-development/rate-reform-and-quality>.*

- iv. Describe how the Lead Agency considered partner views and comments in the detailed report. Responses should include which partners were engaged and how partner input influenced the market rate survey or alternative methodology: *California is in the process of completing the ACF pre-approved Alternative Methodology. Since launching its alternative methodology process in Spring of 2023, California has facilitated broad engagement with a diversity of early care and education entities and partners across the state. Formal bodies with an advisory and/or decision-making role in rate reform have included the ECPC, the RQAP, and the Rate and Quality System Structure Review Joint Labor Management Committee. Additionally, over 10,000 providers of all types participated in the alternative methodology data collection process. California's detailed cost estimation report, which will be submitted to the ACF in July 2025, will include a more detailed description of how partner feedback was solicited and utilized throughout the alternative methodology process.*

4.3 Adequate Payment Rates

The Lead Agency must set CCDF subsidy payment rates in accordance with the results of the current MRS or ACF pre-approved alternative methodology and at a level to ensure equal access for eligible families to child care services comparable with those provided to families not receiving CCDF assistance. Lead Agencies are also required to provide a summary of data and facts to demonstrate how payment rates ensure equal access, which means the Lead Agency must also consider the costs of base level care and higher quality care as part of its rate setting. Finally, the Lead Agency must re-evaluate its payment rates at least every 3 years.

The ages and types of care listed in the base payment rate tables are meant to provide a snapshot of the categories of rates and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. If rates are not statewide, please provide all variations of payment rates when reporting base payment rates below.

Base rates are the lowest, foundational rates before any differentials are added (e.g., for higher quality or other purposes) and must be sufficient to ensure that minimum health, safety, quality, and staffing requirements are covered. These are the rates that will be used to determine compliance with equal access requirements.

4.3.1 Payment rates

- a. Are the payment rates that the Lead Agency is reporting in 4.3.2 set statewide by the Lead Agency?
- ☐ Yes.
- i. If yes, check if the Lead Agency:
- ☐ Sets the same payment rates for the entire State or Territory.
- ☒ Sets different payment rates for different regions in the State or Territory. *Statewide payment rates are determined in the annual budget act, as passed by the legislature and approved by the Governor. State law permits the City and County of San Francisco and the County of San Mateo to develop and implement individualized county childcare subsidy plans to address local needs, conditions, and priorities of working families in the community.*

☐ No.

ii. If no, identify how many jurisdictions set their own payment rates:

- b. Provide the date the current payment rates became effective (i.e., date of last payment rate update based on most recent MRS or ACF pre-approved alternative methodology as reported in 4.2.1). *January 1, 2022.*
- c. If the Lead Agency does not publish weekly rates, then how were the rates reported in 4.3.2 or 4.3.3 calculated (e.g., were daily rates multiplied by 5 or monthly rates divided by 4.3)? *The Lead Agency publishes weekly rates.*

4.3.3 Base payment rates

- a. Provide the base payment rates in the tables below. If the Lead Agency completed a market rate survey (MRS), provide the percentiles based on the most recent MRS for the identified categories. If the Lead Agency sets different payment rates for different regions in the State or Territory (and checked 4.3.1aii), provide the rates for the most populous region as well as the region with payment rates set at the lowest percentile. Percentiles are not required if the Lead Agency also conducted an ACF pre-approved alternative methodology but must be reported if the Lead Agency conducted an MRS only.

The preamble to the 2016 final rule states that a benchmark for adequate payment rates is the 75th percentile of the most recent MRS. The 75th percentile benchmark applies to the base rates. The 75th percentile is the number separating the lowest 75 percent of rates from the highest 25 percent. Setting rates at the 75th percentile, while not a requirement, would ensure that eligible families can afford three out of four child care providers. In addition to reporting the 75th percentile in the tables below, the Lead Agency must also report the 50th percentile and 60th percentile for each identified category.

If the Lead Agency conducted an ACF pre-approved alternative methodology, provide the estimated cost of care for the identified categories, as well as the percentage of the cost of care covered by the established payment rate. If the Lead Agency sets different payment rates for different regions in the State or Territory (and checked 4.3.1aii), provide the estimated cost of care and the percentage of the cost of care covered by the established payment rate for the most populous region as well as the region with rates established at the lowest percent of the cost of care.

For each identified category below, provide the percentage of providers who are receiving the base rate without any add-ons or differential payments.

Provide the full-time weekly base payment rates in the table below. If weekly payment rates are not published, then the Lead Agency will need to calculate its equivalent.

Care Type	Base payment rate (specify unit, e.g., per day, per week, per month)	% of providers receiving Base rate	Full-Time Weekly Base Payment Rate	What is the percentile of the rate? (MRS)	What is the 50th percentile of the rate? (MRS)	What is the 60th percentile of the rate? (MRS)	What is the 75th percentile of the rate? (MRS)	What is the estimated cost of care? (Alternative Methodology)	What percent of the estimated cost of care is the rate?
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Center Care for Infants (6 months)	\$456.19 per week	11.2	\$455.75	75th	\$397.98	\$424.99	\$455.75	n/a	n/a
Family Child Care for Infants (6 months)	\$319.69 per week	16.7	\$317.45	75th	\$249.71	\$283.22	\$317.45	n/a	n/a
Center Care for Toddlers (18 months)	\$456.19 per week	25.3	\$455.75	75th	\$397.98	\$424.99	\$455.75	n/a	n/a
Family Child Care for Toddlers (18 months)	\$319.69 per week	21.1	\$317.45	75th	\$249.71	\$283.22	\$317.45	n/a	n/a
Center Care for Preschoolers (4 years)	\$370.29 per week	32.2	\$357.42	75th	\$296.94	\$314.88	\$357.42	n/a	n/a
Family Child Care for Preschoolers (4 years)	\$287.28 per week	23.8	\$290.46	75th	\$232.16	\$248.09	\$290.46	n/a	n/a
Center Care for School-Age (6 years)	\$274.55 per week	31.4	\$273.60	75th	\$225.51	\$242.38	\$273.60	n/a	n/a
Family Child Care for School-Age (6 years)	\$215.56 per week	38.5	\$223.29	75th	\$187.53	\$199.32	\$223.29	n/a	n/a

- b. Does the Lead Agency certify that the percentiles reported in the table above are calculated based on their most recent MRS or ACF pre-approved Alternative Methodology?

☐ Yes.

☒ No. If no, what is the year of the MRS or ACF pre-approved alternative methodology that the Lead Agency used? What was the reason for not using the most recent MRS or ACF pre-approved alternative methodology? Describe: *Current base payment rates, prior to more recent rate add-ons above the base payment rate (see section 4.3.3.a), were established pursuant to negotiated agreement between the State and the Child Care Providers United union (CCPU) for represented home-based providers and through parity legislation in the form of Assembly Bill (AB) 131 (Chapter 116 of the Statutes of 2021), which was signed into law on July 23, 2021. At that time, the most recent MRS had been completed in 2018. The percentiles reported in the table are therefore based on the MRS completed in 2018. The most recent MRS was*

completed in 2022 based on 2021 data. The successor Agreement negotiated between the State and CCPU in 2023 established the one-time transitional and monthly “cost of care plus” rate add-ons described below in section 4.3.3.a, and a structured timeline for transitioning to a cost-based Alternative Methodology, rather than changing the base payment rates. The Administration for Children and Families (ACF) pre-approved California moving to an Alternative Methodology in August 2023. California collected data pursuant to this pre-approval in 2023 and is in the process of completing the Alternative Methodology, based on the collected data. California will set new base rates based on the Alternative Methodology by July 1, 2025. Once the new base rates are finalized, the State Plan will be amended to update this response.

4.3.4 Tiered rates, differential rates, and add-ons

Lead Agencies may establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (e.g., a higher rate for serving children with special needs).

c. Does the Lead Agency provide any rate add-ons above the base rate?

☒ *X Yes. If yes, describe the add-ons, including what they are, who is eligible to receive the add-ons, and how often are they paid: Through July 1, 2025, all providers who participate in state funded child care and development programs are eligible to receive add-ons on top of their base rates. The add-ons were negotiated pursuant to an Agreement between the State and Child Care Providers United (CCPU), and to Senate Bill (SB) 140, which ratified the Agreement and added parity provisions for center-based providers, which are not represented by CCPU. The Agreement and SB 140 allocated funds to provide family childcare providers, which include both licensed and license-exempt (so-called “family, friend, and neighbor”) home-based providers, and childcare centers with a cost of care plus rate and a flat-rate, one-time payment intended to supplement the subsidized childcare and development and state preschool program reimbursement rates.*

The one-time payment was due no later than November 30, 2023, to all family child care providers who were reimbursed for subsidized childcare and development or state preschool program services in the month of April 2023. The payment amounts were based on provider type: five hundred dollars (\$500) per each license-exempt family childcare provider; two thousand five hundred dollars (\$2,500) per each family childcare provider licensed to operate a small, licensed family daycare home, as defined in subdivision (c) of Section 1596.78 of the Health and Safety Code; and three thousand dollars (\$3,000) per each family childcare provider licensed to operate a large, licensed family daycare home, as defined in subdivision (b) of Section 1596.78 of the Health and Safety Code and for each center. While centers, like large, licensed family child care home, received a one-time payment of three thousand dollars (\$3,000) it was due to them in the 2023-24 state fiscal year (by June 30, 2024), rather than by November 30, 2023.

*The amount per child ranges between ninety-eight dollars (\$98) and two-hundred and eleven dollars (\$211) per month, determined based on the provider type and the region in which the provider is located. The Agreement between the State and CCPU, and SB 140, defined the regions as follows: **Central Region** to include the Counties of Fresno, Inyo, Kern, Kings, Madera, Mariposa, Merced, Monterey, Sacramento, San Benito, San Joaquin, San Luis Obispo,*

Stanislaus, and Tulare. The **Northern Region** includes the Counties of Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Mono, Nevada, Placer, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Tuolumne, Yolo, and Yuba. The **Southern Region** includes the Counties of Imperial, Orange, Riverside, San Bernardino, San Diego, Santa Barbara, and Ventura. The **Los Angeles Region** includes the County of Los Angeles only. The **Bay Area Region** includes the Counties of Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, and Sonoma. Providers in the Central region receive ninety-eight dollars (\$98) per each license-exempt family childcare provider, and one hundred forty dollars (\$140) per each licensed family childcare provider or center. Providers in the Northern region, ninety-nine dollars (\$99) per each license-exempt family childcare provider, and one hundred forty-one dollars (\$141) per each licensed family childcare provider or center. For providers in the Southern region, one hundred twelve dollars (\$112) per each license-exempt family childcare provider, and one hundred sixty dollars (\$160) per each licensed family childcare provider or center. For providers in the Los Angeles region, one hundred nineteen dollars (\$119) per each license-exempt family childcare provider, and one hundred seventy-one dollars (\$171) per each licensed family childcare provider or center. For family childcare providers in the Bay Area region, monthly per-child rate supplements shall be made in the amount of one hundred forty-eight dollars (\$148) per each license-exempt family childcare provider, and two hundred eleven dollars (\$211) per each licensed family childcare provider or center.

All providers receive monthly cost of care plus rates for a period of 18 months, but for administrative reasons some begin to receive the 18 months of payments on a schedule that begins a few months later than other providers. Family child care providers except for those participating in Emergency Child Care Bridge or CalWORKs Stage One programs administered by Counties, themselves, received monthly cost of care plus rates, commencing January 1, 2024, and through June 30, 2025, inclusive. All providers, whether family child care providers or centers, participating in Emergency Child Care Bridge or CalWORKs Stage One programs administered by Counties, themselves rather than through contractors, and all centers participating in any of the State's child care and development programs, began to receive monthly cost of care plus rates beginning in April 2024.

☐ No.

d. Has the Lead Agency chosen to implement tiered reimbursement or differential rates?

☒ Yes.

☐ No. Tiered or differential rates are not implemented.

If yes, identify below any tiered or differential rates, and, at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS or an ACF pre-approved alternative methodology. Check and describe all that apply:

- i. ☒ Differential rate for non-traditional hours. Describe: *California Code of Regulations, Title 5, (5CCR) Section 18075.1. Adjustment for Evenings and/or Weekends for Licensed Providers: When a licensed provider is meeting the certified need for child care that includes hours during the period from 6:00 p.m. to 6:00 a.m. on any day of the week or from 6 a.m. Saturday to 6:00 a.m. Monday, the contractor shall multiply the regional market rate ceiling for the*

applicable rate category by the appropriate adjustment factor as follows: By 1.25 when 50 percent or more of the certified need for child care occurs during this period. By 1.125 when at least ten percent, but less than 50 percent of the certified need for child care occurs during this period.

- ii. ☒ *X* Differential rate for children with special needs, as defined by the Lead Agency. Describe: *For programs reimbursed at the Standard Reimbursement Rate (SRR), children with exceptional needs are provided an SRR-related adjustment factor of 1.54 and severely disabled children are reimbursed by the adjustment factor of 1.93. For voucher-based programs reimbursed at the Regional Market Rate, 5 CCR Section 10875.2. stipulates: When child care and development services are provided to a child with exceptional needs, the contractor shall multiply the lesser of the regional market rate ceiling or the rate determined pursuant to Section 18074.3 or 18074.4, whichever is lower, by only one of the following: By 1.2, when the child has exceptional needs as defined in Welfare and Institutions Code Section 10213.5(l). Or by 1.5, when the child is severely disabled as defined in Welfare and Institutions Code Section 10213.5(y). Contractors shall apply this adjustment only when there is documentation that additional services and/or accommodations for that particular child are being provided, and such services and/or accommodations result in an on-going financial impact on the provider.*
- iii. ☐ *X* Differential rate for infants and toddlers. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on. Describe: *For programs reimbursed at the SRR, infants 0 to 18 months of age receive an SRR-related adjustment factor of 2.44 and toddlers 18 to 36 months of age receive an adjustment factor of 1.8.*
- iv. ☐ Differential rate for school-age programs. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on. Describe: *Click or tap here to enter text.*
- v. ☐ Differential rate for higher quality, as defined by the Lead Agency. Describe: *Click or tap here to enter text.*
- vi. ☒ *X* Other differential rates or tiered rates. For example, differential rates for geographic area or for type of provider. Describe: *All programs receive differential rates based on geographic area as of January 1, 2022. Starting January 1, 2022, programs reimbursed at the SRR are required to receive the greater of the 75th percentile of the 2018 regional market rate survey or the contract per-child reimbursement amount as of December 31, 2021. Further, as noted in the response to 4.3.3a., base rate add-ons are adjusted by geographic region to account for differences in the cost of living. Additionally, for programs reimbursed at the SRR, children at risk of neglect, abuse, or exploitation 0 to 13 years of age receive an adjustment factor of 1.1; limited and non-English-speaking children 2 years to Kindergarten receive an adjustment factor of 1.1; provision of Early Mental Health Consultation Services (MHCS) justifies an adjustment factor of 1.1 that applies to all children in the classroom or home. A contractor may only claim one adjustment factor; however, MHCS can be added to an existing factor.*

- vii. If applicable, describe any additional add-on rates that you have besides those identified above. *Click or tap here to enter text.*
- e. Does the Lead Agency reduce provider payments if the price the provider charges to private-pay families not participating in CCDF is below the Lead Agency's established payment rate?
 - ☐ Yes. If yes, describe: *Click or tap here to enter text.*
 - ☒ No.

4.3.5 Establishing payment rates

Describe how the Lead Agency established payment rates:

- f. What was the Lead Agency's methodology or process for setting the rates or how did the Lead Agency use their data to set rates? *Current base rates were established in pursuant to a negotiated agreement between the State and the CCPU for represented home-based providers and through parity legislation in the form of Assembly Bill (AB) 131 (Chapter 116 of the Statutes of 2021), which was signed into law on July 23, 2021. Effective January 1, 2022, the new Regional Market Rate ceilings for licensed providers were established at the 75th percentile of the 2018 Regional Market Rate survey (which was the most recent market rate survey conducted at the time of the agreement) or the Regional Market Rate ceilings as they existed on December 31, 2021, whichever is greater. Also commencing January 1, 2022, reimbursement to licensed-exempt care was set to 70% of the commensurate Family Child Care Home Rate. In addition to the rate increases, the 2021 agreement and AB 131 allocated \$289 million over two years to supplement provider rates in the form of monthly rate adjustments or lump sum bonuses on a short term basis to help alleviate the negative effects of the pandemic on the child care workforce. In 2023, a successor agreement between the State and CCPU, and related legislation, SB 140, provided for movement to an ACF pre-approved alternative methodology, and \$1.4 billion to support the child care workforce pending transition to rates based on the ACF pre-approved alternative methodology. (Reference: 'Other Child Care Supports, SB 140; 2024 May Revision). This \$1.4 billion in support included add-ons above the base rate, which began in FY 23-24, and are detailed in the response to 4.3.3.a. In FY 24-25, the State will reopen negotiations with CCPU to set rates informed by the pre-approved alternative methodology cost study. Rate setting will occur for unrepresented providers through the budget process, concurrent with and informed by rate negotiations for home-based providers. The CDSS is in the process of conducting the ACF pre-approved alternative methodology and will submit an amendment to the State Plan once completed.*
- g. How did the Lead Agency determine that the rates are adequate to meet health, safety, quality, and staffing requirements under CCDF? *The last Market Rate Survey (MRS) was conducted 2021. The study surveyed mixed-delivery providers across the State to collect rates. New rates to be set next fiscal year using alternative methodology will be informed by 2023 data collection and driven by a cost model that accounts for what it takes for providers to meet all health and safety requirements and mandated staffing ratios. Currently, California is in the process of conducting the ACF pre-approved alternative methodology. Upon completion, the State will submit an amendment to the State Plan to update this section.*

- h. How did the Lead Agency use the cost of care, either from the narrow cost analysis or the ACF pre-approved alternative methodology to inform rate setting, including how using the cost of care promotes the stabilization of child care providers? *Although California is currently utilizing the MRS conducted in 2018, the State is in the process of conducting the ACF pre-approved alternative methodology. Rate setting to occur in FY 24-25 will be informed by the outputs of the cost model developed for California using the alternative methodology process, which was informed by extensive data collection on the cost to provide care across all provider and program types and regions of the state. Upon completion, the lead agency will submit an amendment to the State Plan to update this section.*
- i. How did the Lead Agency account for the cost of higher quality while setting payment rates? *California is currently utilizing the MRS conducted in 2018 the State is in the process of conducting the ACF pre-approved alternative methodology. It is anticipated that the new rate structure informed by alternative methodology will include: (i) differential rates for Title 22 and Title 5 programs to reflect that Title 5 has additional program standards, and (ii) enhanced rates to account for costs associated with program components that contribute to higher quality care. Upon completion of the alternative methodology process, the lead agency will submit an update to this portion of the State Plan.*
- j. Identify and describe any additional facts (not covered in responses to 4.3.1 – 4.3.3) that the Lead Agency considered in determining its payment rates to ensure equal access. *In response to August 2023 guidance from the Office of Child Care (OCC) regarding Flexibilities on Alternative Methodology Timing, CDSS engaged in an analysis of inflation rates for California. The period of this inflation analysis was set to start with the date that the last subsidy payment rate increase was effective: January 1, 2022. These rate increases were established with the 2021 Child Care Development Fund (CCDF) plan submission. California's current base rates were established utilizing the MRS conducted in 2018, but as described above, additional monthly add-on payments are also being made to providers to ensure equal access. In order to address the requirement in the August 2023 OCC Flexibilities letter, CDSS engaged in an analysis of inflation rates for the state. The period of this inflation analysis was set to start with the date that the last subsidy payment rate increase was effective: January 1, 2022. These rate increases were established with the 2021 CCDF plan submission.*

Statewide annual inflation in California for the period January 1, 2022 - December 31, 2023, is 11%. In the same period of time, the amounts paid to child care providers when considering the base payment rate and add-on payments, has sought to address the inflation providers experience. While the base payment rates were not increased, the following two additional payments were made to providers: the Cost of Care Plus Rate (per child, per month payments beginning January 2024 and slated to sunset June 30, 2025, absent further action by the Legislature) and the Transitional Payment (one time payments, per provider, issued in November 2023). These add-on payments for FY 2023-2024 and 2024-2025 were made pursuant to Article 7.2 of the labor agreement between the State and CCPU and parity payments to non-represented providers. No payments funded through the American Rescue Plan Act were included.

Below is an analysis of these additional payment amounts, to understand the percentage

increase these additional payments were, on top of the base subsidy payment rates. The percentages reflected are by provider type, and age of child, reflecting the statewide average increase these payments were on top of the base payment rate.

Family Child Care providers:

Birth to 24 Months: 18%

2 through 5 Years: 19%

School Age: 23%

Family, Friend and Neighbor providers:

Birth to 24 Months: 17%

2 through 5 Years: 19%

School Age: 22%

Center based providers:

Birth to 24 Months: 11%

2 through 5 Years: 15%

School Age: 19%

The analysis found that State-funded payments made to providers (i.e., the base rate plus the cost of care plus rate plus one-time transitional payments) met or exceeded the statewide inflation for this period. The State is in the process of conducting the ACF pre-approved alternative methodology and upon completion, the lead agency will submit an amendment to the State Plan to update this section.

4.4 Payment Practices to Providers

Lead Agencies must use subsidy payment practices that reflect practices that are generally accepted in the private pay child care market. The Lead Agency must ensure timeliness of payment to child care providers by paying in advance or at the beginning of delivery of child care services. Lead Agencies must also support the fixed cost of child care services based on paying by the child's authorized enrollment, or if impracticable, an alternative approach that will not undermine the stability of child care programs as justified and approved through this Plan.

Lead Agencies must also (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time, and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents. These policies apply to all provider types unless the Lead Agency can demonstrate that in limited circumstances the policies would not be considered generally-accepted payment practices.

In addition, Lead Agencies must ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and have timely appeal and resolution processes for any payment inaccuracies and disputes.

4.4.1 Prospective and enrollment-based payment practices

Lead Agencies must use payment practices for all CCDF child care providers that reflect generally-

accepted payment practices of providers serving private-pay families, including paying providers in advance or at the beginning of the delivery of child care services and paying based on a child's authorized enrollment or an alternative approach for which the Lead Agency must demonstrate paying for a child's authorized enrollment is not practicable and it will not undermine the stability of child care programs. Lead Agencies may only use alternate approaches for subsets of provider types if they can demonstrate that prospective payments and authorized enrollment-based payment are not generally-accepted for a type of child care setting. Describe the Lead Agency payment practices for all CCDF child care providers.

a. Does the Lead Agency pay all provider types prospectively (i.e., in advance of or at the beginning of the delivery of child care services)?

☐ Yes. If yes, describe: [Click or tap here to enter text.](#)

☒ No, it is not a generally-accepted payment practice for each provider type. If no, describe the provider type not paid prospectively and the data demonstrating it is not a generally-accepted payment practice for that provider type, and describe the Lead Agency's payment practice that ensures timely payment for that provider type: *California has requested a transitional and legislative two-year waiver effective no longer than August 1, 2024 – August 1, 2026, to implement the practice of paying prospectively. California will initiate this during the 2025-26 legislative and budget processes. Currently our payment practices are authorized in Senate Bill 140 which added Welfare and Institution Code section 10277, requiring all of the following effective March 1, 2024: 1. For providers accepting subsidy vouchers, child care reimbursement shall be made within 21 calendar days of the submission of a complete monthly attendance record or invoice, and for providers participating in a family child care home education network, reimbursement shall be made within 21 calendar days of the submission of a daily sign-in and sign-out sheet; 2. A schedule for the payment of services that must be signed by the child care provider; 3. A provision requiring that if a provider submits attendance records or invoices for multiple children, and not all individual records or invoices within the submission include adequate information to provide a payment, payments will not be withheld for those records or invoices that do include adequate information to provide a payment; 4. Procedures that establish clear processes and timelines to resolve overpayment and underpayment issues, which must include provider written consent to recover any overpayment; 5. If a county or contractor is unable to make payment within 21 calendar days due to extenuating circumstances, the impacted provider will be notified within a reasonable timeframe of the county or contractor becoming aware of the circumstance causing the delay of reimbursement payment.*

b. Does the Lead Agency pay based on authorized enrollment for all provider types?

☒ Yes. The Lead Agency pays all providers by authorized enrollment and payment is not altered based on a child's attendance or the number of absences a child has.

☐ No, it is not a generally-accepted practice for each provider type. If no, describe the provider types not paid by authorized enrollment, including the data showing it is not a generally-accepted payment practice for that provider type, and describe how the payment policy accounts for fixed costs: [Click or tap here to enter text.](#)

☐ No, it is impracticable. Describe provider type(s) for which it is impracticable, why it is impracticable, and the alternative approach the Lead Agency uses to delink provider

payments from occasional absences, including evidence that the alternative approach will not undermine the stability of child care programs, and thereby accounts for fixed costs: [Click or tap here to enter text.](#)

4.4.2 Other payment practices

Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time, and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents, unless the Lead Agency provides evidence that such practices are not generally-accepted for providers caring for children not participating in CCDF in its State or Territory.

- a. Does the Lead Agency pay all providers on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time)?
- ☐ Yes.
- ☒ *No. If no, describe the policies or procedures that are different than paying on a part-time or full-time basis and the Lead Agency's rationale for not paying on a part-time or full-time basis: [The CDSS advances funds to contractors who operate direct-service and Alternative Payment contracts. For direct-service contracts, providers are paid on a part-time or full-time basis. Alternative Payment providers can be reimbursed under an hourly rate category \(in addition to daily, part-time/full-time weekly or monthly rate categories\). Please refer to the definitions available on \[Reimbursement Ceilings for Subsidized Child Care\]\(#\) regarding categories available for reimbursement for Alternative Payment programs.](#)*
- b. Does the Lead Agency pay for reasonable mandatory registration fees that the provider charges to private-paying parents?
- ☒ *Yes. If yes, identify the fees the Lead Agency pays for: [Pursuant to California Code of Regulations, Title 5, \(5CCR\) Section 18076.1, subgrantees \(i.e., Alternative Payment Programs\) must reimburse fees charged by all providers, such as registration, material, and insurance, either in a single payment or prorated over a 12-month period, as long as the provider documents the contractual terms used for services to unsubsidized families require payment for such fee; and the fees or prorated portion, plus the providers normal customary rate, do not exceed the regional market rate ceiling.](#)*
- ☐ No. If no, identify the data and how data were collected to show that paying for fees is not a generally-accepted payment practice: [Click or tap here to enter text.](#)
- c. Describe how the Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process: [As part of the monitoring review process, CDSS ensures that the requirements regarding timely payment, provider policies, including rates, schedules and dispute-resolution process set forth in 5CCR sections 18221-18224 and 5 CCR Section 18226 are being met.](#)
- d. Describe how the Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur:

The Welfare and Institutions Code 10276 requires Child Care Development Fund-funded programs to provide same-day notice to a child care provider of a change in reimbursement amounts for childcare services, a change in the hours of care, rates, or schedules, an increase or decrease in parent fees, a termination of services, including, but not limited to, a family's change in provider, or any changes to the family's eligibility status that may impact payment.

- e. Describe the Lead Agency's timely appeal and resolution process for payment inaccuracies and disputes: *Currently, contractors are required to set timely payment policies (5 CCR Section 18226). Additionally, contractors must set conflict resolution policies and provide to each parent. As part of this process, parents must be provided with information regarding the Uniform Complaint Procedure, which requires complaints received by CDSS to be investigated and resolved within 30 days. (5 CCR 4663-4670).*
- f. Other. Describe any other payment practices established by the Lead Agency: *Click or tap here to enter text.*

4.4.3 Payment practices and parent choice

How do the Lead Agency's payment practices facilitate provider participation in all categories of care? *Vouchers or certificates are issued based on the family's certified need for care. Payment practices include payment to the provider based on enrollment (vs. attendance). This practice supports both providers and families in ensuring equal and greater access to care. Other payment practices described in 4.4 ensure that providers are paid in a timely manner, which also leads to greater and more equitable access for families. Providers have reported that such payment practices ensure they are able to continue to care for children and feel confident enrolling subsidized children in their care as they are ensured payment within a reasonable timeframe. Payment practices also include programs paying on a basis of part-time or full-time ranging from full-time plus (10.5 hours or over) to half-time (under 4 hours). For alternative payment programs, reimbursement is based on the most applicable reimbursement ceiling established based on the market rate survey, including hourly, daily, part-time weekly, full-time weekly, part-time monthly, and full-time monthly.*

4.5 Supply Building

Building a supply of high-quality child care that meets the needs and preferences of parents participating in CCDF is necessary to meet CCDF's core purposes. Lead Agencies must support parent choice by providing some portion of direct services via grants or contracts, including at a minimum for children in underserved geographic areas, infants and toddlers, and children with disabilities.

4.5.1 Child care services available through grants or contracts

Does the Lead Agency provide direct child care services through grants or contracts for child care slots?

X Yes, statewide. Describe how the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider: *The Resource and Referral (R&R) agencies located in every county throughout the State are required to have written referral policies available to all persons requesting them regardless of income level or other eligibility requirements. The R&R agencies are required by regulation to assist parents in*

choosing a provider by providing parents with information regarding how to select child care services which will meet their needs and a range of possible child care alternatives from which to choose. Additionally, on the consumer education website mychildcareplan.org, in the resource section, there are several resources related to helping parents choose a child care that fits their needs. See: <https://mychildcareplan.org/resource-category/?topic=choosing-child-care>. Contractors will also engage in conversations with families regarding alternative child care options in their community in the event that their program may not meet all of the child care needs of the family. This will happen sometimes prior to having been counseled on their child care choices through an R&R agency. In the event that a family's needs were not being met providers/contractor will also refer the family back to a local R&R for more options or in counties where there are centralized eligibility lists (CEL), they can support the family to apply to the CEL.

☐ Yes, in some jurisdictions, but not statewide. Describe how many jurisdictions use grants or contracts for child care slots and how the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider: [Click or tap here to enter text.](#)

☐ No. If no, describe any Lead Agency plans to provide direct child care services through grants and contracts for child care slots: [Click or tap here to enter text.](#)

If no, skip to question 4.5.2.

i. If yes, identify the populations of children served through grants or contracts for child care slots (check all that apply). For each population selected, identify the number of slots allocated through grants or contracts for direct service of children receiving CCDF.

☒ *X Children with disabilities. Number of slots allocated through grants or contracts: The Lead Agency administers multiple child care and development programs for direct service of children receiving CCDF. These programs serve children under the age of 13 and older children with exceptional needs through contracts for child care slots in centers or in family child care home networks operated or administered by either public or private agencies. These programs are the general child care and development program (CCTR) and the family child care home education network program (CFCC). California funds 54,327 slots in these direct-contract programs. All of these slots are available to children with disabilities, but California does not allocate a particular number of slots in these programs to children with disabilities.*

☒ *X Infants and toddlers. Number of slots allocated through grants or contracts: The Lead Agency administers multiple child care and development programs for direct service of children receiving CCDF that serve children under age 13 and older children with exceptional needs through contracts for child care slots in centers or in family child care home networks operated or administered by either public or private agencies. These programs are the general child care and development program (CCTR) and the family child care home education network program (CFCC). California does not allocate a particular number of slots in these programs to infants and*

toddlers.

- ☐ ☒ **X Children in underserved geographic areas.** Number of slots allocated through grants or contracts: *The Lead Agency administers multiple child care and development programs for direct service of children receiving CCDF that serve children under age 13 and older children with exceptional needs through contracts for child care slots in centers or in family child care home networks operated or administered by either public or private agencies. These programs are the general child care and development program (CCTR) and the family child care home education network program (CFCC). California does not allocate a particular number of slots in these programs to underserved geographic areas.*
- ☐ ☒ **X Children needing non-traditional hour care.** Number of slots allocated through grants or contracts: *The Lead Agency administers multiple child care and development programs for direct service of children receiving CCDF that serve children under age 13 and older children with exceptional needs through contracts for child care slots in centers or in family child care home networks operated or administered by either public or private agencies. These programs are the general child care and development program (CCTR) and the family child care home education network program (CFCC). California does not allocate a particular number of slots to non-traditional hour care.*
- ☐ ☒ **X School-age children.** Number of slots allocated through grants or contracts: *The Lead Agency administers multiple child care and development programs for direct service of children receiving CCDF that serve children under age 13 and older children with exceptional needs through contracts for child care slots in centers or in family child care home networks operated or administered by either public or private agencies. These programs are the general child care and development program (CCTR) and the family child care home education network program (CFCC). California does not allocate a particular number of slots in these programs to school age children.*
- ☐ ☒ **X Children experiencing homelessness.** Number of slots allocated through grants or contracts: *The Lead Agency administers multiple child care and development programs for direct service of children receiving CCDF that serve children under age 13 and older children with exceptional needs through contracts for child care slots in centers or in family child care home networks operated or administered by either public or private agencies. These programs are the general child care and development program (CCTR) and the family child care home education network program (CFCC). California does not allocate a particular number of slots in these programs to children experiencing homelessness.*

☐ ☒ Children in urban areas. Percent of CCDF children served in an average month: *There are 6,153,566 children under age 13 in urban areas, of which 178,831 or three percent (3%) of Child Care Development Fund (CCDF) children are served in an average month.*

☐ ☒ Children in rural areas. Percent of CCDF children served in an average month: *There are 686,754 children under age 13 in rural areas, of which, 21,397 or three percent (3%) of CCDF children are served in an average month.*

☐ Other populations. If checked, describe

- ii. If yes, how are rates for slots funded by grants and contracts determined by the Lead Agency? *Consistent with statutory requirements, each fiscal year the state budget identifies the amount of funding available for distribution in each program type. The CDSS uses Local Child Care and Development Planning Councils (LPC) priorities, updated annually, to distribute funds in the form of contracts to the zip codes with greatest need in terms of infant/toddler care, preschool-aged care, and school-age care. The LPC priorities indicate underserved areas at the zip code level. This information allows CDSS to reassess whether funding shifts are needed to increase the supply of child care and development services in the neediest areas of the state.*

4.5.2 Care in the child's home (in-home care)

The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use.

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

☐ ☒ Yes.

☐ No.

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

- i. ☐ Restricted based on the minimum number of children in the care of the in-home provider to meet the Fair Labor Standards Act (minimum wage) requirements. Describe: *Click or tap here to enter text.*
- ii. ☐ ☒ Restricted based on the in-home provider meeting a minimum age requirement. Describe: *Program requirements regarding records on file concerning in-home service providers indicate that if a contractor is providing reimbursement for services, records must be maintained. In accordance with 5 California Code of Regulations 18230, a California driver's license number or other valid and recognized form of identification to verify that the caregiver is at least eighteen (18) years of age is required.*
- iii. ☐ Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours). Describe: *Click or tap here to enter text.*
- iv. ☐ Restricted to care by relatives. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider.) Describe: *Click or tap here to enter text.*
- v. ☐ Restricted to care for children with special needs or a medical condition.

Describe: *Click or tap here to enter text.*

- vi. ☐ Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF. Describe: *Click or tap here to enter text.*
- vii. ☒ Other. Describe: *Effective, July 1, 2022, parent(s) utilizing in-home provider services shall acknowledge, by signing a self-attestation, that the parent is considered the employer and is responsible for complying with any applicable federal and state employment laws, including but not limited to minimum wage requirements.*

4.5.3 Shortages in the supply of child care

Lead Agencies must identify shortages in the supply of child care providers that meet parents' needs and preferences.

What child care shortages has the Lead Agency identified in the State or Territory, and what is the plan to address the child care shortages?

- a. In infant and toddler programs:
 - i. Data sources used to identify shortages: *Data sources used to identify shortages include The Local Child Care and Development Planning Councils (LPC) Zip Code Priority Reports; LPC Child Care Assessment Reports. Additionally, Local Resource and Referrals (R&Rs) conducts comprehensive needs assessments annually and on an ongoing basis. The Lead agency also uses annual Child Care Initiative Project (CCIP) data, and the California Child Care Resource and Referral Network Biennial Portfolio.*
 - ii. Method of tracking progress: *Local R&Rs and LPCs conduct comprehensive needs assessments annually and on an ongoing basis. Additionally, Local R&Rs conduct comprehensive needs assessments annually and on an ongoing basis. This tool can be used as a framework for local agencies to update with local information.*
 - iii. What is the plan to address the child care shortages using family child care homes?
The state will prioritize support for home-based child care providers who enroll families receiving child care subsidies. The lead agency administers the LPCs, and pursuant to California's WIC sections 10480 to 10487, they are required to submit annual local priorities data to identify and reflect all child care needs in all 58 counties (including center-based child care). This data is submitted to the lead agency and is used to identify child care deserts and to drive state subsidized child care spaces. Also, the Infrastructure Grant Program supports child care facility shortages via grants to center-based and family child care providers. The grants support new and major construction as well as minor renovations and repairs for the purpose of reducing child care deserts and serving more children via slots. Additionally, The CCIP is a statewide project funded to build supply and improve the quality of care specifically focusing on exempt and family child care providers. Efforts include recruiting license exempt providers to become licensed, as well as providing supports to assist small homes with a goal of increased capacity and inclusion of infants and toddlers. Activities to support retention of child care providers are also included. The California Child Care Resource and Referral Network team supports local R&R agencies by providing a training of trainer model that utilizes culturally sensitive multilingual

training based in the California Foundations and Frameworks and other research based best practices such as Caring for our Children as well as supporting and articulating Department of Social Services Community Care Licensing Title 22 requirements.

- iv. *What is the plan to address the child care shortages using child care centers? The LPCs, pursuant to California's Welfare and Institutions Code (WIC) sections 10480 to 10487, are required to submit annual local priorities data to identify and reflect child care needs in all 58 counties (including center-based child care and infant and toddler care). This data is submitted to the lead agency and is used to identify child care deserts and to plan for the allocation of subsidized child care funding. In addition, the Infrastructure Grant Program supports child care facility shortages via grants to center-based and family child care providers. The grants support new and major construction as well as minor renovations and repairs for the purpose of reducing child care deserts and serving more children via slots including infant and toddler care. The lead agency also provides professional development to support providers working or seeking to work with infant and toddler specialized care. Some of the recent professional development specific to infant and toddler care include providing training and technical assistance through the Program for Infant/Toddler Care (PITC), direct consultation through the Infant and Early Childhood Mental Health Consultation (IECMHC) Network, and infant/toddler specific training through California Early Childhood Online and Family Child Care at its Best.*

b. In different regions of the State or Territory:

- i. *Data sources used to identify shortages: Data sources used to identify shortages include Local Planning Council (LPC) Zip Code Priority Reports; LPC Child Care Assessment Reports. Additionally, Local R&Rs conduct comprehensive needs assessments annually and on an ongoing basis.*
- ii. *Method of tracking progress: Local R&Rs and LPCs conduct comprehensive needs assessments annually and on an ongoing basis. Additionally, Local R&Rs conduct comprehensive needs assessments annually and on an ongoing basis. This tool can be used as a framework for local agencies to update with local information.*
- iii. *What is the plan to address the child care shortages using family child care homes? The lead agency administers the LPCs, and pursuant to California's WIC sections 10480 to 10487, they are required to submit annual local priorities data to identify and reflect all child care needs in all 58 counties (including center-based child care). This data is submitted to the lead agency and is used to identify child care deserts and to drive state subsidized child care spaces. Also, the Infrastructure Grant Program supports child care facility shortages via grants to center-based and family child care providers. The grants support new and major construction as well as minor renovations and repairs for the purpose of reducing child care deserts and serving more children via slots. Additionally, The CCIP is a statewide project funded to build supply and improve the quality of care specifically focusing on exempt and family child care providers. Efforts include recruiting license exempt providers to become licensed, as well as providing supports to assist small homes with a goal of increased capacity and inclusion of*

infants and toddlers. Activities to support retention of child care providers are also included. The California Child Care Resource and Referral Network team supports local R&R agencies by providing a training of trainer model that utilizes culturally sensitive multilingual training based in the California Foundations and Frameworks and other research based best practices such as Caring for our Children as well as supporting and articulating Department of Social Services Community Care Licensing Title 22 requirements.

- iv. What is the plan to address the child care shortages using child care centers? *The lead agency funds the LPCs, and pursuant to California’s WIC sections 10480 to 10487, they are required to submit annual local priorities data to identify and reflect all child care needs in all 58 counties including center-based child care. This data is submitted to the lead agency and is used to identify child care deserts and to drive state subsidized child care spaces. Also, the Infrastructure Grant Program supports child care facility shortages via grants to center-based and family child care providers. The grants support new and major construction as well as minor renovations and repairs for the purpose of reducing child care deserts and serving more children via slots.*

c. In care for special populations:

- i. Data sources used to identify shortages: *Data sources used to identify shortages include the LPC Zip Code Priority Reports; LPC Child Care Assessment Reports. Additionally, Local R&Rs conducts comprehensive needs assessments annually and on an ongoing basis.*
- ii. Method of tracking progress: *The CCDD tracks progress by monitoring LPC zip code priority reports for every county across California. Additionally, The California Child Care Resource and Referral Network Portfolio data provides an overview of the supply and demand for child care by county. The portfolio data enables CCDD to understand individual family needs.*
- iii. What is the plan to address the child care shortages using family child care homes? *The Lead Agency funds the LPCs, and pursuant to WIC sections 10480 to 10487, are required to submit annual local priorities data to identify and reflect all child care needs in all 58 counties including family child care. This data is submitted to the lead agency and is used to identify child care deserts and to drive or plan to allocate state subsidized child care funding based on need. Also, the Infrastructure Grant Program supports child care facility shortages via grants to center-based and family child care providers. The grants support new and major construction as well as minor renovations and repairs for the purpose of reducing child care deserts and serving more children via slots.*
- iv. What is the plan to address the child care shortages using child care centers? *The lead agency funds the LPCs, and pursuant to WIC sections 10480 to 10487, they are required to submit annual local priorities data to identify and reflect all child care needs in all 58 counties (including center-based child care). This data is submitted to the lead agency and is used to identify child care deserts and plan allocation of state subsidized child care funding based on need. Also, the*

Infrastructure Grant Program supports child care facility shortages via grants to center-based and family child care providers. The grants support new and major construction as well as minor renovations and repairs for the purpose of reducing child care deserts and serving more children via slots. Child care slots are inclusive and available for children with special needs. The local resource and referral programs allow families and caregivers to filter and select individual child care needs and then provides referrals to families.

If a family selects a child care center and selects supports for a child with special needs, they will be provided with that information. Additionally, the lead agency provides professional development and training to support providers who support children with special needs. Some of the recent professional development opportunities available include a series of webinars dedicated to supporting knowledge in quality inclusive practices, five per year in total, with regional technical assistance offered following each webinar to help participants put what they learned into action and work through specific questions with an inclusion facilitator. Additionally, a training-of-trainers event, Beginning Together Inclusion Facilitators Institute, is held annually to expand the capacity of certified inclusion trainers across the state.

4.5.4 Strategies to increase the supply of and improve quality of child care

Lead Agencies must develop and implement strategies to increase the supply of and improve the quality of child care services. These strategies must address child care in underserved geographic areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours.

How does the Lead Agency identify any gaps in the supply and quality of child care services and what strategies are used to address those gaps for:

- a. Underserved geographic areas. Describe: *The lead agency identifies child care gaps through the annual Zip Code Priorities reports and addresses them by prioritizing funding to reduce child care deserts. Additionally, the Child Care Initiative Project is another initiative used to identify child care shortages and deserts, particularly within the workforce. Efforts include recruiting license-exempt providers to become licensed, as well as providing support to assist small homes with the goal of increased capacity and inclusion of infants and toddlers.*
- b. Infants and toddlers. Describe: *In addition to supports to increase supply, the Lead Agency also provides professional development to providers through webinars, conferences, training, and technical assistance (including college credit bearing professional development) to improve the quality of child care services for infants and toddlers. These are provided through the Program for Infant/Toddler Care (PITC) as well as coaching offered through the California Coaching Companion, which offers coaching cycles specifically for the care of infants and toddlers.*
- c. Children with disabilities. Describe: *In addition to supports to increase supply, the Lead Agency also provides professional development and resources to improve the quality of child care services for children with disabilities. This is accomplished through the Beginning Together program, which provides training and technical assistance as well as a training of trainers to support inclusion in early learning and child care settings. The California MAP to Inclusion and Belonging also provides information and resources to providers on serving*

children with disabilities and the California Teaching Pyramid and the California Infant and Early Childhood Mental Health Consultation (IECMHC) Network both support providers in providing quality care to children with disabilities.

- d. Children who receive care during non-traditional hours. Describe: *Local Resource and Referral (R&R) agencies identify gaps through comprehensive needs assessments annually and on an ongoing basis. Also, by expanding child care programs that are available during nontraditional hours and responsiveness to flexible schedules is essential to the availability of quality child care. Efforts also include recruiting license-exempt providers to become licensed, as well as providing support to small family child care homes to increase capacity.*
- e. Other. Specify what population is being focused on to increase supply or improve quality. Describe: *Programs and providers supporting children and families who have experienced trauma are supported through mental health consultation. The California Infant and Early Childhood Mental Health Consultation (IECMHC) Network (formerly known as the California Inclusion and Behavior Consultation (CIBC) Network) uses a tiered system of support allowing access to an expanded suite of infant and early childhood mental health consultation resources, materials, and services. Services are provided to center-based early learning and care providers as well as family child care and family, friend and neighbor providers. This strategy focuses on improving the quality of care. Additionally, through the Emergency Child Care Bridge (ECCB) Program, child care providers have access to trauma informed care training and coaching. Training and coaching is intended to help child care providers learn practical strategies for working with children who have experienced trauma. The California Child Care R&R Network develops and delivers the training curriculum to certify trainers in the local R&R Programs. Providers do not have to be serving a child in the ECCB program to access these trainings from their local R&Rs.*

4.5.5 Prioritization of investments in areas of concentrated poverty and unemployment

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

Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have access to high-quality programs. *Consistent with statutory requirement, each fiscal year the budget identifies the amount of funding available for distribution in each program. The California Department of Social Services (CDSS) uses Local Child Care and Development Planning Council (LPC) zip-code priority reports, updated annually, to distribute funds in the form of contracts to the neediest zip codes in terms of infant/toddler care, preschool-aged care, and school-aged care. The LPC priorities indicate underserved areas at the zip code level. This information allows CDSS to reassess whether funding shifts are needed to increase the supply of early learning services in the neediest areas of the state.*

5 Health and Safety of Child Care Settings

Child care health and safety standards and enforcement practices are essential to protect the

health and safety of children while out of their parents' care. The CCDF provides a minimum threshold for child care health and safety policies and practices but leaves authority to Lead Agencies to design standards that appropriately protect children's safety and promote nurturing environments that support their healthy growth and development. Lead Agencies should set standards for ratios, group size limits, and provider qualifications that help ensure that the child care environment is conducive to safety and learning and enable caregivers to promote all domains of children's development.

The CCDF health and safety standards help set clear expectations for CCDF providers, form the foundation for health and safety training for child care workers, and establish the baseline for monitoring to ensure compliance with health and safety requirements. These health and safety requirements apply to all providers serving children receiving CCDF services whether the providers are licensed or license-exempt, must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures by the Lead Agency. The CCDF-required annual monitoring and enforcement actions help ensure that CCDF providers are adopting and implementing health and safety requirements.

Through child care licensing, Lead Agencies set minimum requirements, including health and safety requirements, that child care providers must meet to legally operate in that State or Territory. In some cases, CCDF health and safety requirements may be integrated within the licensing system for licensed providers and may be separate for CCDF providers who are license-exempt.

This section addresses CCDF health and safety requirements, Lead Agency licensing requirements and exemptions, and comprehensive background checks.

When responding to questions in this section, OCC recognizes that each Lead Agency identifies and defines its own categories of care. OCC does not expect Lead Agencies to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that best match the CCDF categories of care.

5.1 Licensing Requirements

Each Lead Agency must ensure it has in effect licensing requirements applicable to all child care services provided within the State/Territory (not restricted to providers receiving CCDF funds).

5.1.1 Providers subject to licensing

For each category of care listed below, identify the type of providers subject to licensing and describe the licensing requirements.

- a. Identify the center-based provider types subject to child care licensing: *California uses the terms center-based care and day care center. California Health and Safety Code Section 1596.76 defines "Day Care Center" to mean a child day care facility other than a family day care home, and includes infant centers, preschools, extended day care facilities, and school-age child care centers, while also including child care centers licensed pursuant to Section 1596.951. A day care center is also referred to as a "Child Care Center" or "center" and means any child care facility of any capacity, other than a family child care home as defined in California Code of Regulations, Title 22, Section 102352f(1), in which less than 24-hour per day non-medical care and supervision are provided to children in a group*

setting. (California Code of Regulations, Title 22, Section 101152(c)(7)).

Are there other categories of licensed, regulated, or registered center providers the Lead Agency does not categorize as license-exempt?

☐ Yes. If yes, describe:

☒ X No.

- b. Identify the family child care providers subject to licensing: *Family child care providers that care for to children in the provider's own home for periods of less than 24 hours per day while the parents or guardians are away, and who are not exempt from licensure, pursuant to Health and Safety Code Section 1596.792, are required to be licensed as a family day care home. A "family day care home" is defined in Health and Safety Code Section 1596.78 and is also referred to as a "family child care home" pursuant to California Code of Regulations, Title 22, Section 102352(f)(1). All licensed family child care homes are subject to unannounced inspections once every three years, however Community Care Licensing Division strives to annually inspect all licensed child care facilities.*

Are there other categories of regulated or registered family child care providers the Lead Agency does not categorize as license-exempt?

☐ Yes. If yes, describe:

☒ X No.

- c. Identify the in-home providers subject to licensing: *Not applicable*

Are there other categories of regulated or registered in-home providers the Lead Agency does not categorize as license-exempt?

☐ Yes. If yes, describe: *Click or tap here to enter text.*

☒ X No.

5.1.2 CCDF-eligible providers exempt from licensing

Identify the categories of CCDF-eligible providers who are exempt from licensing requirements, the types of exemptions and describe how these exemptions do not endanger the health, safety, and development of children. -Relative providers, as defined in CCDF, are addressed in subsection 5.8.

- a. License-exempt center-based child care. Describe by answering the questions below.

- i. Identify the categories of CCDF-eligible center-based child care providers who are exempt from licensing requirements. *License-exempt center based child care includes public and private recreation programs; extended day care programs operated by public or private schools, such as the Expanded Learning Opportunities Program, the After School Education and Safety Program, and the 21st Century Community Learning Centers program; a school parenting program; a child day care program that operates only one day per week for no more than four hours on that day; a child day care program that offers temporary child care services to parents and guardians who are on the same premises as the site of the child day care program; and a program that provides activities for children of an instructional nature in a classroom-like setting during periods of the year when school-age children are normally not in*

session and which does not exceed a total of 30 days when only school-age children are enrolled or 15 days when children younger than school-age are enrolled and State Preschools (Health and Safety Code Sections 1596.792, 1596.793).

- ii. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. *Certain exemptions to the licensing requirements have elements that are based on length of day, number of children in care, or ages of the children in care. For example: a facility that operates a cooperative arrangement between parents is exempt as long as there are no more than 12 children receiving care in the same place at the same time. Similarly, a public recreation program that operates only during hours other than normal school hours for kindergarten and grades 1 to 12, inclusive, in the public school district where the program is located or operated only during periods when students in kindergarten and grades 1 to 12, inclusive, are normally not in session in the public school district where the program is located, for either: under 2 hours per week or for a total of 14 weeks or less during a 12 month period (this total applies to any 14 weeks within any 12-month period, without regard to whether the weeks are consecutive). Recreation programs conducted for children by the YMCA, Girl Scouts of USA, Boy Scouts of America, Boys and Girls Clubs, Camp Fire USA, organized camps, or similar organizations are exempt from licensing requirements (See Health and Safety Code Section 1596.792, 1596.793.).*
- iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children. *The exemptions, outlined in California Health and Safety Code Sections 1596.792 and 1596.793, limit the time periods an exempt facility is allowed to operate, the number and ages of children in care, or other specified conditions such as parents being onsite while their child is receiving services. Certain exempt programs are monitored and regulated by other state agencies, such as the California Department of Education or the California Department of Public Health. The oversight from other agencies may include background checks, training requirements, and building and grounds standards. Other exempt programs, such as recreation programs operated by the YMCA, Girl Scouts of the USA, Boy Scouts of America, Boys and Girls Clubs, or Camp Fire USA are nationally recognized and accredited programs with established safeguards in place. The children they serve are usually school-age children and care and supervision provided to the school-age children are incidental to the recreation activities provided. While the recreation programs are exempt from licensing, California law requires child care programs operated by these nationally recognized programs to be subject to the state's licensing requirements. Finally, the Community Care Licensing Division's Complaint Hotline allows for individuals to report unlicensed facilities that are not operating according to exemption requirements.*

b. License-exempt family child care. Describe by answering the questions below.

- i. Identify the categories of CCDF-eligible family child care providers who are

exempt from licensing requirements. *Providing care for the children of only one family, in addition to the operators own children, in the operator's home is exempt from licensure pursuant to Health and Safety Code Section 1596.792(d). Any cooperative arrangement between parents for the care of their children when no payment is involved and specific conditions are met is exempt from licensure pursuant to Health and Safety Code Section 1596.792(e). The care of a child by a relative is exempt from licensure pursuant to Health and Safety Code Section 1596.792(f).*

- ii. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. *Health and Safety Code Section 1596.792(d) does not include any age, time, or duration thresholds; however, it is limited to only caring for one family in addition to their own children. In a cooperative arrangement, parents combine their efforts so that each parent, or set of parents, rotates as the responsible caregiver with respect to all children in the cooperative; any person caring for children must be a parent or other specified relative of at least one of the children in the cooperative; there can be no payment of money or receipt of in-kind income in exchange for the provision of care; and no more than 12 children may receive care in the same place at the same time. For relative care, the child must be related to the caregiver.*

- iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children. *The exemptions for license-exempt family child care do not endanger the health, safety, and development of children because the children are cared for by their relatives or by an individual who cares for the children of only one additional family besides the provider's own children. The exemption for cooperative care similarly ensures that any person caring for children must be a parent, legal guardian, or specified family member of at least one of the children in the cooperative. Also, the TrustLine Registry background check process is required for license-exempt providers, except for grandparents, aunts and uncles, if they are compensated with funds pursuant to the Alternative Payment Program, Chapter 3 of Part 1.8 of the Child Care and Development Services Act.*

- c. In-home care (care in the child's own home by a non-relative). Describe by answering the questions below.

- i. Identify the categories of CCDF-eligible in-home care (care in the child's own home by a non- relative) providers who are exempt from licensing requirements. *In-home care may occur in a cooperative arrangement or be provided by an individual who cares for the children of only one additional family besides the provider's own children (Health and Safety Code Section 1596.792(d) & (e)).*
- ii. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. *No more than 12 children are allowed in cooperative care and each parent rotates as the responsible caregiver (California Health and Safety Code Section 1596.792(e)). There are no ratio or group size requirements for care involving children of only one family in addition to the provider's own children (California Health and Safety Code Section 1596.792(d)).*

- iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children. *The California Department of Social Services supports a parent's right to choose the child care arrangement best suited to the child and family needs including actively working toward the removal of unnecessary barriers that prevent a family's preference and choice of exempt providers and in-home care. The TrustLine Registry background check process is required for license-exempt providers, except for grandparents, aunts and uncles, if they are compensated with funds pursuant to the Alternative Payment Program, Article 3 (commencing with Section 8220) of Chapter 2 of Part 6 of the Education Code or pursuant to the federal Child Care and Development Block Grant Program.*

5.2 Ratios, Group Size, and Qualifications for CCDF Providers

Lead Agencies must have child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate staff: child ratios, group size limits for specific age populations, and the required qualifications for providers. Lead Agencies should map their categories of care to the CCDF categories. Exemptions for relative providers will be addressed in subsection 5.8.

5.2.1 Age classifications

Describe how the Lead Agency defines the following age classifications (e.g., Infant: 0 – 18 months).

- a. Infant. Describe: *A child under 2 years of age.*
- b. Toddler. Describe: *A child from 18 months up to 36 months (at age 3).*
- c. Preschool. Describe: *Children enrolled in a child care center licensed by Community Care Licensing Division and who are not enrolled in either an infant center or a school age center."*
- d. School-Age. Describe: *"School-age Child" means any child who has entered the first grade or above or is a child in a child care program providing care and supervision exclusively to children enrolled in kindergarten and above. The Kindergarten Readiness Act of 2010 established Transitional Kindergarten. Transitional kindergarten means, the first year of a two-year kindergarten program. This change is recognized in Health and Safety Code section 1596.806(d)(1) which defines a "school-age childcare program" as being operated on a school site and includes children who are currently enrolled in a school, including transitional kindergarten, as defined in Section 48000 of the Education Code, or are dependent children living within the same household as a child attending a school, operated by an entity that contracts with the school to provide staff and program.*

5.2.2 Ratio and group size limits

Provide the ratio and group size limits for settings and age groups below.

- a. Licensed CCDF center-based care:
 - i. Infant.

Ratio: **4:1**

Group size: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. California law does not currently establish group size requirements for this age component.*

ii. Toddler.

Ratio: *6:1*

Group size: *12:2*

iii. Preschool.

Ratio: *12:1*

Group size: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. California law does not currently establish group size requirements for this age component.*

iv. School-Age.

Ratio: *14:1*

Group size: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. California law does not currently establish group size requirements for this age.*

v. Mixed-Age Groups (if applicable).

Ratio: *Classrooms with mixed age groups must observe the individual requirements of the three types of child care licenses based on the age of the children in care. For example: 1) the Infant license is issued for providing care to infant from birth to up to 2 years old with a ratio of 1 teacher to 4 infants. 2) the Preschool license issued for children 2 years old to 6 years old or until they are enrolled in school with a ratio of 1 teacher to 12 children. 3) the School-age license is issued for children enrolled in a school program with a teacher to child ratio of 1 teacher to 14 children. The licensee may request to add a toddler option program to either their infant license or preschool license.*

Group size: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. California law does not currently establish group size requirements for this age component.*

b. If different, provide the ratios and group size requirements for the license-exempt center-based providers who receive CCDF funds under the following age groups:

- i. ☐ Not applicable. There are no differences in ratios and group size requirements.

- ii. Infant: *License-exempt child care providers can legally operate without a license and licensing standards do not apply to them. License-exempt providers may only operate within the limitations of California Health and Safety Code Sections 1596.792 and 1596.793.*
- iii. Toddler: *License-exempt child care providers can legally operate without a license and licensing standards do not apply to them. License-exempt providers may only operate within the limitations of California Health and Safety Code Sections 1596.792 and 1596.793.*
- iv. Preschool: *License-exempt child care providers can legally operate without a license and licensing standards do not apply to them. License-exempt providers may only operate within the limitations of California Health and Safety Code Sections 1596.792 and 1596.793.*
- v. School-Age: *License-exempt child care providers can legally operate without a license and licensing standards do not apply to them. License-exempt providers may only operate within the limitations of California Health and Safety Code Sections 1596.792 and 1596.793.*
- vi. Mixed-Age Groups: *License-exempt child care providers can legally operate without a license and licensing standards do not apply to them. License-exempt providers may only operate within the limitations of California Health and Safety Code Sections 1596.792 and 1596.793.*
- c. Licensed CCDF family child care home providers:
 - i. Infant (if applicable)

Ratio: *4:1*

Group size: *A maximum of 4 infants for a family child care home, both small and large. NOTE: If a small family child care home has 4 infants in care, then that facility may not care for any other children.*
 - ii. Toddler (if applicable)

Ratio: *6:1 (small); 12:2 or 8:1 (large).*

Group size: *6:1 for a small family child care home; the total licensed capacity for a small family child care home must not exceed 8 children. 12:2 or 8:1 for a large family child care home; the total licensed capacity for a Large Family Child Care Home must not exceed 14 children.*
 - iii. Preschool (if applicable)

Ratio: *6:1 (small); 12:2 or 8:1 (large).*

Group size: *6:1 for a small family child care home; the total licensed capacity for a small family child care home must not exceed 8 children. 12:2 or 8:1 for a large family child care home; the total licensed capacity for a Large Family Child Care Home must not exceed 14 children.*
 - iv. School-Age (if applicable)

Ratio: *8:1 (small); 14:2 or 8:1 (large).*

Group size: *8:1 for a small family child care home; the total licensed capacity for a small family child care home must not exceed 8 children. 14:2 or 8:1 for a large family child care home; the total licensed capacity for a large family child care home must not exceed 14 children.*

v. Mixed-Age Groups

Ratio: *Varies based on group size. See response below in group size.*

Group size: *A small family day care home may provide care for (1) four infants; or (2) six children, no more than three of whom are infants; or (3) more than six and up to eight children, without an additional adult attendant, if all of the following conditions are met: (a) at least one child is enrolled in and attending kindergarten or elementary school and a second child is at least six years of age; (b) more than two infants are cared for during any time when more than six children are cared for; (c) the licensee notifies each parent that the facility is caring for two additional school-age children and that there may be up to seven or eight children in the home at one time; (d) the licensee obtains the written consent of the property owner when the family day care home is operated on property that is leased or rented. The maximum number of children for whom care may be provided includes children under age 10 who reside in the licensee's home. When there is an assistant provider in the home, a large family day care home may provide care for (1) 12 children, no more than four of whom may be infants; or (2) more than 12 children and up to 14 children, if all of the following conditions are met: (a) at least one child is enrolled in and attending kindergarten or elementary school and a second child is at least six years of age; (b) no more than three infants are cared for during any time when more than 12 children are being cared for; (c) the licensee notifies a parent that the facility is caring for two additional school-age children and that there may be up to 13 or 14 children in the home at one time. (d) the licensee obtains the written consent of the property owner when the family day care home is operated on property that is leased or rented. The maximum number of children for whom care may be provided includes children under age 10 who reside in the licensee's home and the assistant provider's children under age 10. If no assistant provider is present in the large family day care home, then the licensee may care for no more children than allowed in a small family day care home.*

d. Are any of the responses above different for license-exempt family child care homes?

☐ No.

☒ Yes. If yes, describe how the ratio and group size requirements for license- exempt providers vary by age of children served. *License-exempt family child care providers can legally operate without a license and licensing standards do not apply to them. The Child Care Resource and Referrals, through the Child Care Initiative Project (CCIP), conduct active engagement activities to provide supports and training to license-exempt providers, as does the local Quality Rating and Improvement System through Quality Counts California. Additionally, CCIP provides an on-ramp for providers wishing to become licensed child care providers.*

☐ Not applicable. The Lead Agency does not have license-exempt family child care homes.

e. Licensed in-home care (care in the child's own home):

i. Infant (if applicable)

Ratio: *N/A.*

Group size: *N/A.*

ii. Toddler (if applicable)

Ratio: *N/A.*

Group size: *N/A.*

iii. Preschool (if applicable)

Ratio: *N/A.*

Group size: *N/A.*

iv. School-Age (if applicable)

Ratio: *N/A.*

Group size: *N/A.*

v. Mixed-Age Groups (if applicable)

Ratio: *N/A.*

Group size: *N/A.*

f. Are any of the responses above different for license-exempt in-home care?

☐ No.

☒ *Yes. If yes, describe how the ratio and group size requirements for license- exempt in-home care vary by age of children served. In-home providers are those who only provide care for relative children, children from a single family in addition to the provider's own child/ren, and cooperative arrangements. No more than 12 children are allowed in cooperative care; care rotates houses, so it may occur in the child's own home (California Health and Safety Code Section 1596.792(e)). There are no ratio or group size requirements for care by a relative or for care involving children of only one family in addition to the provider's own children (California Health and Safety Code Section 1596.792(d)&(f)).*

5.2.3 Teacher/caregiver qualifications for licensed, regulated, or registered care

Provide the teacher/caregiver qualifications for each category of care.

a. Licensed center-based care

- i. Describe the teacher qualifications for licensed CCDF center-based care (e.g., degrees, credentials, etc.), including any variations based on the ages of children in care: *Infant: Infant teacher qualifications require 12 semester units or equivalent quarter units in early childhood education/development (at least 3 semester units or equivalent quarter units must be related to infant care) and 6 months experience in a licensed infant care center or comparable group child care program for children under the age of 5. Assistant teacher (aide) qualifications require either 6 semester units or equivalent quarter units in early childhood education/development or 2 semester units or equivalent quarter units in early childhood education/development following initial employment with continuation in the educational program each semester/quarter until 6 units have been completed. An aide who is less than 18 years old is permitted if they are a high school graduate or enrolled in a Regional Occupation Program (ROP) at an accredited high school/college. Toddler: An Infant Center licensee or Preschool Center licensee may request to add a toddler option program to their license. In this instance, either the teacher/caregiver qualifications described for the Infant Center license, or the Preschool Center would apply; however, any toddler in care under the age of 24 months would require teacher/caregiver qualifications equivalent to the Infant Center license. Preschool: Preschool lead teacher qualifications require 12 semester units or equivalent quarter units in early childhood education/development and 6 months experience in a licensed child care center or comparable group child care program. Assistant teacher qualifications require either 6 semester units or equivalent quarter units of early childhood education/development or 2 semester units or equivalent quarter units in early childhood education/development following initial employment with continuation in the educational program each semester/quarter until 6 units have been completed. An aide who is less than 18 years old is permitted if they are a high school graduate or enrolled in an ROP at an accredited high school/college. School-age: School-age teacher qualifications require 12 semester units or equivalent quarter units in early childhood education/development and 6 months experience in a licensed child care center or comparable group child care program. Mixed Age Groups: Staff Qualifications for classrooms with mixed age groups are based upon the age of children being served, whereby qualifications for those caregivers would include all required training as well as any corresponding qualifications specific to the age of children being served outlined within this section of the State Plan.*
- ii. Describe the director qualification for licensed CCDF center-based care, including any variations based on the ages of children in care or the number of staff employed: *Licensed child care center directors shall have completed one of the following prior to employment: (1) High school graduation or completion of the General Education Development (GED) examination, with passing grades; 15*

semester or equivalent quarter units as specified in California Code of Regulations, Title 22, section 101215.1(h)(1)(A) and (h)(1)(B) at an accredited or approved college or university; and at least four years of teaching experience in a licensed child care center or comparable group child care program. Three of the 15 semester units or equivalent quarter units shall be in administration or staff relations. Twelve of the 15 semester units or equivalent quarter units shall include courses that cover the general areas of child growth and development, or human growth and development; child, family and community, or child and family; and program/curriculum. (2) An associate of arts degree from an accredited or approved college or university with a major or emphasis in early childhood education or child development; and at least two years of teaching experience in a licensed child care center or comparable group child care program. Three semester units or equivalent quarter units shall be in administration or staff relations. (3) A bachelor's degree from an accredited or approved college or university with a major or emphasis in early childhood education or child development; and at least one year of teaching experience in a licensed child care center or comparable group child care program. Three semester units or equivalent quarter units shall be in administration or staff relations. (4) A Child Development Site Supervisor Permit or a Child Development Program Director Permit issued by the California Commission on Teacher Credentialing.

b. Licensed family child care

Describe the provider qualifications for licensed family child care homes, including any variations based on the ages of children in care: *All family child care home licensees are required to have 16 hours of health and safety training. This training includes pediatric first aid and pediatric cardiopulmonary resuscitation (CPR) as well as a requirement that at least one staff member who has a current course completion card in pediatric first aid and pediatric CPR must be on site at all times when children are present in the facility. They must also be present with children when children are offsite for facility activities. They must also have required mandated reporter training every two years.*

c. Licensed, regulated, or registered in-home care (care in the child's own home by a non-relative)

Describe the provider qualifications for licensed, regulated, or registered in-home care providers (care in the child's own home) including any variations based on the ages of children in care: *The California Department of Social Services does not have specific qualifications for in-home child care; such care is exempt from licensure. If a child lives in a licensed family child care home, qualifications pertaining to licensed family child care homes would apply. The TrustLine Registry background check process is required for license-exempt providers, except for grandparents, aunts, and uncles, if they are compensated with funds pursuant to the Alternative Payment Program, Chapter 3 of Part 1.8 of the Child Care and Development Services Act.*

5.2.4 Teacher/caregiver qualifications for license-exempt providers

Provide the teacher/provider qualification requirements (for instance, age, high school diploma, specific training, etc.) for the license-exempt providers under the following categories of care:

- a. License-exempt center-based child care. *Programs with General Child Care and Development contracts that meet exempt from licensure per Health and Safety Code Section 1596.792 (h) and (i) are required to meet all Program Quality qualifications described in California Code of Regulations, Title 5 (5 CCR), Subchapter 12 Program Quality of the California Code of Regulations which includes qualified staff, ratios per 5 CCR 18290, and completion of the Desired Results system as part of the annual program self-evaluation process. Exempt programs that provide services through voucher-based programs such as public recreation programs comply with the criteria in Health and Safety Code Section 1596.792.*
- b. License-exempt home-based child care. *Following 5 CCR 18230, if the contractor's policies allow payment for in-home care, the contractor shall maintain in its file the following records concerning in-home care providers: (a) a description of the caregiver's qualifications and work experience obtained during a personal interview with the caregiver; (b) a declaration by the caregiver that he or she is in good health; (c) a signed statement from the parent verifying that the parent has interviewed and approved of the caregiver; (d) a California driver's license number or valid and recognized form of identification to verify that the caregiver is at least eighteen (18) years of age. License exempt providers must also complete Declaration of Exemption from TrustLine Registration and Health and Safety Self-Certification form (CCP1) or Health and Safety - Certification for license-exempt providers form (CCP4).*
- c. License-exempt in-home care (care in the child's own home). *Following 5 CCR 18230, the contractor shall maintain in its file the following records concerning in-home care providers: (a) a description of the caregiver's qualifications and work experience obtained during a personal interview with the caregiver; (b) a declaration by the caregiver that he or she is in good health; (c) a signed statement from the parent verifying that the parent has interviewed and approved of the caregiver; (d) a California driver's license number or other valid and recognized form of identification to verify that the caregiver is at least eighteen (18) years of age. License-exempt providers must also complete Declaration of Exemption from TrustLine Registration and Health and Safety Self-Certification form (CCP1) or Health and Safety Self-Certification for license-exempt providers form (CCP4).*

5.3 Health and Safety Standards for CCDF Providers

Lead Agencies must have health and safety standards for providers serving children receiving CCDF assistance relating to the required health and safety topics as appropriate to the provider setting and age of the children served. This requirement is applicable to all child care programs receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for relative providers, as defined by CCDF. Lead Agencies have the option of exempting certain relatives from any or all CCDF health and safety requirements.

Exemptions for relative providers' standards requirements will be addressed in question 5.8.1.

Describe the following health and safety standards for programs serving children receiving CCDF assistance on the following topics (note that monitoring and enforcement will be addressed in subsection 5.5):

5.3.1 Prevention and control of infectious diseases (including immunizations) health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the prevention and control of infectious diseases for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: *A licensed child care center must be responsible for ensuring that children with obvious symptoms of illness including, but not limited to, fever or vomiting, are not accepted. A center must be equipped to isolate and care for any child who becomes ill during the day. A child care center must immediately notify the child's authorized representative when the child becomes ill enough to require isolation and must be asked to remove the child from the center as soon as possible. Centers are required to report to California Department of Social Services (CDSS), within seven days of occurrence, any epidemic outbreaks, injuries, and unusual incidents that occur while care is being provided. Preventive health practices training includes instruction in the recognition, management, and prevention of infectious diseases, including immunizations. Child care centers are to practice universal health precautions and provide safe and healthful accommodations and ensure clean, and sanitary buildings and grounds outlined in Title 22, California Code of Regulations Sections: 101216(e), 101216(e)(2), 101238(a), 101223(a)(2), and 101238(a). The Healthy Schools Act requires that anyone using disinfectants at child care centers complete annual California Department of Pesticide Regulation-approved training. Online training can be found by going to California School & Child Care Integrated Pest Management. Prior to employment or licensure, all child care facility staff must provide evidence of tuberculosis clearance and be immunized against influenza, pertussis, and measles unless exempt; all staff must also obtain annual influenza vaccinations unless exempt (Health and Safety Code Section 1596.7995). Children in licensed child care centers shall be immunized from diseases, as specified by the California Department of Public Health (CDPH), prior to admission (See Health and Safety Code Section 120335; California Code of Regulations, Title 17, Section 6000, et seq.; California Code of Regulations, Title 22, Sections 101220.1). Documentation of immunization is required while a child is in care, unless the child is enrolled in public or private elementary school or is exempt based on a medical reason, and for some immunizations, based on a medical reason or personal belief (Health and Safety Code Sections 120325(c), 120338; California Code of Regulations, Title 22, Section 101220.1).*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *A licensed family child care home must be responsible for ensuring that children with obvious symptoms of illness including, but not limited to, fever or vomiting, are not accepted. A family child care home must be equipped to isolate and care for any child who becomes ill during the day. A family child care home must immediately notify the child's authorized representative when the child becomes ill enough to require isolation and must be asked to remove the child from the home as soon as possible. Licensed providers are required to report to CDSS, within seven days of occurrence, any epidemic outbreaks, injuries, and unusual incidents that occur while care is being provided. Preventive health practices training includes instruction in the recognition, management, and*

prevention of infectious diseases, including immunizations. Family child care homes are to practice universal health precautions and provide safe and healthful accommodations and ensure clean, and sanitary buildings and grounds outlined in Title 22, California Code of Regulations Sections: 102416(c), 102416(c), 102417(b), 102417(b), and 102423(a)(2). Prior to employment or licensure, all child care facility staff must provide evidence of tuberculosis clearance and be immunized against influenza, pertussis, and measles unless exempt; all staff must also obtain annual influenza vaccinations unless exempt (Health and Safety Code Sections 1597.055, 1597.54, 1597.622.). Children in licensed family child care homes shall be immunized from diseases, as specified by CDPH, prior to admission (See Health and Safety Code Section 120335; California Code of Regulations, Title 17, Section 6000, et seq.; California Code of Regulations, Title 22, Section 102418). Documentation of immunization is required while a child is in care, unless the child is enrolled in public or private elementary school or is exempt based on a medical reason, and for some immunizations, based on a medical reason or personal belief (Health and Safety Code Sections 120325(c), 120338; California Code of Regulations, Title 22, Section 102418).

- iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X* Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021 for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal technical assistance (TA) team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the CDPH. Afterschool programs may be licensed as child*

care centers or exempt from licensure and under the authority of the California Department of Education.

- b. Provide the standards, appropriate to the provider setting and age of children, that address that children attending child care programs under CCDF are age-appropriately immunized, according to the latest recommendation for childhood immunizations of the respective State public health agency, for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: *Children in licensed child care facilities shall be immunized from diseases, as specified by CPDH, prior to admission (See Health and Safety Code, Section 120335; California Code of Regulations, Title 17, Section 6000, et seq.; California Code of Regulations, Title 22, Sections 101220.1 and 102418). Documentation of immunization is required while a child is in care, unless the child is enrolled in public or private elementary school or is exempt based on a medical reason, and for some immunizations, based on a medical reason or personal belief (Health and Safety Code Sections 120325(c), 120338; California Code of Regulations, Title 22, Sections 101220.1 and 102418).*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *Children in licensed child care facilities shall be immunized from diseases, as specified by CPDH, prior to admission (See Health and Safety Code, Section 120335; California Code of Regulations, Title 17, Section 6000, et seq.; California Code of Regulations, Title 22, Sections 101220.1 and 102418). Documentation of immunization is required while a child is in care, unless the child is enrolled in public or private elementary school or is exempt based on a medical reason, and for some immunizations, based on a medical reason or personal belief (Health and Safety Code Sections 120325(c), 120338; California Code of Regulations, Title 22, Sections 101220.1 and 102418).*
 - iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
 - iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team, to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory,*

budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the CDPH. Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the California Department of Education.*

5.3.2 Prevention of sudden infant death syndrome and the use of safe-sleep practices health and safety standard. Provide the standards, appropriate to the provider setting and age of children, that address the prevention of sudden infant death syndrome and use of safe sleeping practices for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: *Licensed child care centers are required to comply with regulations which aim to reduce the risk of sleep-related infant deaths. These practices include, but are not limited to, implementing an individual infant sleeping plan, placing infants up to 12 months of age on their backs for sleeping, not swaddling infants, directly observing sleeping infants, checking on sleeping infants every 15 minutes, and ensuring cribs are free from all loose articles and objects, including blankets, pillows, and bumper pads (California Code of Regulations, Title 22, Sections 101429, 101430, and 101439.1).*
- ii. All CCDF-eligible licensed family child care homes. Provide the standard: *Licensed family child care homes are required to comply with regulations which aim to reduce the risk of sleep-related infant deaths. These practices include, but are not limited to, implementing an individual infant sleeping plan, placing infants up to 12 months of age on their backs for sleeping, not swaddling infants, directly observing sleeping infants, checking on sleeping infants every 15 minutes, and ensuring cribs are free from all loose articles and objects, including blankets, pillows, and bumper pads (California Code of Regulations, Title 22, Section 102425).*
- iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
- iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The California Department of Social Services (CDSS) has been meeting regularly with the federal technical assistance (TA) team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*

- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the California Department of Public Health. Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the California Department of Education.*

5.3.3 Administration of medication, consistent with standards for parental consent health and safety standard.

- a. Provide the standards, appropriate to the provider setting and age of children, that address the administration of medication for the following CCDF-eligible providers:
 - i. All CCDF-eligible licensed center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Currently, CDSS has the following standards in place related to the administration of medication: Health and Safety Code Section 1596.797 authorizes child care centers to conduct blood glucose testing for the purposes of monitoring a child diagnosed with Diabetes. Health and Safety Code section 1596.798 allows the licensees and staff of a child day care facility to administer inhaled medication to a child if specified requirements are met. Prior to, or within 30 calendar days following the enrollment of a child, a child care center licensee must obtain a written medical assessment of the child. This medical assessment enables the licensee to assess whether the center can provide necessary health-related services to the child. During the admission process the child's authorized representative will complete an admission agreement with the provider, which is to include information regarding basic services such as medication or other health-related needs of the child. It is during the admission process that the center works with the parents to better understand the state of the child's health and physical and emotional development, and to assess whether the child care center can meet the child's needs. Licensees and specified licensed child care facility staff obtain pediatric first aid training, which includes training on the administration of inhaled medications. Licensed child care centers and their staff may administer inhaled medication to a child if there is written authorization from the child's parent or guardian, the licensee or staff complies with the written instructions from the child's*

physician, the licensee or staff administering the inhaled medication records each administration and provides a daily record to the child's parent or guardian, and the licensee or staff has received the required training. In a child care center, prescription medications must be administered in accordance with the label instructions as prescribed by the child's physician and as specified in writing by the child's authorized representative. Non-prescription medications must be administered in accordance with the product label directions on the container and as specified in writing by the child's authorized representative. A child care center is prohibited from withholding medication from a child. As places of public accommodation, licensed child care facilities have obligations to care for children with qualifying disabilities under federal and state disability laws which include: the Americans with Disabilities Act of 1990 (ADA), Title III, The California Unruh Civil Rights Act, and The California Disabled Persons Act.

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Health and Safety Code section 1596.797 authorizes family child care homes to conduct blood glucose testing for the purposes of monitoring a child diagnosed with Diabetes. Health and Safety Code section 1596.798 allows the licensees and staff of a child day care facility to administer inhaled medication to a child if specified requirements are met. Licensees and specified licensed child care facility staff obtain pediatric first aid training, which includes training on the administration of inhaled medications. Licensed family child care homes and their staff may administer inhaled medication to a child if there is written authorization from the child's parent or guardian, the licensee or staff complies with the written instructions from the child's physician, the licensee or staff administering the inhaled medication records each administration and provides a daily record to the child's parent or guardian, and the licensee or staff has received the required training. A family child care home is prohibited from withholding medication from a child. As places of public accommodation, licensed child care facilities have obligations to care for children with qualifying disabilities under federal and state disability laws which include: the Americans with Disabilities Act of 1990 (ADA), Title III, The California Unruh Civil Rights Act, and The California Disabled Persons Act. License-exempt providers do not have standards or requirements regarding the administration of medication.*
- iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
- iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal technical assistance (TA) team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory,*

budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.

- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the California Department of Public Health (CDPH). Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the California Department of Education (CDE).*

- b. Provide the standards, appropriate to the provider setting and age of children, that address obtaining permission from parents to administer medications to children for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Licensed child care centers and their staff may administer inhaled medication to a child if there is written authorization from the child's parent or guardian, the licensee or staff complies with the written instructions from the child's physician, the licensee or staff administering the inhaled medication records each administration and provides a daily record to the child's parent or guardian, and the licensee or staff has received the required training. In a child care center, prescription medications must be administered in accordance with the label instructions as prescribed by the child's physician and as specified in writing by the child's authorized representative. Non-prescription medications must be administered in accordance with the product label directions on the container and as specified in writing by the child's authorized representative.*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Licensed family child care homes and their staff may administer inhaled medication to a child if there is written authorization from the child's parent or guardian, the licensee or staff complies with the written instructions from the child's physician, the licensee or staff administering the inhaled medication records each administration and provides a daily record to the child's parent or guardian, and the licensee or staff has received the required training.*
 - iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
 - iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is*

now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the CDPH. Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the CDE.*

5.3.4 Prevention of and response to emergencies due to food and allergic reactions health and safety standard.

- a. Provide the standards, appropriate to the provider setting and age of children, that address the *prevention* of emergencies due to food and allergic reactions for the following CCDF-eligible providers:
 - i. All CCDF-eligible licensed center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Child care center licensees are required to maintain separate, complete, and current records for each child, including dietary restrictions and allergies. Licensed facilities obtain a signed consent form from a child's authorized representative to provide emergency medical treatment. Child care centers must meet requirements for administering appropriate medication. Food service requirements for child care centers state that a child must not be served any food to which the child's record indicates he or she has an allergy. Food allergies are also required to be included in the feeding plan for infants in child care centers.*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Family child care homes are required to maintain detailed records for each child, including an emergency information card. Licensed facilities obtain a signed consent form from a child's authorized representative to provide emergency medical treatment.*
 - iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
 - iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal*

TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.

- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the California Department of Public Health (CDPH). Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the California Department of Education (CDE).*

- b. Provide the standards, appropriate to the provider setting and age of children, that address the *response* to emergencies due to food and allergic reactions for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Licensed child care centers obtain a signed consent form from a child's authorized representative to provide emergency medical treatment and must meet requirements for administering appropriate medication.*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Licensed family child care homes obtain a signed consent form from a child's authorized representative to provide emergency medical treatment and must meet requirements for administering appropriate medication.*
 - iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X* Not applicable.
 - iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
 - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the CDPH. Afterschool programs may be licensed as child*

care centers or exempt from licensure and under the authority of the CDE.

5.3.5 Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the identification of and protection from building and physical premises hazards for the following CCDF-eligible providers:
 - i. All CCDF-eligible licensed center care. Provide the standard: *Child care center playgrounds must be enclosed by a fence to protect children and to keep them in the outdoor activity area. Fences must be at least four feet high. The areas around and under high climbing equipment, swings, slides and other similar equipment must be cushioned with material that absorbs falls. Playground equipment must be securely anchored to the ground unless it is portable by design. Fireplaces and open-faced heaters in child care centers must be made inaccessible to children to ensure children's safety.*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *Family child care home outdoor play areas must either be fenced, or outdoor play areas must be supervised by the licensee or caregiver. Fireplaces and open-face heaters must be screened to prevent access by children. The home must contain a fire extinguisher and smoke detector device which meet standards established by the State Fire Marshal.*
 - iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
 - iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The California Department of Social Services (CDSS) has been meeting regularly with the federal technical assistance (TA) team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*

- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the California Department of Public Health (CDPH). Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the California Department of Education (CDE).*

- b. Provide the standards, appropriate to the provider setting and age of children, that address the identification of and protection from bodies of water for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: *Licensed child care facilities are required to ensure the inaccessibility of pools, including swimming pools (in-ground and above-ground), fixed-in-place wading pools, hot tubs, spas, fish ponds, or similar bodies of water, through a pool cover or by surrounding the pool with a fence.*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *Licensed child care facilities are required to ensure the inaccessibility of pools, including swimming pools (in-ground and above-ground), fixed-in-place wading pools, hot tubs, spas, fish ponds, or similar bodies of water, through a pool cover or by surrounding the pool with a fence.*
 - iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X* Not applicable.
 - iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
 - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the CDPH. Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the CDE.*
- c. Provide the standards, appropriate to the provider setting and age of children, that address the identification of and protection from vehicular traffic hazards for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Child care facility licensees shall post signs at the entrance to the facility that provide information on child passenger restraint systems and Vehicle Code sections 27360 and 27360.5. (See Health and Safety Code Section 1596.95). Only drivers licensed for the type of vehicle operated shall be permitted to transport children. The manufacturer's rated seating capacity of the vehicles shall not be exceeded. Motor vehicles used to transport children shall be maintained in a safe operating condition. All vehicle occupants shall be secured in an appropriate restraint system. Children shall not be left in parked vehicles. When transporting infants in any motor vehicle, the licensee shall secure the infants in a car seat designed for infants, which is secured in the vehicle in accordance with manufacturer's instructions. (See California Code of Regulations, Title 22, Sections 101225, 101425, 102417(h)-(l).)*
- ii. All CCDF-eligible licensed family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Child care facility licensees shall post signs at the entrance to the facility that provide information on child passenger restraint systems and Vehicle Code sections 27360 and 27360.5. (See Health and Safety Code Section 1596.95). Only drivers licensed for the type of vehicle operated shall be permitted to transport children. The manufacturer's rated seating capacity of the vehicles shall not be exceeded. Motor vehicles used to transport children shall be maintained in a safe operating condition. All vehicle occupants shall be secured in an appropriate restraint system. Children shall not be left in parked vehicles. When transporting infants in any motor vehicle, the licensee shall secure the infants in a car seat designed for infants, which is secured in the vehicle in accordance with manufacturer's instructions. (See California Code of Regulations, Title 22, Sections 101225, 101425, 102417(h)-(l).)*
- iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
- iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on*

December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the CDPH. Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the CDE.*
- d. Prevention of shaken baby syndrome, abusive head trauma, and maltreatment health and safety standard. Provide the standards, appropriate to the provider setting and age of children, that address the prevention of shaken baby syndrome and abusive head trauma and indicate the age of children it applies to for the following CCDF-eligible providers:
 - i. All CCDF-eligible licensed center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Each child day care facility licensee and employee are required to complete mandated reporter training regarding the identification and reporting of child abuse and neglect, including the dangers of shaking a child. A licensed child day care facility is prohibited from the use of corporal or unusual punishment, infliction of pain, and other actions of a punitive nature. These standards apply regardless of the age of a child in care.*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Each child day care facility licensee and employee are required to complete mandated reporter training regarding the identification and reporting of child abuse and neglect, including the dangers of shaking a child. A licensed child day care facility is prohibited from the use of corporal or unusual punishment, infliction of pain, and other actions of a punitive nature. These standards apply regardless of the age of a child in care.*
 - iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
 - iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The California Department of Social Services (CDSS) has been meeting*

regularly with the federal technical assistance (TA) team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.

- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- v. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *The CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the California Department of Public Health (CDPH). Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the California Department of Education (CDE).*
- e. Provide the standards, appropriate to the provider setting and age of children, that address the prevention of child maltreatment and indicate the age of children it applies to for the following CCDF-eligible providers:
 - i. All CCDF-eligible licensed center care. Provide the standard: *Each child day care facility licensee and employee are required to complete mandated reporter training regarding the identification and reporting of child abuse and neglect. The training includes information about child safety and maltreatment prevention, including protective factors that may help prevent abuse, the dangers of shaking a child, safe sleep practices, psychological effects of repeated exposure to domestic violence, safe and age-appropriate forms of discipline, how to promote a child's social and emotional health, how to support positive parent-child relationships, information on recognizing risk factors that may lead to abuse, and when to call for emergency medical attention to prevent further injury or death. Licensees and employees are required to report any known or suspected abuse or neglect of a child in care. Licensees are required to ensure that each child is accorded their personal rights, including to be free from corporal or unusual punishment, infliction of pain, or any other action of a punitive nature that interferes with a child's functions of daily living. These standards apply regardless of the age of a child in care.*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *Each*

child day care facility licensee and employee are required to complete mandated reporter training regarding the identification and reporting of child abuse and neglect. The training includes information about child safety and maltreatment prevention, including protective factors that may help prevent abuse, the dangers of shaking a child, safe sleep practices, psychological effects of repeated exposure to domestic violence, safe and age-appropriate forms of discipline, how to promote a child's social and emotional health, how to support positive parent-child relationships, information on recognizing risk factors that may lead to abuse, and when to call for emergency medical attention to prevent further injury or death. Licensees and employees are required to report any known or suspected abuse or neglect of a child in care. Licensees are required to ensure that each child is accorded their personal rights, including to be free from corporal or unusual punishment, infliction of pain, or any other action of a punitive nature that interferes with a child's functions of daily living. These standards apply regardless of the age of a child in care.

- iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X* Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the CDPH. Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the CDE.*

5.3.6 Emergency preparedness and response planning standard

Identify by checking below that the emergency preparedness and response planning due to natural disasters and human-caused events standard includes procedures in the following areas:

- i. ☒ Evacuation
- ii. ☒ Relocation
- iii. ☐ Shelter-in-place
- iv. ☐ Lock down
- v. Staff emergency preparedness
 - ☐ Training
 - ☒ Practice drills
- vi. Volunteer emergency preparedness
 - ☐ Training
 - ☒ Practice drills
- vii. ☒ Communication with families
- viii. ☐ Reunification with families
- ix. ☒ Continuity of operations
- x. Accommodation of
 - ☒ Infants
 - ☒ Toddlers
 - ☒ Children with disabilities
 - ☒ Children with chronic medical conditions
- xi. If not all boxes above are checked, describe. *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Currently the California Code of Regulations and Health and Safety Code do not address the following for licensed child care facilities: shelter-in-place, lock down, and reunification with families. The Department will need to seek regulatory and/or legislative changes to address these areas of noncompliance.*

5.3.7 Handling and storage of hazardous materials and the appropriate disposal of biocontaminants health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the handling and storage of hazardous materials for the following CCDF-eligible providers:
 - i. All CCDF-eligible licensed center care. Provide the standard: *Child care centers are required to store disinfectants, cleaning solutions, poisons, and other items that could pose a danger if readily available to children in an area inaccessible to children. Title 22, California Code of Regulations Sections 101216(e)(2),*

101223(a)(2), and 101238(a).

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: *Family child care homes are required to store disinfectants, cleaning solutions, poisons, and other items that could pose a danger if readily available to children in an area inaccessible to children Title 22, California Code of Regulations Sections 102417(b), and 102423(a)(2).*
- iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
- iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal technical assistance (TA) team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *The CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the California Department of Public Health (CDPH). Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the California Department of Education (CDE).*
- b. Provide the standards, appropriate to the provider setting and age of children, that address the disposal of bio contaminants for the following CCDF-eligible providers:
 - i. All CCDF-eligible licensed center care. Provide the standard: *In child care centers, solid waste is required to be stored, located, and disposed of in a manner that will not transmit communicable diseases or odors, create a nuisance, or provide a breeding place or food source for insects or rodents; water and any disinfectants/solutions that have been used for cleaning must be disposed of safely. Child care centers must be clean, safe, and sanitary.*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *Family child care homes must be kept clean and free from conditions which might endanger a child.*
 - iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
 - iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
 - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *The CDSS does not regulate summer*

camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the CDPH. Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the CDE.

5.3.8 Precautions in transporting children health and safety standard

Provide the standards, appropriate to the provider setting and age of children, that address precautions in transporting children for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: *Child care centers are required to state, in their plan of operation, the transportation arrangements provided by the applicant/licensee for children who do not have independent arrangements. Child care centers are required to have a disaster and mass casualty plan of action, which includes transportation arrangements in the case of an emergency. Child care centers are required to make their admission policies available to the public, including field trip provisions and transportation arrangements, if any. Transportation requirements for child care centers may be found in California Code of Regulations, Title 22, Section 101225. Transportation for infants in an infant center may be found in California Code of Regulations, Title 22, Section 101425. Child care centers are required to maintain personnel records, including driver's license numbers if the licensee or employee is to transport children.*
- ii. All CCDF-eligible licensed family child care homes. Provide the standard: *Transportation requirements for family child care homes may be found California Code of Regulations, Title 22, Section 102417. Family child care homes are required to maintain personnel records, including driver's license numbers if the licensee or employee is to transport children.*
- iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
- iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the*

standards, training and monitoring policies for the license-exempt providers.

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the California Department of Public Health. Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the California Department of Education.*

5.3.9 Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR) health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address pediatric first aid for all staff for the following CCDF-eligible providers:
 - i. All CCDF-eligible licensed center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. California Health and Safety Code Section 1596.866 requires at least one director or teacher at a child care center and each family child care home licensee to have at least 16 hours of health and safety training, which includes pediatric first aid. Additionally, Health and Safety Code Section 1596.866 (b) requires a trained individual be onsite at all times when children are present at the facility and shall be present when children are offsite for facility activities. California law does not currently require all child care facility staff to obtain CPR/First Aid training.*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. California Health and Safety Code Section 1596.866 requires at least one director or teacher at a child care center and each family child care home licensee to have at least 16 hours of health and safety training, which includes pediatric first aid. Additionally, Health and Safety Code Section 1596.866 (b) requires a trained individual be onsite at all times when children are present at the facility and shall be present when children are offsite for facility activities. California law does not currently require all child care facility staff to obtain CPR/First Aid training.*
 - iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
 - iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The California Department of Social Services (CDSS) has been meeting regularly with the federal technical assistance (TA) team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring*

policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.

- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
 - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the California Department of Public Health (CDPH). Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the California Department of Education (CDE).*
- b. Provide the standards, appropriate to the provider setting and age of children, that address pediatric cardiopulmonary resuscitation for all staff for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. California Health and Safety Code Section 1596.866 requires at least one director or teacher at a child care center and each family child care home licensee to have at least 16 hours of health and safety training, which includes pediatric CPR. Additionally, Health and Safety Code Section 1596.866 (b) requires a trained individual by onsite at all times when children are present at the facility and shall be present when children are offsite for facility activities. California law does not currently require all child care facility staff to obtain CPR/First Aid training.*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. California Health and Safety Code Section 1596.866 requires at least one director or teacher at a child care center and each family child care home licensee to have at least 16 hours of health and safety training, which includes pediatric CPR. Additionally, Health and Safety Code Section 1596.866 (b) requires a trained individual by onsite at all times when children are present at*

the facility and shall be present when children are offsite for facility activities. California law does not currently require all child care facility staff to obtain CPR/First Aid training.

- iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X* Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the CDPH. Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the CDE.*

5.3.10 Identification and reporting of child abuse and neglect health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the identification of child abuse and neglect for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. All child care center licensees, administrators, and employees and applicants for child care center licenses are required to complete child abuse and neglect mandated reporter training which explains how to identify and report child abuse and neglect. Per California law, staff that have limited English proficiency are exempt from the mandated reporter training if training is not made available in their primary language. However, all child care facility licensees and staff, regardless of English proficiency, are required to identify and report suspected or known instances of child abuse and neglect (Penal Code section 11164).*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. All family child care home licensees, administrators, and employees and applicants for family child care home licenses are required to complete child abuse and neglect mandated reporter training which explains how to identify and report child abuse and neglect. Per California law, staff that have limited English proficiency are exempt from the mandated reporter training if training is not made available in their primary language. However, all child care facility licensees and staff, regardless of English proficiency, are required to identify and report suspected or known instances of child abuse and neglect (Penal Code section 11164).*
 - iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X Not applicable.*
 - iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time develop an implementation plan. The CDSS has been meeting regularly with the federal technical assistance (TA) team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - v. All CCDF-eligible license-exempt family child care homes. Provide the standard:

California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
 - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the California Department of Public Health (CDPH). Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the California Department of Education (CDE).*
- b. Provide your standards, appropriate to the provider setting and age of children, that address the reporting of child abuse and neglect for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. The California Child Abuse and Neglect Reporting Act (the Act) includes procedures for an individual to report known and suspected instances of child abuse and neglect (Penal Code Section 11164 et seq.). A licensee, administrator, or employee of a licensed child day care facility is a mandated reporter. All persons who are mandated reporters are required to report all known or suspected cases of child abuse or neglect as specified in the Act. Per California law, staff that have limited English proficiency are exempt from the mandated reporter training if training is not made available in their primary language. However, all child care facility licensees and staff, regardless of English proficiency, are required to identify and report suspected or known instances of child abuse and neglect (Penal Code section 11164).*
 - ii. All CCDF-eligible licensed family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. The California Child Abuse and Neglect Reporting Act (the Act) includes procedures for an individual to report known and suspected instances of child abuse and neglect (Penal Code Section 11164 et seq.). A licensee, administrator, or employee of a licensed child day care facility is a mandated reporter. All persons who are mandated reporters are required to report all known or suspected cases of child abuse or neglect as specified in the Act. Per California law, staff that have limited English proficiency are exempt from the mandated reporter training if training is not made available in their primary language. However, all child care facility licensees and staff, regardless of*

English proficiency, are required to identify and report suspected or known instances of child abuse and neglect (Penal Code section 11164).

- iii. All CCDF-eligible licensed in-home care. Provide the standard: *N/A*
☐ *X* Not applicable.
 - iv. All CCDF-eligible license-exempt center care. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: *N/A*
 - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: *CDSS does not regulate summer camps, day camps, or similar programs as they are either exempt from licensure or under the authority of the CDPH. Afterschool programs may be licensed as child care centers or exempt from licensure and under the authority of the CDE.*
- c. Confirm if child care providers must comply with the Lead Agency's procedures for reporting child abuse and neglect as required by the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i):

☐ *X* Yes, confirmed.

☐ No. If no, describe: [Click or tap here to enter text.](#)

5.3.11 Additional optional standards

In addition to the required health and safety standards, does the Lead Agency require providers to comply with the following optional standards?

☐ *X* Yes.

☐ No. If no, skip to Section

5.4 If yes, describe the standard(s).

i. Nutrition. Describe: *California Health and Safety Code Section 1596.808 requires licensed child day care facilities to provide low-fat (1 percent) or nonfat milk to children ages two and older whenever milk is served, to limit juice to not more than one serving per day of 100 percent juice, and not to provide beverages with added sweeteners. Additionally, Health and Safety Code section 1596.866(a)(2)(C)(ii) requires family day care home licensees and at least one child care center director or teacher to complete at least 1 hour of childhood nutrition training as part of the preventative health practices course.*

ii. Access to physical activity. Describe: *Not applicable.*

iii. Caring for children with special needs. Describe: *California Health and Safety Code Section 1596.866(a)(3) states that health and safety training may include caring for children with special needs. A child care center license application must contain the age range and the categories of children to be served, including, but not limited to, children with disabilities and/or nonambulatory children. Child care center that provides care to a child with disabilities must be able to meet the individual needs of the child. A child care center must conduct one or more personal interviews with the child's parent or authorized representative to enable the person responsible for admissions to understand the state of the child's health and physical and emotional development and to assess whether the center can meet the child's needs. Prior to, or within 30 calendar days following the enrollment of a child, a child care center licensee must obtain a written medical assessment of a child, which identifies the child's special problems and needs. Child care centers that serve children with physical disabilities must provide additional equipment, aids, and/or conveniences as needed. A child care center caring for infants must complete a needs and services plan for each infant, which includes any special exercises for infants with physical disabilities.*

iv. Any other areas determined necessary to promote child development or to protect children's health and safety. Describe: *Not applicable.*

5.4 Pre-Service or Orientation Training on Health and Safety Standards

Lead Agencies must have requirements for all caregivers, teachers, and directors at CCDF providers to complete pre-service or orientation training (within 3 months of starting) on all CCDF health and safety standards and child development. The training must be appropriate to the setting and the age of children served. This training must address the required health and safety standards and the content area of child development. Lead Agencies have flexibility in determining the minimum number of training hours to require and are encouraged to consult with Caring for our Children Basics for best practices.

Exemptions for relative providers' training requirements are addressed in question 5.8.1.

5.4.1 Health and safety pre-service/orientation training requirements

Lead Agencies must certify staff have pre-service or orientation training on each standard that is appropriate to different settings and age groups. Lead Agencies may require pre-service or orientation to be completed before staff can care for children unsupervised. In the table below, check the boxes for which you have training requirements.

	Is this standard addressed in the pre-service or orientation training?	Is the pre-service or orientation training on this standard appropriate to different settings and age groups?	Does the Lead Agency require staff to complete the training before caring for children unsupervised?
a. Prevention and control of infectious diseases including immunizations	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/> X
b. SIDS prevention and use of safe sleep practices	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/> X
c. Administration of medication	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/> X
d. Prevention and response to food and allergic reactions	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/> X
e. Building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/> X
f. Prevention of shaken baby syndrome, abusive head trauma and child maltreatment	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/> X
g. Emergency preparedness and response planning and procedures	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/> X
h. Handling and storage of hazardous materials and disposal of biocontaminants	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/> X

i. Appropriate Precautions in transporting children, if applicable	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. Pediatric first aid and pediatric CPR (age-appropriate)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. Child abuse and neglect recognition and reporting	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
l. Child development including major domains of cognitive, social, emotional, physical development and approaches to learning.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

- m. If the Lead Agency does not certify implementation of all the health and safety pre- service/ orientation training requirements for staff in programs serving children receiving CCDF assistance, please describe: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. California law does not establish training components for all child care facility licensees and staff. For example, only designated child care center staff and family child care home licensees must receive training in pediatric CPR and first aid and preventative health practices. (Health and Safety Code section 1596.866.) Additionally, California needs to add identification of, and protection from, vehicular traffic to the pre-service orientation. The Child Care Licensing Division encourages all child care facility staff and licensees to use the Department's training tools such as the California Early Childhood Online and the California Child Care Licensing Resources for Parents and Providers website that provides training videos on topic such as: health and safety, bodies of water, disaster planning, transportation, personal rights, food services, and many others. The following URLs have been provided: <https://cclcd.childcarevideos.org/and> https://www.caearlychildhoodonline.org/en_home.aspx*

- n. Are there any provider categories to whom the above pre-service or orientation training requirements do not apply?

☐ No

☒ Yes. If yes, describe: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision in relation to license-exempt providers and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will*

initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.

5.5 Monitoring and Enforcement of Licensing and Health and Safety Requirements

5.5.1 Inspections for licensed CCDF providers

Licensing inspectors must perform at least one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards, including an inspection for compliance with health and safety and fire standards. Lead Agencies must conduct at least one pre-licensure inspection for compliance with health, safety, and fire standards of each child care provider and facility in the State/Territory.

a. Licensed CCDF center-based providers

- i. Does your pre-licensure inspection for licensed center-based providers assess compliance with health standards, safety standards, and fire standards?

☒ Yes.

☐ No. If no, describe: [Click or tap here to enter text](#)

- ii. Identify the frequency of annual unannounced inspections for licensed center-based providers addressing compliance with health, safety, and fire standards:
- ☐ Annually.
- ☐ More than once a year. If more than once a year, describe: [Click or tap here to enter text.](#)
- ☒ *X Other. If other, describe: Licensed child care centers (CCC) and family child care homes (FCCH) are subject to an inspection at least once every three years as required under Health and Safety Code Sections 1597.09(d) and 1597.55a(e). However, under Health and Safety Code sections 1597.09(b) and 1597.55a(c) an unannounced annual inspection (once each year) of a facility is required, if any one of the following circumstances apply: When a license is on probation; When the terms of agreement in a facility compliance plan require an annual inspection; When an accusation against a licensee is pending; To verify that a person who has been ordered out of a CCC or FCCH by the Department is no longer at the facility. Health and Safety Code sections 1597.09(c) and 1597.55a(d) require annual unannounced inspections of no less than 30 percent of those CCC and FCCH facilities not otherwise subject to an annual inspection using a random sampling methodology. In addition to the Health and Safety required inspections, Community Care Licensing Division may annually inspect child care facilities that are recipients of government funding or assistance, such as the Child Care and Development Fund, which includes subsidized child care and development programs administered by Department of Social Services.*
- iii. Does the Lead Agency implement a differential monitoring approach when monitoring licensed center-based providers?
- ☐ Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements. [Click or tap here to enter text.](#)
- ☒ *X No. If no, describe: A Comprehensive and Regulatory Enforcement (CARE) Tool is used during an inspection. The CARE Tool focuses on prevention, compliance, and regulatory enforcement for all child care facilities. The domains for the child care centers include Care & Supervision, Children's Records, Personal Rights, Physical Plant, Reporting Requirements, Staff Records, Staffing Ratio and Capacity, Food Services, and Toddler Component. The domains for the family child care homes are similar to those for centers. The CARE Tool does not contain all applicable statutes, regulations, or licensing standards with which a licensee is required to comply. Use of the CARE Tool does not limit the inspection authority of CCLD or its ability to issue citations or take disciplinary action for any deficiency.*
- ☐
- iv. Identify which department or agency is responsible for completing the inspections for licensed center-based providers. [California Department of Social Services, Community Care Licensing Division, Child Care Licensing Program.](#)

- b. Licensed CCDF family child care providers
- i. Does your pre-licensure inspection for licensed family child care homes assess compliance with health standards, safety standards, and fire standards?
- ☐ Yes.
- ☐ No. If no, describe: [Click or tap here to enter text.](#)
- ii. Identify the frequency of annual unannounced inspections for licensed family child care homes addressing compliance with health, safety, and fire standards:
- ☐ Annually.
- ☐ More than once a year. If more than once a year, describe: [Click or tap here to enter text.](#)
- ☒ Other. If other, describe: *Licensed FCCHs and CCCs are subject to an inspection at least once every three years as required under Health and Safety Code Sections 1597.09(d) and 1597.55a(e). However, under Health and Safety Code Sections 1597.09(b) and 1597.55a(c) an unannounced annual inspection (once each year) of a facility is required, if any one of the following circumstances apply: When a license is on probation; When the terms of agreement in a facility compliance plan require an annual inspection; When an accusation against a licensee is pending; To verify that a person who has been ordered out of a CCC or FCCH by the Department is no longer at the facility. Health and Safety Code Sections 1597.09(c) and 1597.55a(d) require annual unannounced inspections of no less than 30 percent of those CCC and FCCH facilities not otherwise subject to an annual inspection using a random sampling methodology. In addition to the Health and Safety required inspections, Community Care Licensing Division may annually inspect child care facilities that are recipients of government funding or assistance, such as the Child Care and Development Fund, which includes subsidized child care and development programs administered by Department of Social Services.*
- iii. Does the Lead Agency implement a differential monitoring approach when monitoring licensed family child care providers?
- ☐ Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements. [Click or tap here to enter text.](#)
- ☒ No. If no, describe: *A Comprehensive and Regulatory Enforcement (CARE) Tool is used during an inspection. The CARE Tool focuses on prevention, compliance, and regulatory enforcement for all child care facilities. The domains for the child care centers include Care & Supervision, Children's Records, Personal Rights, Physical Plant, Reporting Requirements, Staff Records, Staffing Ratio and Capacity, Food Services, and Toddler Component. The domains for the family child care homes are similar to those for centers. The CARE Tool does not contain all applicable statutes, regulations, or licensing standards with which a licensee is required to comply. Use of the CARE Tool does not limit the inspection authority of CCLD or its ability to issue citations or take disciplinary action for any deficiency.*

- iv. Identify which department or agency is responsible for completing the inspections for licensed family child care providers. *California Department of Social Services, Community Care Licensing Division, Child Care Licensing Program.*
- c. Licensed in-home CCDF child care providers
 - i. Does your Lead Agency license CCDF in-home child care (care in the child's own home) providers?
 - ☐ Yes.
 - ☒ No.
 - No. If no, describe: *In-home child care providers are exempt from licensing requirements.*

☐ Yes. If yes, does your pre-licensure inspection for licensed in-home providers assess compliance with health, safety, and fire standards?

☐ Yes.

☐ No. If no, describe: [Click or tap here to enter text.](#)

ii. Identify the frequency of annual unannounced inspections for licensed in-home child care providers for compliance with health, safety, and fire standards completed:

☐ Annually.

☐ More than once a year. If more than once a year, describe: [Click or tap here to enter text.](#)

☒ X Other. If other, describe: *In-home providers are exempt from licensing. California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*

iii. Does the Lead Agency implement a differential monitoring approach when monitoring licensed in-home child care providers?

☐ Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements. [Click or tap here to enter text.](#)

☒ X No.

iv. Identify which department or agency is responsible for completing the inspections for licensed in-home providers. *In-home providers are exempt from licensing. California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers, including which agency will be conducting the monitoring. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*

5.5.2 Inspections for license-exempt providers

Licensing inspectors must perform at least one annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety, and fire standards. Inspections for relative

providers will be addressed in subsection 5.8.

Describe the policies and practices for the annual monitoring of:

- a. License-exempt CCDF center-based child care providers
 - i. Identify the frequency of inspections for compliance with health, safety, and fire standards for license-exempt center-based providers:
 - ☐ Annually.
 - ☐ More than once a year. If more than once a year, describe: [Click or tap here to enter text.](#)
 - ☒ *X Other. If other, describe: California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
 - ii. Does the Lead Agency implement a differential monitoring approach when monitoring license-exempt center-based providers?
 - ☐ Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements. [Click or tap here to enter text.](#)
 - ☒ *X No.*
 - iii. Identify which department or agency is responsible for completing the inspections for license-exempt center-based CCDF providers. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers, including which agency will be conducting the monitoring. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- b. License-exempt CCDF family child care providers
 - i. Identify the frequency of the inspections of license-exempt family child care providers to determine compliance with health, safety, and fire standards:
 - ☐ Annually.
 - ☐ More than once a year. If more than once a year, describe: [Click or tap here to enter text.](#)

- ☐ Other. If other, describe: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers, including which agency will be conducting the monitoring. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- ii. Does the Lead Agency implement a differential monitoring approach when monitoring license-exempt family child care providers?
 - ☐ Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements. *Click or tap here to enter text.*
 - ☒ X No.
- iii. Identify which department or agency is responsible for completing the inspections for license-exempt family child care providers. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers, including which agency will be conducting the monitoring. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*

5.5.3 Inspections for CCDF license-exempt in-home child care providers

Lead Agencies may develop alternate monitoring requirements for care provided in the child's home that are appropriate to the setting. This flexibility cannot be used to bypass the monitoring requirement altogether.

- a. Describe the requirements for the annual monitoring of CCDF license-exempt in-home child care (care in the child's own home) providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring procedures are used. *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring*

policies for the license-exempt providers.

- b. List the entity(ies) in your State/Territory responsible for conducting inspections of license-exempt CCDF in-home child care (care in the child's own home) providers: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers, including which agency will be conducting the monitoring. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt in-home providers.*

5.5.4 Posting monitoring and inspection reports

Lead Agencies must post monitoring and inspection reports on their consumer education website for each licensed and CCDF child care provider, except in cases where the provider is related to all the children in their care. These reports must include the results of required annual monitoring visits and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. A full report covers everything in the monitoring visit, including areas of compliance and non-compliance. If the Lead Agency does not produce any reports that include areas of compliance, the website must include information about all areas covered by a monitoring visit.

The reports must be in plain language or provide a plain language summary Lead Agency and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of monitoring and inspection reports.

- a. Does the Lead Agency post:
- i. ☒ Pre-licensing inspection reports for licensed programs.
 - ii. ☐ Full monitoring and inspection reports that include areas of compliance and non-compliance for all non-relative providers eligible to provide CCDF services.
 - iii. ☒ Monitoring and inspection reports that include areas of non-compliance only, with information about all areas covered by a monitoring visit posted separately on the website (e.g., a blank checklist used by monitors) for all non-relative providers eligible to provide CCDF services. Note: This option is only allowable if the Lead Agency does not produce monitoring reports that include both areas of compliance and non-compliance. If checked, provide a direct URL/website link to the website where a blank checklist is posted: [Compliance and Regulatory Enforcement \(CARE\) Tools](#).
- b. Check if the monitoring and inspection reports and any related plain language summaries include:
- i. ☒ Date of inspection.
 - ii. ☒ Health and safety violations, including those violations that resulted in fatalities or serious injuries occurring at the provider. Describe how these

health and safety violations are prominently displayed: *For licensed providers, facility inspection reports and substantiated complaint investigation reports are written in plain language such that both the parents and providers may clearly understand the content. If the report contains a violation, it must include a factual description of the violation and fully state how the licensed provider did not comply with the law. If applicable, the report will describe the place or area where the violation occurred.*

- iii. ☐ ☒ Corrective action plans taken by the Lead Agency and/or child care provider. Describe: *For licensed providers, the "plan of correction" for violations is included within the monitoring report found under the reports tab for an individual provider on California Department of Social Services (CDSS') [Child Care Facility Search](#) website.*
- iv. ☐ ☒ A minimum of 3 years of results, where available.
- v. If any of the components above are not selected, please explain: *N/A*
- c. Lead Agencies must post monitoring and inspection reports and/or any related summaries in a timely manner.
 - i. Provide the direct URL/website link to where the reports are posted: [Child Care Facility Search](#)
 - ii. Identify the Lead Agency's established timeline for posting monitoring reports and describe how it is timely: *For licensed providers, once monitoring reports are completed (and the licensee has read and reviewed it), reports are uploaded to an internal database system which then automatically updates CDSS' Facility Search Website accordingly, on a weekly basis, each Sunday.*
- d. Does the Lead Agency certify that the monitoring and inspection reports or the summaries are in plain language that is understandable to parents and other consumers?
 - ☐ ☒ Yes.
 - ☐ No. If no, describe: [Click or tap here to enter text.](#)
- e. Does the Lead Agency certify that there is a process for correcting inaccuracies in the monitoring and inspection reports?
 - ☐ ☒ Yes.
 - ☐ No. If no, describe: [Click or tap here to enter text.](#)
- f. Does the Lead Agency maintain monitoring and inspection reports on the consumer education website?
 - ☐ ☒ Yes.
 - ☐ No. If no, describe: [Click or tap here to enter text.](#)

5.5.5 Qualifications and training of licensing inspectors

Lead Agencies must ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served.

Describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified and have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting. *The Community Care Licensing Division (CCLD) is mandated to make efforts to recruit licensing inspectors, known as Licensing Program Analysts (LPAs), with early learning and care experience, training, or education. The LPAs are required to have a Bachelor's degree or prior state service and 12 semester or 18 quarter units of specified college courses. In addition, LPAs are required to take a training and experience evaluation prior to applying. Finally, LPAs are subject to fingerprinting and criminal record checks by the California Department of Justice and the Federal Bureau of Investigation. The LPAs begin their training with a four-week long academy of coursework that includes: health and safety requirements, and language and cultural diversity of the providers. In addition, LPAs are required to complete 40 hours of training in child development or early childhood education which addresses the developmental needs of children in care and type of provider setting. Additionally, LPAs are required to complete 36 hours of training each year that include regulation administration as well as communication skills, writing skills, and human relations skills. Finally, LPAs participate in cross-sector training and symposium trainings hosted by the CCLD Child Care Licensing Program. California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision as related to license-exempt providers and needs additional time to meet the requirement. The CDSS, has been meeting regularly with the federal TA team, to draft health and safety standards for license-exempt providers and is now focusing the TA on developing monitoring policies and training requirements for license-exempt providers. When completed, CDSS will begin the legislative and budgetary processes to codify the standards, training, and monitoring policies for the license-exempt providers into state co*

California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS, has been meeting regularly with the federal technical assistance (TA) team, to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers, including the qualifications for the monitors. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.

5.5.6 Ratio of licensing inspectors

Lead Agencies must ensure the ratio of licensing inspectors to child care providers and facilities in the State/Territory are maintained at a level sufficient to enable the Lead Agency to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, State, and local laws.

Provide the ratio of licensing inspectors to child care providers (i.e., number of inspectors per number of child care providers) and facilities in the State/Territory and include how the ratio is sufficient to conduct effective inspections on a timely basis. *As of December 2023, the CCLD's Child Care Licensing Program has approximately 43,772 licensed child care facilities statewide. The inspector (LPA) to licensed provider ratio standard (as of December 2023) is approximately one LPA for every 51 child care centers and one LPA for every 99 family child care homes. In practice, LPAs cover regions that include both licensed center and home providers, and their individual caseload ratios vary accordingly. Under current provider ratio standards, CCLD is able to meet mandated statutory timeframes for unannounced inspections and complaint*

investigation inspections, as required by Health and Safety Code Sections 1596.853, 1597.09 and 1597.55a. CDSS is required to notify the appropriate legislative as required by HSC 1596.816(d). California received a preliminary notice of non-compliance from Office of Child Care on December 13, 2021, for this provision in relation to license-exempt providers and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal technical assistance (TA) team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.

5.6 Ongoing Health and Safety Training

Lead Agencies must have ongoing training requirements for all caregivers, teachers, and directors of eligible CCDF providers for health and safety standards but have discretion on frequency and training content (e.g., pediatric CPR refresher every year and recertification every 2 years). Lead Agencies have discretion on which health and safety standards are subject to ongoing training. Lead Agencies may exempt relative providers from these requirements.

5.6.1 Required ongoing training of health and safety standards

Describe any required ongoing training of health and safety standards for caregivers, teachers, and directors of the following CCDF eligible provider types.

- a. Licensed child care centers: *At least one staff member at a child care center (director or teacher) must have sixteen (16) hours of health and safety training which includes (8) hours of pediatric CPR and first aid. Pediatric CPR and first aid must be renewed every two years and a one-time 8 hours of preventative health practices. All child care center staff and licensees must take mandated reporter training every two years which includes training on child maltreatment and shaken baby syndrome. Staff that have limited English proficiency are exempt from the mandated reporter training if training is not made available in their primary language.*
- b. License-exempt child care centers: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers, including which agency will be conducting the monitoring. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- c. Licensed family child care homes: *All family child care home licensees must have sixteen (16) hours of health and safety training which includes (8) hours of pediatric CPR and first aid. Pediatric CPR and first aid must be renewed every two years and a one-time 8 hours of preventative health practices. All family child care home licensees and staff must take mandated reporter training every two years which includes training*

on child maltreatment and shaken baby syndrome. Staff that have limited English proficiency are exempt from the mandated reporter training if training is not made available in their primary language.

- d. **License-exempt family child care homes:** *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers, including which agency will be conducting the monitoring. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- e. **Regulated or registered in-home child care:** *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers, including which agency will be conducting the monitoring. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*
- f. **Non-regulated or registered in-home child care:** *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to develop an implementation plan. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers, including which agency will be conducting the monitoring. When completed, CDSS will initiate the legislative, regulatory, budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies for the license-exempt providers.*

5.7 Comprehensive Background Checks

Lead Agencies must conduct comprehensive background checks for all child care staff members (including prospective staff members) of all child care providers that are (1) licensed, regulated, or registered under State/Territory law, regardless of whether they receive CCDF funds; or (2) all other child care providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible child care providers). Family child care home providers must also submit background check requests for all household members age 18 or older.

A comprehensive background check must include: three in-state checks, two national checks, and three interstate checks if the individual resided in another State or Territory in the preceding 5 years. The background check components must be completed at least once every five years.

All child care staff members must receive a qualifying result from either the FBI criminal background check or an in-state fingerprint criminal history check before working (under supervision) with or near children. Lead Agencies must apply a CCDF-specific list of disqualifying crimes for child care providers serving families participating in CCDF.

These background check requirements do not apply to individuals who are related to all children for whom child care services are provided. Exemptions for relative providers will be addressed in subsection 5.8.

5.7.1 In-state criminal history check with fingerprints

- a. Does the Lead Agency conduct in-state criminal history background checks with fingerprints for all child care staff members (including prospective staff members) of licensed, regulated, or registered child care providers, regardless of CCDF participation?

☒ X Yes.

☐ No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct in-state criminal background checks with fingerprints. [Click or tap here to enter text.](#)

- b. Does the Lead Agency conduct in-state criminal history background checks with fingerprints for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers) other than relative providers?

☒ X Yes.

☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct in-state criminal background checks with fingerprints. [Click or tap here to enter text.](#)

- c. Does the Lead Agency conduct the in-state criminal background check with fingerprints for all individuals age 18 or older who reside in a family child care home?

☒ X Yes.

☐ No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive an in-state criminal background check with fingerprints. [Click or tap here to enter text.](#)

5.7.2 National Federal Bureau of Investigation (FBI) criminal history check with fingerprints

- a. Does the Lead Agency conduct FBI criminal history background checks with fingerprints for all child care staff members (including prospective staff members) of licensed, regulated, or registered child care providers, regardless of CCDF participation?

☐ *X* Yes.

☐ No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct FBI criminal background checks with fingerprints. *Click or tap here to enter text.*

- b. Does the Lead Agency conduct FBI criminal history background checks with fingerprints for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers)?

☐ *X* Yes.

☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct FBI criminal background checks. *Click or tap here to enter text.*

- c. Does the Lead Agency conduct the FBI criminal background check with fingerprints for all individuals age 18 or older who reside in a family child care home?

☐ *X* Yes.

☐ No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive an FBI criminal background check with fingerprints. *Click or tap here to enter text.*

5.7.3 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based check

The majority of NCIC NSOR records are fingerprint records and are automatically included in the FBI fingerprint criminal background check. But a small percentage of NCIC NSOR records are only name-based records and must be accessed through the required name-based search of the NCIC NSOR.

- a. Does the Lead Agency conduct NCIC NSOR name-based background checks for all child care staff members (including prospective staff members) of licensed, regulated, or registered child care providers, regardless of CCDF participation?

☐ Yes.

☐ *X* No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct NCIC NSOR name-based background checks. *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to meet the requirement. The California Department of Social Services (CDSS) is pursuing federal technical assistance (TA) with the National Center on Subsidy Innovation and Accountability (NCSIA). California law does not currently authorize the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based background check for any category of licensed, regulated, or registered child care providers.*

- b. Does the Lead Agency conduct NCIC NSOR name-based background checks for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers)?
- ☐ Yes.
- ☒ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct NCIC NSOR name-based background checks. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the NCIC NSOR name-based background check for any category of licensed, regulated, or registered child care providers.*
- c. Does the Lead Agency conduct the NCIC NSOR name-based background check for all individuals age 18 or older who reside in a family child care home?
- ☐ Yes.
- ☒ No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive a NCIC NSOR name-based background check. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the NCIC NSOR name-based background check for any category of licensed, regulated, or registered child care providers.*

5.7.4 In-state sex offender registry (SOR) check

- a. Does the Lead Agency conduct in-state SOR checks for all child care staff members (including prospective staff members) of licensed, regulated, or registered child care providers, regardless of CCDF participation?
- ☒ Yes.
- ☐ No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct in-state SOR background checks. [Click or tap here to enter text.](#)
- b. Does the Lead Agency conduct in-state SOR background checks for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers)?
- ☒ Yes.
- ☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct in-state SOR background checks. [Click or tap here to enter text.](#)
- c. Does the Lead Agency conduct the in-state SOR background check for all individuals age 18 or older who reside in a family child care home?
- ☒ Yes.
- ☐ No. If no, describe individuals age 18 or older who reside in a family child care home

who do not receive an in-state SOR background check. [Click or tap here to enter text.](#)

5.7.5 In-state child abuse and neglect (CAN) registry check

- a. Does the Lead Agency conduct CAN registry checks for all child care staff members (including prospective staff members) of licensed, regulated, or registered child care providers, regardless of CCDF participation?
- ☐ X Yes.
- ☐ No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct CAN registry checks. [Click or tap here to enter text.](#)
- b. Does the Lead Agency conduct CAN registry checks for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers)?
- ☐ X Yes.
- ☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct CAN registry checks. [Click or tap here to enter text.](#)
- c. Does the Lead Agency conduct the CAN registry check for all individuals age 18 or older who reside in a family child care home?
- ☐ X Yes.
- ☐ No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive a CAN registry check. [Click or tap here to enter text.](#)

5.7.6 Interstate criminal history check

These questions refer to requirements for a Lead Agency to conduct an interstate check for a child care staff member (including prospective child care staff members) who currently lives in their State or Territory but has lived in another State, Territory, or Tribal land within the previous 5 years.

- a. Does the Lead Agency conduct interstate criminal history background checks for any staff member (or prospective staff member) who resided in other state(s) in the past 5 years of licensed, regulated, or registered child care providers, regardless of CCDF participation?
- ☐ Yes.
- ☒ X No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct interstate criminal history background checks. *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to meet the requirement. The California Department of Social Services (CDSS) is pursuing federal technical assistance (TA) with the National Center on Subsidy Innovation and Accountability (NCSIA). California law does not currently authorize the interstate criminal history background check for any category of licensed, regulated, or registered child care providers.*
- b. Does the Lead Agency conduct interstate criminal history background checks for any staff member (or prospective staff member) who resided in other state(s) in the past 5 years

eligible for CCDF participation (i.e., license-exempt providers)?

☐ Yes.

☒ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct interstate criminal history background checks. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the interstate criminal history background check for any category of licensed, regulated, or registered child care providers.*

- c. Does the Lead Agency conduct interstate criminal history background checks for all individuals age 18 or older who reside in a family child care home and resided in other state(s) in the past 5 years.

☐ Yes.

☒ No. If no, describe why individuals age 18 or older that resided in other state(s) in the past 5 years who reside in a family child care home that do not receive an interstate criminal history background check. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the interstate criminal history background check for any category of licensed, regulated, or registered child care providers.*

5.7.7 Interstate Sex Offender Registry (SOR) check

These questions refer to requirements for a Lead Agency to conduct an interstate check for a child care staff member (including prospective child care staff members) who currently lives in their State or Territory but has lived in another State, Territory, or Tribal land within the previous 5 years.

- a. Does the Lead Agency conduct interstate SOR checks for any staff member (or prospective staff member) who resided in other state(s) in the past 5 years of licensed, regulated, or registered child care providers, regardless of CCDF participation?

☐ Yes.

☒ No. If no, describe any categories of licensed, regulated, or registered child Care providers for whom you do not conduct interstate SOR checks. *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to meet the requirement. The California Department of Social Services (CDSS) is pursuing federal technical assistance (TA) with the National Center on Subsidy Innovation and Accountability (NCSIA). California law does not currently authorize the interstate criminal history background check for any category of licensed, regulated, or registered child care providers.*

- b. Does the Lead Agency conduct interstate SOR checks for any staff member (or prospective staff member) who resided in other state(s) in the past 5 years eligible for CCDF participation (i.e., license-exempt providers)?

☐ Yes.

☐ *X* No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct interstate SOR checks. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the interstate criminal history background check for any category of licensed, regulated, or registered child care providers.*

- c. Does the Lead Agency conduct the interstate SOR checks for all individuals age 18 or older who resided in other state(s) in the past 5 years who reside in a family child care home?

☐ Yes.

☐ *X* No. If no, describe individuals age 18 or older that resided in other state(s) in the past 5 years who reside in a family child care home that do not receive an interstate SOR check. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the interstate criminal history background check for any category of licensed, regulated, or registered child care providers.*

5.7.8 Interstate child abuse and neglect (CAN) registry check

These questions refer to requirements for a Lead Agency to conduct an interstate check for a child care staff member (including prospective child care staff members) who currently lives in their State or Territory but has lived in another State, Territory, or Tribal land within the previous 5 years.

- a. Does the Lead Agency conduct interstate CAN registry checks for any staff member (or prospective staff member) that resided in other state(s) in the past 5 years of licensed, regulated, or registered child care providers, regardless of CCDF participation?

☐ Yes.

☐ *X* No. If no, describe any categories of licensed, regulated, or registered child Care providers for whom you do not conduct interstate CAN registry checks. *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to meet the requirement. The California Department of Social Services (CDSS) is pursuing federal technical assistance (TA) with the National Center on Subsidy Innovation and Accountability (NCSIA). California law does not currently authorize the interstate child abuse and neglect registry check for any category of licensed, regulated, or registered child care providers.*

- b. Does the Lead Agency conduct interstate CAN registry checks for any staff member (or prospective staff member) who resided in other state(s) in the past 5 years eligible for CCDF participation (i.e., license-exempt providers)?

☐ Yes.

☐ *X* No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct interstate CAN registry checks. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing*

federal TA with the NCSIA. California law does not currently authorize the interstate child abuse and neglect registry check for any category of licensed, regulated, or registered child care providers.

- c. Does the Lead Agency conduct the interstate CAN registry checks for all individuals age 18 or older who resided in other state(s) in the past 5 years who reside in a family child care home?

☐ Yes.

☒ No. If no, describe individuals age 18 or older that resided in other state(s) in the past 5 years who reside in a family child care home that do not receive interstate CAN registry checks. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the interstate child abuse and neglect registry check for any category of licensed, regulated, or registered child care providers.*

5.7.9 Disqualifications for child care employment

The Lead Agency must prohibit employment of individuals with child care providers receiving CCDF subsidy payment if they meet any of the following disqualifying criteria:

- Refused to consent to a background check.
- Knowingly made materially false statements in connection with the background check.
- Are registered, or are required to be registered, on the State/Territory sex offender registry or repository or the National Sex Offender Registry.
- Have been convicted of a felony consisting of murder, child abuse or neglect, crimes against children (including child pornography), spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault, or battery.
- Have a violent misdemeanor committed as an adult against a child, including the following crimes: child abuse, child endangerment, sexual assault, or any misdemeanor involving child pornography.
- Convicted of a felony consisting of a drug-related offense committed during the preceding 5 years.

- a. Does the Lead Agency disqualify the employment of child care staff members (including prospective staff members) by child care providers receiving CCDF subsidy payment for CCDF-identified disqualifying criteria?

☐ Yes.

☒ No. If no, describe the disqualifying criteria: *California law includes a review of conviction history in line with the exception described at 45 Code of Federal Regulations § 98.43(e)(4) of the final rule. Any licensed or registered child care provider or staff convicted of a felony or misdemeanor is presumptively disqualified from working in a child care facility. However, in the case of most drug-related offenses the individual is provided an opportunity to rebut this presumption by providing evidence of rehabilitation and present good character. If the individual fails to provide such evidence, the individual is disqualified.*

- b. Does the Lead Agency use the same criteria for licensed, regulated, and registered child care providers regardless of CCDF participation?
- ☒ [X](#) Yes.
- ☐ No. If no, describe any disqualifying criteria used for licensed, regulated, and registered child care providers: [Click or tap here to enter text.](#)
- c. How does the Lead Agency use results from the in-state child abuse and neglect registry check?
- ☐ Does not use them to disqualify employment.

☐ *X* Uses them to disqualify employment. If checked, describe: *The identity of an individual with a potential match to California’s Child Abuse and Neglect Registry, the Child Abuse Central Index (CACI), is verified to ensure the individual is the same as that appearing in CACI. If the individual’s identity is verified, they undergo an additional investigation to determine if the CACI report is substantiated. If the investigation reveals substantiated conduct that is inimical to the health, morals, welfare, or safety of either an individual in or receiving services from the facility, or the people of the State of California, the individual is excluded and is not eligible to work or be present in licensed facilities or appear on the TrustLine Registry. The California Department of Social Services’ regional offices monitor compliance with the CACI check requirements. Failure to comply may result in a civil penalty, decertification, removal from registry, and/or exclusion from licensed child care facilities.*

d. How does the Lead Agency use results from the interstate child abuse and neglect registry check?

☐ *X* Does not use them to disqualify employment.

☐ Uses them to disqualify employment. If checked, describe: *Click or tap here to enter text.*

5.7.10 Privacy

Lead Agencies must ensure the privacy of a prospective staff member by notifying child care providers of the individual’s eligibility or ineligibility for child care employment based on the results of the comprehensive background check without revealing any documentation of criminal history or disqualifying crimes or other related information regarding the individual.

Does the Lead Agency certify they ensure the privacy of child care staff members (including prospective child care staff member) when providing the results of the comprehensive background check?

☐ *X* Yes.

☐ No. If no, describe the current process of notification: *Click or tap here to enter text.*

5.7.11 Appeals processes for background checks

Lead Agencies must provide for a process that allows child care provider staff members (and prospective staff members) to appeal the results of a background check to challenge the accuracy or completeness of the information contained in the individual’s background check report.

Does the appeals process:

i. Provide the affected individual with information related to each disqualifying crime in a report, along with information/notice on the opportunity to appeal.

☐ *X* Yes.

☐ No.

ii. Provide the affected individual with clear instructions about how to complete the appeals process for each background check component if they wish to challenge the accuracy or completeness of the information contained in such individual’s background report.

- ☐ X Yes.
- ☐ No.
- iii. Ensure the Lead Agency attempts to verify the accuracy of the information challenged by the individual, including making an effort to locate any missing disposition information related to the disqualifying crime.
- ☐ X Yes.
- ☐ No.
- iv. Get completed in a timely manner.
- ☐ X Yes.
- ☐ No.
- v. Ensure the affected individual receives written notice of the decision. In the case of a negative determination, the decision must indicate (1) the Lead Agency's efforts to verify the accuracy of information challenged by the individual, (2) any additional appeals rights available to the individual, and (3) information on how the individual can correct the federal or State records at issue in the case.
- ☐ Yes.
- ☐ X No. If checked, describe: *A letter is sent to the affected individual, which includes the reasons for the negative decision, appeal rights and instructions, and information on how to request a copy of their criminal record.*
- ☐
- vi. Facilitate coordination between the Lead Agency and other agencies in charge of background check information and results (such as the Child Welfare office and the State Identification Bureau), to ensure the appeals process is conducted in accordance with the Act.
- ☐ X Yes.
- ☐ No.

5.7.12 Provisional hiring of prospective staff members

Lead Agencies must at least complete and receive a qualifying result for either the FBI criminal background check or a fingerprint-based in-state criminal background check where the individual resides before prospective staff members may provide services or be in the vicinity of children.

Until all the background check components have been completed, the prospective staff member must be supervised at all times by someone who has already received a qualifying result on a background check within the past five years.

Check all background checks for which the Lead Agency requires a qualifying result before a prospective child care staff member begins work with children.

- a. FBI criminal background check.

☐ X Yes.

- ☐ No. If no, describe. *Click or tap here to enter text.*
- b. In-state criminal background check with fingerprints.
- ☒ Yes.
- ☐ No. If no, describe. *Click or tap here to enter text.*
- c. In-state Sex Offender Registry.
- ☒ Yes.
- ☐ No. If no, describe. *Click or tap here to enter text.*
- d. In-state child abuse and neglect registry.
- ☒ Yes.
- ☐ No. If no, describe *Click or tap here to enter text.*
- e. Name-based national Sex Offender Registry (NCIC NSOR).
- ☐ Yes.
- ☒ No. If no, describe. *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to meet the requirement. The California Department of Social Services (CDSS) is pursuing federal technical assistance (TA) with the National Center on Subsidy Innovation and Accountability (NCSIA). California law does not currently authorize the National Crime Information Center National Sex Offender Registry name-based background check for any category of licensed, regulated, or registered child care providers.*
- f. Interstate criminal background check, as applicable.
- ☐ Yes.
- ☒ No. If no, describe. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the interstate criminal history background check for any category of licensed, regulated, or registered child care providers.*
- g. Interstate Sex Offender Registry check, as applicable.
- ☐ Yes.
- ☒ No. If no, describe. *California received a preliminary notice of non-compliance OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the interstate criminal history background check for any category of licensed, regulated, or registered child care providers.*
- h. Interstate child abuse and neglect registry check, as applicable.
- ☐ Yes.
- ☒ No. If no, describe. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the*

requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the interstate child abuse and neglect registry check for any category of licensed, regulated, or registered child care providers.

- i. Does the Lead Agency require provisional hires to be supervised by a staff member who received a qualifying result on the comprehensive background check while awaiting results from the provisional hire's full comprehensive background check?
- ☐ Yes.
- ☒ *X No. If no, describe. California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not allow provisional hires prior to a determination on all elements of the background check.*

5.7.13 Completing the criminal background check within a 45-day timeframe

The Lead Agency must carry out a request from a child care provider for a criminal background check as expeditiously as possible, and no more than 45 days after the date on which the provider submitted the request

- a. Does the Lead Agency ensure background checks are completed within 45 days (after the date on which the provider submits the request)?
- ☐ Yes.
- ☒ *X No. If no, describe the timeline for completion for categories of providers, including which background check components take more than 45 days. Eligibility determinations for individuals with minor or no criminal history are completed in less than 45 days. Those with serious criminal history and those requiring a child abuse or arrest investigation do not meet the 45-day timeframe. The majority of these complex cases are processed within 121 days, on average.*
- b. Does the Lead Agency ensure child care staff receive a comprehensive background check when they work in your State but reside in a different State?
- ☒ *X Yes.*
- ☐ No. If no, describe the current policy: *Click or tap here to enter text.*

5.7.14 Responses to interstate background check requests

Lead Agencies must respond as expeditiously as possible to requests for interstate background checks from other States/Territories/Tribes in order to meet the 45-day timeframe.

- a. Does your State participate in the National Crime Prevention and Privacy Compact or National Fingerprint File programs?
- ☐ Yes.
- ☒ *X No.*
- b. Describe how the State/Territory responds to interstate criminal history, Sex Offender Registry, and Child Abuse and Neglect Registry background check requests from another state. *California received a preliminary notice of non-compliance from Office of Child Care on December 13, 2021, for this provision and needs additional time to meet the*

requirement. Dissemination of California criminal history information is administered by the California Department of Justice consistent with state law. The California Department of Social Services is pursuing federal technical assistance with the National Center on Subsidy Innovation and Accountability. California law does not currently authorize dissemination of criminal history for this purpose.

- c. Does your State/Territory have a law or policy that prevents a response to CCDF interstate background check requests from other States/Territories/Tribes?

☐ Yes. If yes, describe the current policy. [Click or tap here to enter text.](#)

☒ No.

5.7.15 Consumer education website links to interstate background check processes

Lead Agencies must include on their consumer education website and the website of local Lead Agencies if the CCDF program is county-run, the policies and procedures related to comprehensive background checks. This includes the process by which a child care provider or other State or Territory may submit a background check request.

- a. Provide the direct URL/website link that contains instructions on how child care providers and other States and Territories should initiate background check requests for prospective and current child care staff members:

<https://www.cdss.ca.gov/inforesources/community-care/caregiver-background-check/background-check-process>.

Check to certify that the required elements are included on the Lead Agency's consumer and provider education website for each interstate background check component.

- b. Interstate criminal background check:

i. ☒ Agency name

ii. ☐ Address

iii. ☒ Phone number

iv. ☒ Email

v. ☐ Website

vi. ☐ Instructions

vii. ☐ Forms

viii. ☐ Fees

ix. ☐ Is the State a National Fingerprint File (NFF) State?

x. ☐ Is the State a National Crime Prevention and Privacy Compact State?

xi. If not all boxes above are checked, describe. *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to meet the requirement. Dissemination of California criminal history information is administered by the California Department of Justice consistent with state law. The California Department of Social Services (CDSS) is pursuing federal technical assistance (TA) with the National Center on Subsidy*

Innovation and Accountability (NCSIA). California law does not currently authorize dissemination of criminal history for this purpose.

c. Interstate sex offender registry (SOR) check:

- i. ☒ X Agency name
- ii. ☐ Address
- iii. ☒ X Phone number
- iv. ☒ X Email
- v. ☐ Website
- vi. ☐ Instructions
- vii. ☐ Forms
- viii. ☐ Fees
- ix. If not all boxes above are checked, describe. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the interstate SOR background check for any category of licensed, regulated, or registered child care providers.*

d. Interstate child abuse and neglect (CAN) registry check:

- i. ☒ X Agency name
- ii. ☐ Is the CAN check conducted through a county administered registry or centralized registry?
- iii. ☐ Address
- iv. ☒ X Phone number
- v. ☒ X Email
- vi. ☐ Website
- vii. ☐ Instructions
- viii. ☐ Forms
- ix. ☐ Fees
- x. If not all boxes above are checked, describe. *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS is pursuing federal TA with the NCSIA. California law does not currently authorize the interstate child abuse and neglect registry check for any category of licensed, regulated, or registered child care providers.*

5.7.16 Background check fees

The Lead Agency must ensure that fees charged for completing the background checks do not exceed the actual cost of processing and administration.

Does the Lead Agency certify that background check fees do not exceed the actual cost of processing and administering the background checks?

☒ Yes.

☐ No. If no, describe what is currently in place and what elements still need to be implemented. [Click or tap here to enter text.](#)

5.7.17 Renewal of the comprehensive background check Renewal of comprehensive background check

Does the Lead Agency conduct the background check at least every 5 years for all components?

☐ Yes.

☐ No. If no, what is the frequency for renewing each component? *California participates in a State subsequent arrest and conviction notification program for in-state Criminal History, Sex Offender Registry, and Child Abuse and Neglect Checks. California Department of Justice (CADOJ) retains the fingerprint file and transmits all subsequent California arrest and conviction information pertaining to the provider/staff to California Department of Social Services (CDSS) on an ongoing basis. The CADOJ also provides subsequent child abuse and severe neglect information on these individuals to CDSS.*

5.8 Exemptions for Relative Providers

Lead Agencies may exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles) from certain health and safety requirements. This exception applies only if the individual cares only for relative children.

5.8.1 Exemptions for relative providers

Does the Lead Agency exempt any federally defined relative providers from licensing requirements, the CCDF health and safety standards, preservice/orientation training, ongoing training, inspections, or background checks?

☐ No.

☒ Yes. If yes, which type of relatives do you exempt, and from what requirements (licensing requirements, CCDF health and safety standards, preservice/orientation training, ongoing training, inspections, and/or background checks) do you exempt them? *A relative provider is care provided in the child's or child care provider's home by a person who is a relative of the child. Relative providers are exempt from all health and safety standards, preservice/orientation training, monitoring, and background checks.*

6 Support for a Skilled, Qualified, and Compensated Child Care Workforce

A skilled child care workforce with adequate wages and benefits underpins a stable high-quality child care system that is accessible and reliable for working parents and that meets their needs and promotes equal access. Positive interactions between children and caregivers provide the cornerstone of quality child care experiences. Responsive caregiving and rich interactions support healthy socio-emotional, cognitive, and physical development in children. Strategies that successfully support the child care workforce address key challenges, including low wages, poor

benefits, and difficult job conditions. Lead Agencies can help mitigate some of these challenges through various CCDF policies, including through ongoing professional development and supports for all provider types and embedded in the payment policies and practices covered in Section 4. Lead Agencies must have a framework for training, professional development, and post-secondary education. They must also incorporate health and safety training into their professional development. Lead Agencies should also implement policies that focus on improving wages and access to benefits for the child care workforce. When implemented as a cohesive approach, the initiatives support the recruitment and retention of a qualified and effective child care workforce, and improve opportunities for caregivers, teachers, and directors to advance on their progression of training, professional development, and postsecondary education.

This section addresses Lead Agency efforts to support the child care workforce, the components and implementation of the professional development framework, and early learning and developmental guidelines.

6.1 Supporting the Child Care Workforce

Lead Agencies have broad flexibility to implement policies and practices to support the child care workforce.

6.1.1 Strategies to improve recruitment, retention, compensation, and well-being

- a. Identify any Lead Agency activities related to strengthening workforce recruitment and retention of child care providers. Check all that apply:
- i. ☒ Providing program-level grants to support investments in staff compensation.
 - ii. ☒ Providing bonuses or stipends paid directly to staff, like sign-on or retention bonuses.
 - iii. ☐ Connecting family child care providers and center-based child care staff to health insurance or supporting premiums in the Marketplace.
 - iv. ☐ Subsidizing family child care provider and center-based child care staff retirement benefits.
 - v. ☐ Providing paid sick, personal, and parental leave for family child care providers and center-based child care staff.
 - vi. ☐ Providing student loan debt relief or loan repayment for family child care providers and center-based child care staff.
 - vii. ☒ Providing scholarships or tuition support for center-based child care staff and family child care providers.
 - viii. ☒ Other. Describe: *Supporting the early learning and care (ELC) workforce by providing stipends/incentives for professional development, higher education, and permit/permit renewal.*
- b. Describe any Lead Agency ongoing efforts and future plans to assess and improve the compensation of the child care workforce in the State or Territory, including increasing wages, bonuses, and stipends. *The lead agency invests in several programs that support the workforce via stipends and financial incentives. The Quality Counts California Workforce Pathways Grant supports local level administrators to provide stipends and financial incentives to the workforce. Examples include providing tuition, fee payments, or stipends for ELC workforce to complete 21 hours of professional development to address their competency gaps or advancement; providing tuition, fee payments, or stipends for ELC workforce to complete ongoing professional development for the Child Development Permit renewal; or Supporting members of the workforce to earn 24 units of Early Childhood Education/Child Development (ECE/CD) + 16 units of General Education. In addition to the WPG, the workforce is eligible to receive stipends through the Child Development Trainings Consortium, which provides stipends for attaining permits. The California Child Care Initiative Project (CCIP) also provides incentives to license exempt providers to support health and safety training and licensure. The State also made historic investments in the workforce via American Rescue Plan Act Provider stipends pursuant to legislation, including AB 110 and AB 179, and through the successor Agreement between the State and Child Care Providers United (CCPU), which improved compensation through payment based on enrollment, Cost of Care Plus Rate payments through the duration of the agreement, (which ends July 1, 2025), and through a road map to move to a Single Rate Structure-based on an alternative methodology that utilizes a cost estimation model to inform rate setting.*
- c. Describe any Lead Agency ongoing efforts and future plans to expand access to benefits, including health insurance, paid sick, personal, and parental leave, and retirement

benefits. *The State reached a successor collective bargaining agreement with CCPU in June 2023. The two-year agreement provides funding for the creation and ongoing support for a retirement benefit trust and a health benefits trust. These supports are available to family child care providers and are administered by CCPU. The State contribution does not require the State to assume any administrative or fiduciary responsibilities with respect to the trusts. Annually, CCPU will provide required reports to inform California Department of Social Services (CDSS) of how much funding is needed to fully restore the balance of the trusts.*

- d. Describe any Lead Agency ongoing efforts and future plans to support the mental health and well-being of the child care workforce. *The CDSS funds the California Infant and Early Childhood Mental Consultation (IECMHC) Network to support the mental health and well-being of not only the children in child care but of the child care workforce as well. The IECMHC Network provides tiered levels of support for child care providers to access free of charge. The Network offers a toll-free helpline where child care providers can call to receive immediate help with issues they may be having in their child care setting and IECMHC Specialists also provide linkages for child care providers who need information on how to access community resources to support their own mental health. Child care providers can also join one of the IECMHC open-door drop-in sessions held monthly or join a Community of Support held monthly, where they can get support from other child care providers and learn about a variety of topics on supporting children's mental health and their own mental health and self-care. Child care providers can also request direct consultation through the IECMHC Network where they will be matched up with an IECMHC Consultant to work directly with them over the course of many months to support the child care provider in learning how to support the needs of the children in their care and their own self-care. This is an ongoing effort supported by CDSS and additional funds were added in the 2023-24 budget to directly partner with Resource and Referral agencies to reach more local child care providers to share information and training. Additional funds have also been allocated to increase the number of providers who can receive direct consultation between 2023-26.*
- e. Describe any other strategies the Lead Agency is developing and/or implementing to support providers' recruitment and retention of the child care workforce. *The California Early Childhood Mentor Program (CECMP) provide stipends and honorariums to mentors participating in the CECMP. The CECMP will allocate and issue stipends and honorariums to select colleges, participants, Tribal Child Care partners, and to Alternative Pathway Mentors. The Child Development Training Consortium (CDTC) issues annual Instructional Agreements to participating colleges to provide local support services to college students. Instructional Agreements specify the support services, which include support for educational expenses (items supporting students to move forward on the pathway to an (ECE/CD) degree, meet licensing/setting guidelines and requirements, and the child development permit), tutoring, child care expenses, assistance for textbook loaning, and technical assistance on the services provided. Additionally, the Quality Counts California (QCC) WPG supports child care and development providers by providing scholarship/tuition assistance and/or stipends for center staff and family child care staff to complete early childhood education courses and professional development to support educational attainment, address their competency gaps, and support ECE career advancement. The lead agency also administers the CCIP, which is a statewide project funded to build supply and improve the quality of care. Efforts include recruiting license*

exempt providers to become licensed, as well as providing supports to assist small homes with the goal of increased capacity and inclusion of infants and toddlers. Activities to support retention of child care providers are also included. Additionally, provider rates are being addressed through the transition from the use of a market rate survey to an alternative methodology that utilizes the true costs of care to inform rate-setting.

6.1.2 Strategies to support provider business practices

- a. Describe other strategies that the Lead Agency is developing and/or implementing to strengthen child care providers' business management and administrative practices. *The California Department of Social Services provides support to providers via local Child Care Resource & Referral (CCR&R) programs that offer professional development to strengthen providers' business practices. The CCR&Rs administer the California Child Care Initiative Project at the local levels and the project focuses on recruiting, training, and retaining family child care home businesses. In addition to these opportunities, the State provides technical assistance to contractors and grantees to support business practices. Furthermore, professional development is offered via the California Early Childhood Online platform. Providers can strengthen their business practices by completing trainings on topics that include Business Practices in Family Child Care, Preschool Program Guidelines, and other professional development training to strengthen their business practices.*
- b. Check the topics addressed in the Lead Agency's strategies for strengthening child care providers' administrative business practices. Check all that apply:
 - i. ☒ Fiscal management.
 - ii. ☒ Budgeting.
 - iii. ☒ Recordkeeping.
 - iv. ☐ Hiring, developing, and retaining qualified staff.

- v. ☐ *X* Risk management.
- vi. ☐ *X* Community relationships.
- vii. ☐ *X* Marketing and public relations.
- viii. ☐ *X* Parent-provider communications.
- ix. ☐ Use of technology in business administration.
- x. ☐ Compliance with employment and labor laws.
- xi. ☐ Other. Describe any other efforts to strengthen providers' administrative business: [Click or tap here to enter text.](#)

6.1.3 Strategies to support provider participation

Lead Agencies must facilitate participation of child care providers and staff with limited English proficiency and disabilities in the child care subsidy system. Describe how the Lead Agency will facilitate this participation, including engagement with providers to identify barriers and specific strategies used to support their participation:

- a. Providers and staff with limited English proficiency: *Per the Quality Counts California Workforce Pathways Grant, each workforce grantee creates a workforce plan based on the needs of the workforce in their county or region. Funding is used to support providers who identify as limited English speakers. Examples include providing professional development in native languages, tutoring in native languages, translators, offering specific non-unit bearing professional learning opportunities based on local needs and linked to the QCC unified quality improvement approach as appropriate (e.g., offering trainings on trauma informed care, offering training on supporting Dual Language Learners (DLLs) in communities where DLLs make up a large population, inclusion of children with disabilities and implicit bias trainings). Additionally, the Infant/Toddler and Preschool Learning Foundations are available in Spanish. The core publications in the California Early Learning and Development System are available in English and Spanish and additional translations are to begin in 2024 to ensure all publications are available in English and Spanish. Chinese translations of publications will also begin in 2024. Online training modules available through California Early Childhood Online platform are available in English and Spanish, and Chinese modules are beginning to be launched in 2023-24 and will continue to be released over the next three years. Training and coaching provided through the various Child Care Development Fund (CCDF)-funded quality initiatives are provided in English, Spanish, and some in Chinese to meet the needs of providers with limited English proficiency. The Preschool/Transitional Kindergarten Learning Foundations are being updated and finalized by California Department of Education. The California Department of Social Services (CDSS) will begin translating this in 2024 as well as the Infant/Toddler Learning and Development Foundations and Curriculum Frameworks which are slated to be updated and translated in Spanish and Chinese over the next three years. The CDSS is also working on a language access survey. The goal, in alignment with the CDSS' policy on language access, is to provide translations of all of CDSS' Child Care and Development Division's vital documents in the top languages used by constituents.*
- b. Providers and staff who have disabilities: *The CDSS supports all members of the workforce regardless of race, gender, or disability, and the workforce is eligible to participate in all CCDF-funded programs and activities.*

6.2 Professional Development Framework

A Lead Agency must have a professional development framework for training, professional development, and post-secondary education for caregivers, teachers, and directors in child care programs that serve children of all ages. The framework must include these components:

(1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing. CCDF provides Lead Agencies flexibility on the strategies, breadth, and depth of the framework. The professional development framework must be developed in consultation with the State Advisory Council on Early Childhood Education and Care or a similar coordinating body.

6.2.1 Updates and consultation

- a. Did the Lead Agency make any updates to the professional development framework since the FFY 2022-2024 CCDF Plan was submitted?
- ☐ Yes. If yes, describe the elements of the framework that were updated and describe if and how the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body was consulted: *Click or tap here to enter text.*
- ☒ No.
- b. Did the Lead Agency consult with other key groups in the development of their professional development framework?
- ☒ Yes. If yes, identify the other key groups: *The lead agency has not worked to update the professional development framework since the last state plan was submitted; however, the professional development framework was developed at California Department of Education with subject matter experts, consultants, and West Ed.*
- ☐ No.

6.2.2 Description of the professional development framework

- a. Describe how the Lead Agency's framework for training and professional development addresses the following required elements:
- i. Professional standards and competencies. For example, Lead Agencies can include information about which roles in early childhood education are included (such as teachers, directors, infant and toddler specialists, mental health consultants, coaches, licensors, QIS assessors, family service workers, home visitors). *To advance CA's 2020 Master Plan for Early Learning and Care goals on competencies and professional standards, Quality Counts California (QCC) Workforce Pathways Grant (WPG) uses California Early Childhood Educator Competencies as one of the resources in California Department of Social Services' (CDSS) comprehensive early learning and development system. The research-based Early Childhood Educator (ECE) Competencies describes the knowledge, skills, and dispositions that current and preservice early childhood educators should have and develop, and it presents information about education and professional development for individuals who are interested in early care and education or who already work in the profession. More information about the California ECE Competencies can be found at (<https://www.cde.ca.gov/sp/cd/re/ececomps.asp> California Early Childhood Educator Competencies) <https://www.cde.ca.gov/sp/cd/re/ececomps.asp>. The QCC WPG also uses CompSat, which is a competency-based self-assessment toolkit. The Competencies Self-assessment Toolkit (CompSAT) is the companion to the California ECE Competencies. The CompSAT guides early educators through a process of self-reflection and authentic assessment in the 12 competency areas detailed in the ECE Competencies. Additionally, child care and development academic advisors and quality coaches use CompSat to support self-assessment that can be used to support career lattice progression. The CompSAT offers guidance and support through 12 modules, each one named for one of the California ECE competencies. The modules provide choices for exploration, allow for reflection on who you are as an early childhood educator, explore how participants want to grow in their unique role and environment and assess personal strengths and challenges. Participants are also provided with useful resources to design and build a portfolio that documents their learning journey. Building off the CompSat, CDSS invested in an ECE Competencies for Adult Learning and Coaching Course to support ECE professional development – such as higher education faculty, training organizations, consultants, and human resources department of large agencies that provide early learning and care. The professional development related to the child care and development competencies supports those who are supporting adult learners through coaching or other professional development activities.*
 - ii. Career pathways. For example, Lead Agencies can include information about professional development registries, career ladders, and levels. *Furthering the California's 2020 Master Plan for Early Learning and Care roadmap for career pathways, the California Early Childhood Online (CECO) professional learning system provides access to professional growth and training through multiple pathways of progression for caregivers and beyond. Another career pathways support is through the QCC WPG. The QCC WPG grantees provide supports*

that facilitate access to training and credit-bearing classes that help participants obtain a Child Development Permit, degree, CDSS' child care license, and/or move along the Career Lattice according to their professional development plans. The WPG is currently open to all members of the workforce working directly with children and places a priority on programs that accept California State Subsidies. Participants can focus on higher education, professional development, and academic advising. Some options for professional development include supporting family, friends, and neighbors and family child care home (FCCH) staff to meet Child Care Development Fund (CCDF) health and safety and child development training requirements. Participants can receive tuition/fee payments or stipends for completing ongoing professional development or non-unit bearing courses to maintain or advance on the Child Development Permit. The California Career Ladder supports for the workforce also include varying levels of the Child Development Permit: Child Development Assistant Permit, Child Development Associate Teacher Permit, Child Development Teacher Permit, Child Development Master Teacher Permit, Child Development Site Supervisor Permit, Child Development Program Director Permit, and a School-Age Emphasis Authorization. The Commission on Teacher Credentialing (CTC) has adopted the authorization, requirements, program standards, and teaching performance expectations for the PK–3 ECE Specialist Instruction Credential as of October 2022. The regulatory package to establish this credential is currently moving through the State's process with the Office of Administrative Law. While CTC is on the verge of establishing this new credential, it also engages in countless activities related to teacher preparation and development as described in its April 2019 report, *California ECE Teaching and Administrator Performance Expectations* found here: [chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.ctc.ca.gov/docs/default-source/educator-prep/standards/ece-performance-expectations-pdf.pdf?sfvrsn=854253b1_4](https://www.ctc.ca.gov/docs/default-source/educator-prep/standards/ece-performance-expectations-pdf.pdf?sfvrsn=854253b1_4).

- iii. Advisory structure. For example, Lead Agencies can include information about how the professional development advisory structure interacts with the State Advisory Council on Early Childhood Education and Care. *The Early Childhood Policy Council (ECPC) includes a workforce subgroup. The executive leadership of CDSS attends and frequently provides presentations to this subgroup. The State Plan, which includes professional development and workforce initiatives, is shared during the ECPC meetings. For example, as part of the listening session to support the revision of the QCC WPG, information about workforce incentives, advising and professional development applicable to the grant were shared. The ECPC workforce subcommittee and the public provided feedback that informed the new workforce grant opportunity.*
- iv. Articulation. For example, Lead Agencies can include information about articulation agreements, and collaborative agreements that support progress in degree acquisition. *The CDSS has an articulation agreement that supports degree acquisition via the alignment of the core Early Childhood ECE/CD courses with Community Colleges through a Curriculum Alignment Project (CAP). There are 106 Community Colleges in California who have agreed to*

participate in CAP, of those colleges, 98 are officially aligned. The CAP courses have been accepted as the required core for the Associate Degree for Transfer (AD-T) in ECE. The CAP courses are the foundation for the AD-T in ECE. In addition to the CAP aligned courses, students can apply to participate in the Early Learning and Care Student Support Program. To ensure access to these local services, students must have a declared major as ECE, Child Development, Human Development, Psychology, Liberal Studies, Family Consumer and Science Special Education, Business Administration, Social and Behavioral Science/Studies, Speech Pathology, or only enrolled in courses required for the Child Development Permit. The participating colleges provide local support services to the college students, which include educational expenses (items supporting students to move forward on the pathway to an ECE/CD degree, to meet licensing/setting guidelines and requirements, and to obtain the child development permit), tutoring, childcare expenses, assistance for textbook loaning, and technical assistance on the services provided. Additionally, CDSS supports the California Early Childhood Mentor Program (CECMP) and includes a new Alternative Pathway to Mentorship Pilot. The goal of CECMP is to provide quality community placements for Community College, University, Regional Occupation Program, Tribal Community students and workforce of child care and development throughout their education and career journey with certified mentors. This program provides workforce incentives to mentors at various levels and allocates and issues grants across the colleges. These grants support supplemental local level resources for college courses, as well as innovative approaches to recruitment and training to support succession and planning of new mentors that positively impact workforce retention.

- v. **Workforce information.** For example, Lead Agencies can include information about workforce demographics, educator well-being, retention/turnover surveys, actual wage scales, and/or access to benefits. *The CCDF funds were used to create the QCC WPG in fiscal year 2020 - 2021 to create greater alignment with the QCC system and expand the reach of the funds beyond contracted programs to ensure more equitable access to these supports by providers at every level of the State's mixed-delivery system. Also, to ensure greater equity, the QCC WPG expanded the use of these funds to include Tribal Child Care programs. The grant requires grantees to create a local level workforce plan designed to address the following core areas: (1) workforce advising, (2) professional development, and (3) higher education. There were a total of 49 grantees that applied and were awarded funding. Participants benefitting from the grant are encouraged to create and maintain a profile in a registry. Workforce data is collected via the registry and surveys from county level consortia and participants of the grant. The grant allows stipends to be used to cover costs associated with moving up the California ECE Career Lattice (degree attainment, acquisition of a child development permit, etc.). Recommendations from the 2020 Master Plan for Early Learning and Care include suggestions on how to "advance better outcomes for all children by growing the quality, size, and stability of the early learning and care workforce through improved and accessible career pathways, competency-based professional development supports, and greater funding." The Goal of the QCC*

WPG is to support increased learning and healthy development of California's young children by increasing the number of qualified child care and development professionals and increasing the educational credentials, knowledge, and competencies of existing child care and development professionals across the state. Although a registry is not required statewide, it is a web-based system designed for State, Regional, and local collaboration, and designed to track and promote the education, training and experience of the early care and education workforce. The CDSS envisions a statewide registry that is meaningful not only to the State, but to all providers, and that it provides key elements that will lead to a strong and sustainable ECE workforce data-base system. This vision will include analyzing the current way workforce data is collected across the state, gaps, and equity concerns. Currently, a registry and annual workforce survey data are used to collect and analyze workforce needs and support increased quality that positively impact child outcomes. Data from grantees informs CDSS of successes and reveals areas for improvement. Data will also be used to support the new 2024 QCC WPG Resource Family Approval (RFA) that is pending release. Through a combination of survey data and the information collected in the registry, we have gathered the following data for the FY 2022-23 QCC WPG: More than 9,000 participants benefited from the QCC WPG across California. More than 2,300 participants completed higher education units because of their participation in the QCC WPG programs. More than 800 QCC WPG participants received funding to support the cost of their Child Development permit. Of those surveyed: 90% of QCC WPG grantees increased outreach to Family Friend and Neighbor (FFN) and FCCH providers; 75% of QCC WPG grantees were able to offer trainings and services in multiple languages; 60% of QCC WFWPG Grantees were able to serve more of California's workforce this year over prior cycle. **Recent Workforce Demographics:** 94% of the workforce identified as female 4.8% identified as male 0.3% Declined to state gender 0.2% identified as nonbinary 47% of the workforce identified as Hispanic or Latino 25% of the workforce identified as White or Caucasian 10.4% of the workforce identified as Asian 8.2% of the workforce identified as Black or African American Finally, CDSS also invests in the Child Care Initiative Project (CCIP), which is designed per the Welfare and Institutions Code (WIC) sections 10217-10224.5 to be administrated via Resource and Referral Programs across the state to support needs assessment, recruitment and screening of providers, technical assistance, and staff development and training, in order to aid communities in increasing their capacity in the number of child care spaces available and the quality of child care services offered. The FY 2022-23 CCIP program data reveals the following about professional development of family child care home providers and family, friend, and neighbors: Total CCIP Technical Assistance Instances: 520,571 Total CCIP Participants who participated in CCIP Training: 10,244 Total stipends provided to CCIP Participants: 4,508. **Capacity Building and Recruitment Totals for Family Child Care Homes** New Licensees: 1,014 Pending Licensees: 516 Expanded Capacity: 803 Licensees **License-Exempt (LE) and Family, Friend, and Neighbor (FFN) Caregiver Participation and Activities.** Number of LE/FFN caregivers participating in CCIP who cared for at least one child receiving a child care

subsidy during the year: 767 Number of LE/FFN caregiver activities: 780 Number of LE/FFN caregivers in attendance at CCIP training and/or CCIP learning activities: 1,536 Number of CCIP Training Hours provided by all CCR&Rs:-4,618 Number of CCIP Participants who participated in CCIP Training: 10,244.

- vi. **Financing.** For example, Lead Agencies can include information about strategies including scholarships, apprenticeships, wage enhancements, etc. *The CDSS' QCC WPG funds may be used for local level direct workforce supports, including stipends, financial aid, scholarships, and/or financial support for costs associated with unit-bearing classes, trainings, and/or degree attainment (i.e., tuition, fees, books, etc.); payment of costs/fees associated with registering for a Child Development Permit or CDSS' Child Care License; incentives/stipends for creating and updating a Registry profile; participation in/completion of apprenticeship programs or cohort models. Non-direct financial workforce incentives that support infrastructure or system supports include: access to trainings and credit-bearing classes that help participants acquire necessary skills to obtain a Child Development Permit, degree attainment, CDSS' child care license, or move along the California Early Learning Career Lattice according to their professional development plan, such as translators for bilingual classes and trainings, provision of child care during trainings, etc., funding professional development/training opportunities linked to required workforce pathways, and optional workforce pathways supports for English language learners, such as linked classes (English as a Second Language with Child Development), curriculum and texts in languages other than English, and other multilingual educational and career support including tutoring, homework assistance, translation, etc.; laptops or computers on loan to members of the workforce participating in cohorts, apprenticeship models, or other specialized higher education activities; hiring or funding a local or regional child care and development Workforce Pathways Plan Coordinator; and building partnerships between community-based organizations, providers, and higher education to ensure that coursework and professional development meets the needs of current and aspiring educators working in state-subsidized direct contract and voucher programs. The agreement between the State and the Child Care Providers United (CCPU) included a historic \$100 million ongoing financial supports to make health care benefits affordable to providers. This includes lowering or eliminating health care costs for uninsured providers by addressing both the costs for health insurance premiums and out-of-pocket expenses. This historic investment also addresses other compensation needs, including health, dental, and vision insurance, paid time off, and retirement contributions. The agreement also provides additional financial reimbursement for the current workforce, including family, friend, and neighbor providers. In addition, the agreement included \$40 million in training programs for CCPU members. These funds will support CCPU members in improving their skillsets in several categories, including, but not limited to, higher education, peer mentoring, trauma informed care training, equity and access, and provider health and wellness, and to receive financial incentives.*

- b. Does the Lead Agency use additional elements?

☐ X Yes.

If yes, describe the element(s). Check all that apply.

- i. ☐ X Continuing education unit trainings and credit-bearing professional development. Describe: *Many CDSS funded professional development opportunities come with the option of having continuing education units and a few, such as the Program for Infant/Toddler Care (PITC) and the California Preschool Instructional Network (CPIN), have the option of credit-bearing professional development. These will continue in 2025-2027 with an exploration of what other professional development opportunities can become credit-bearing.*
 - ii. ☐ X Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the Lead Agency's framework. Describe: *The CDSS funds professional development provider content aligned with the state's early learning framework, including the early learning foundations, curriculum frameworks, and program guidelines. The CDSS supported an alignment of the core ECE/CD courses for its Community Colleges through a CAP. For more information, please go to: (<http://cccece.net/curriculum-alignment-project>). First 5 California via Quality Counts California hosts a webpage to support engagement of training professional development providers, including higher education, in aligning training and educational opportunities here: <https://qualitycountsca.net/quality-partners/higher-education-faculty/>.*
 - iii. ☐ Other. Describe: *Click or tap here to enter text.*
- ☐ No.

6.2.3 Impact of the Professional Development Framework

Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors and identify what data are available to assess the impact.

- a. Professional standards and competencies. For example, do the professional standards and competencies reflect the diversity of providers across role, child care setting, or age of children served? *The California Department of Social Services (CDSS) recognizes that quality exists in all child care settings and that quality may look different based on the provider and the individual needs of children served. The framework seeks to uplift quality and diversity by expanding access to all child care setting types. This includes promoting language justice and a commitment to ensuring individuals marginalized based on their national origin, ethnic identification, and language are not denied access to services, remedies, and justice overall. The lead agency understands that Equity is quality and quality is equity, therefore, the state has invested in professional development that calls attention to California's diverse workforce. New and past professional development resources are, translated into multiple languages, there is an intentional effort to uplift and support the workforce through incentives to increase recruitment and retention. The CDSS continues to expand access to professional development for all providers, including those participating in the Quality Counts California system and those who are not. Expanding access to resources to all providers, is strategic and intentional to promote anti-racist and fair policies, so that everyone involved in child care can thrive regardless of*

setting type. For example, all providers, including Family Friend and Neighbor caregivers, now have access to resources such as Infant Early Childhood Mental Health Consultation Services, California Preschool Instructional Network resources, the Program for Infant and Toddler trainings, and The California Mentor Program, etc. We are also continuing to invest in incentive projects like the California Child Care Initiative Project, Child Development Training Consortium, and the QCC WPG; all designed to provide financial incentives to the workforce. Moreover, we are developing products tailored to specifically support family child care home providers and family, friend, and neighbors providers. Expanding access serves as a mechanism to ensure equity within the workforce, offering marginalized communities opportunities they traditionally have not received. In addition to these supports, professional development at no cost to providers is available virtually through the California Early Learning Videos series on California Early Childhood Online, and through in-person trainings.

- b. Career pathways. For example, has the Lead Agency developed a wage ladder that provides progressively higher wages as early educators gain more experience and credentials? What types of child care settings and staff roles are addressed in career pathways, such as licensed centers and family child care homes? *The CDSS' has a career lattice that provides guidance to the workforce on upward mobility that may lead to higher permit levels, and roles, which may result in higher wages. For more information regarding California's Early Learning Career Lattice, please see: <https://rrnetwork.org/assets/general-files/careerlattice.pdf>.*
- c. Advisory structure. For example, has the advisory structure identified goals for child care workforce compensation, including types of staff and target compensation levels? Does the Lead Agency have a Preschool Development Birth-to-Five grant and is part of its scope of work child care compensation activities? Are they represented in the advisory structure? *California's Preschool Development Grant (PDG) funds support the compensation of early child care and learning providers and educators to participate in the Early Childhood Policy Council Workforce Advisory Committee and Parent Advisory Committee meetings. Attendees are compensated for travel reimbursement for in-person attendance, child care, wage replacement and stipends for attending the meetings. The 2020 Master Plan for Early Learning and Care includes a framework addressing workforce compensation.*
- d. Articulation. For example, how does the advisory structure include training and professional development for providers, including higher education, to assist in aligning training and education opportunities? *In addition to Child Care Development Fund funds, California is also leveraging the PDG funds to include higher education and other resources to assist in aligning training and education opportunities. For example, PDG funds support the Commission on Teacher Credentialing to develop a competency-based performance assessment system for child care and development educators and to conduct pilot work that would inform a potential higher education accreditation system for early educator preparation in California for overall alignment of the child care and development and K-12 systems.*
- e. Workforce information. For example, does the Lead Agency have data on the existing wages and benefits available to the child care workforce? Do any partners such as the Quality Improvement System, child care resource and referral agencies, Bureau of Labor Statistics, and universities and research organizations collect compensation and benefits data? Does the Lead Agency monitor child care workforce wages and access to benefits through ongoing data collection and evaluation? Can the data identify any disparities in the existing compensation and benefits (by geography, role, child care setting, race, ethnicity, gender, or age of children served)? *The lead agency uses many sources to collect data on the child care and development workforce's wages. The California Early Childhood Education Workforce Study, provided by the Center for the Study of Child Care Employment (CSCCE), is currently the most comprehensive source. According to the 2020 Index, which was updated in 2023, the statewide median hourly wage for assistants was \$16.01, \$18.99 for lead teachers and \$26.00 for directors. Across job roles and education levels, the median wages of center-based educators fall below the national median wage of workers with comparable education in all occupations. The median wage of a center teacher with a bachelor's degree or higher in California is \$20 an hour, while workers with a bachelor's degree across occupations earn a median*

hourly wage of more than \$34. The lead agency may also collect wage data from a registry, although it is not currently a statewide requirement for the workforce to provide wage data to a registry. Grantees at the local level may collect additional workforce wage data, but wage data collection is not standardized across the state. The data provided by CSCCE does identify disparities in existing compensation and benefits including the many effects of racism on early educators in California. The CSCCE published a report highlighting these disparities in wages, leadership roles and education. This data and report can be accessed here [The Multilayered Effects of Racism on Early Educators in California: An Examination of Disparities in Wages, Leadership Roles, and Education](#) (Center for Study of Child Care Employment, 2024).

- f. Financing. For example, has the Lead Agency set a minimum or living wage as a floor for all child care staff? Do Lead Agency-provider subsidy agreements contain requirements for staff compensation levels? Do Lead Agencies provide program-level compensation grants to support staff base salaries and benefits? Does the Lead Agency administer bonuses or stipends directly to workers? *The State does not set a minimum or living wage as the floor for all child care staff other than state and local minimum wage requirements. Forty California cities and counties require employers to pay wages above the state minimum of \$16 an hour. Twenty-eight of those municipalities raised their minimums on Jan. 1, 2024. For example, West Hollywood currently has the nation's highest minimum wage at \$19.08 an hour. The CDSS provider subsidy agreements do not contain requirements for staff compensation levels. Notably, effective, July 1, 2022, parent(s) utilizing in-home provider services must acknowledge, by signing a self-attestation, that the parent is considered the employer and are responsible for complying with any applicable federal and state employment laws, including but not limited to minimum wage requirements. In recent years, the CCDF-funded child care and development workforce has received a number of stipend payments. In addition to receiving stipends directly related to the American Rescue Plan Act in the amounts of \$1,442, \$440, and \$275 per child, the most recent memorandum of understanding between the State and Child Care Providers United includes additional subsidy payments. Beginning January 1, 2024, all providers must receive a payment once per month, per child served who is enrolled in subsidized child care. These payments are meant to support compensation levels while the State is moving to a single rate reimbursement system based on an Alternative Methodology that measures the true cost of care.*

6.3 Ongoing Training and Professional Development

6.3.1 Required hours of ongoing training

Provide the number of hours of ongoing training required annually for CCDF-eligible providers in the following settings:

- a. Licensed child care centers: *All child care center directors must have sixteen (16) hours of health and safety training which must be renewed every two years. All child care center staff must take mandated reporter training annually which includes training on child maltreatment and shaken baby syndrome.*
- b. License-exempt child care centers: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS has been meeting regularly with the federal TA team*

to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, and budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies and practices for the license-exempt providers.

- c. Licensed family child care homes: *All family child care home licenses must have sixteen (16) hours of health and safety training which must be renewed every two years. All adults working in the family child care home must take mandated reporter training annually which includes training on child maltreatment and shaken baby syndrome.*
- d. License-exempt family child care homes: *California received a preliminary notice of non-compliance from OCC on December 13, 2021, for this provision and needs additional time to meet the requirement. The CDSS has been meeting regularly with the federal TA team to draft health and safety standards for license-exempt providers. It is now focusing its efforts and the TA on developing training requirements and monitoring policies and practices for license-exempt providers. When completed, CDSS will initiate the legislative, regulatory, and budgetary and collective bargaining processes to formalize and implement the standards, training and monitoring policies and practices for the license-exempt providers.*
- e. Regulated or registered in-home child care: *N/A*
- f. Non-regulated or registered in-home child care: *N/A*

6.3.2 Accessibility of professional development for Tribal organizations

Describe how the Lead Agency's training and professional development are accessible to providers supported through Indian tribes or Tribal organizations receiving CCDF funds (as applicable). *The California Department of Social Services' (CDSS') partners with the Tribal Child Care Association of California (TCCAC). The TCCAC is the grantee of the Quality Counts California Workforce Pathways Grant and the QCC Block Grant. These Child Care and Development Block Grant services reach 80% of the federally recognized Tribes in California. The TCCAC provides services to families, children, and communities on Tribal land and in urban areas. In addition, the TCCAC provides professional support and technical assistance to Tribes with child care programs. Other efforts to include Tribal organizations include CDSS encouraging professional development contractors to partner with their local Tribal child care programs. The Child Care Development Fund-funded professional development programs are open and available to tribal programs, with direct targeted support provided to tribes through the California Coaching Companion and through the Program for Infant/Toddler Care with staff dedicated to supporting the participating Tribal providers. The California Infant and Early Childhood Mental Health Consultation (IECMHC) Network also has targeted support to Tribal programs beginning in 2024 through TCCAC to ensure Tribal programs receive information about the importance of early childhood mental health and are aware of the supports they can access through the IECMHC Network. The purpose of the California Early Childhood Mentor Program is to strengthen and sustain the child care and development workforce by recruiting, engaging, and elevating a broad representation of certified mentors through a selection committee to implement peer-to-peer, relationship-based mentoring to students, teachers, and administrators in early learning programs, leading to the direct impact of increasing quality care and education children and families receive. The Alternative Pathway Pilot will recruit mentors and support students and the workforce from Tribal, rural, and other underrepresented communities to enhance mentorship and leadership opportunities. Through this work, CDSS' consults, collaborates, and coordinates with the Tribal community to create a plan to achieve access and provide support in the mentorship program for the Tribal organizations. Mentor training and the delivery of professional development activities are accessible through coordination and partnering with the Tribes to provide support. Further, CDSS meets with the TCCAC monthly to share important updates and provide technical assistance. This meeting also offers TCCAC to share their progress and challenges with CDSS as well as to help build and strengthen the relationship. The CDSS also prioritizes supporting TCCAC and their efforts by participating in TCCAC events. The TCCAC holds a roundtable three times per year. The TCCAC typically asks CDSS to focus on areas of interest to the Tribes they serve. This communication and teamwork helps to continue to strengthen the relationship that CDSS is focusing on with the TCCAC and Tribes across California.*

6.3.3 Professional development appropriate for the diversity of children, families, and child care providers

Describe how the Lead Agency's training and professional development requirements reflect the diversity of children, families, and child care providers participating in CCDF. To the extent practicable, how does professional development include specialized training or credentials for providers who care for infants or school-age children; individuals with limited English proficiency; children who are bilingual; children with developmental delays or disabilities; and/or Native Americans, including Indians, as the term is defined in Section 900.6 in subpart B of the Indian Self-Determination and Education Assistance Act (including Alaska Natives) and Native Hawaiians? *The California Department of Social Services uses the California Early Childhood Educator Competencies as a framework to support professional development. Professional development is created with competency areas that include child development and learning; culture, diversity, and*

equity; relationships, interactions, and guidance; family and community engagement; dual-language development; observation, screening, assessment, and documentation; special needs and inclusion; learning environment and curriculum; health and safety, and nutrition; leadership in early childhood education; professionalism; and administration and supervision to support children birth through age thirteen; and support for workforce progression up the career lattice.

6.3.4 Child developmental screening

Describe how all providers receive, through training and professional development, information about: (1) existing resources and services the State/Territory can make available in conducting developmental screenings and providing referrals to services when appropriate for children who receive assistance under this part, including the coordinated use of the Early and Periodic Screening, Diagnosis, and Treatment program (42 U.S.C. 1396 et seq.) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and (2) how child care providers may utilize these resources and services to obtain developmental screenings for children who receive assistance and who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays: *Through optional trainings provided by the Beginning Together program, providers learn what to do when concerns arise and what resources are available in the state for screening and early identification of developmental issues. Providers are given information about the MAP (Making Access Possible) to Inclusion and Belonging website funded by the lead agency, which provides a clearinghouse of information regarding supporting children with disabilities or potential delays. One resource that is specifically highlighted for all providers during trainings is the county-specific resources on the MAP website, which lists the agencies in each county of the state that provide referrals, screening, and services for children with disabilities or delays. Through this resource and training, providers can find agencies in their local area to whom they can reach out for developmental screening. The MAP website also hosts annual webinars and quarterly newsletters to make providers aware of these resources. Additionally, providers voluntarily participating in the California's Quality Rating and Improvement System take training on the Ages and Stages Questionnaire, which is a tool used upon a child's entry into a child care program accurately to screen developmental and social – emotional milestones for children birth through age six. The tool is specifically designed to pinpoint developmental progress and catch delays in young children, paving the way for meaningful next steps in learning, intervention, or monitoring.*

6.4 Early Learning and Developmental Guidelines

Lead Agencies must develop, maintain, or implement early learning and developmental guidelines appropriate for children from birth to kindergarten entry. Early learning and developmental guidelines should describe what children should know and be able to do at different ages and cover the essential domains of early childhood development, which at a minimum includes cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning.

6.4.1 Early learning and developmental guidelines

- a. Check the boxes below to certify the Lead Agency's early learning and developmental guidelines are:
 - i. ☐ ☒ Research-based.

- ii. ☐ ☒ Developmentally appropriate.
- iii. ☐ ☒ Culturally and linguistically appropriate.
- iv. ☐ ☒ Aligned with kindergarten entry.
- v. ☐ ☒ Appropriate for all children from birth to kindergarten entry.

- vi. ☐ ☒ Implemented in consultation with the educational agency and the State Advisory Council on Early Childhood Education and Care or similar coordinating body.
- vii. If any components above are not checked, describe: [Click or tap here to enter text.](#)
- b. Check the boxes below to certify that the required domains are included in the Lead Agency's early learning and developmental guidelines.
 - i. ☐ ☒ Cognition, including language arts and mathematics.
 - ii. ☐ ☒ Social development.
 - iii. ☐ ☒ Emotional development.
 - iv. ☐ ☒ Physical development.
 - v. ☐ ☒ Approaches toward learning.
 - vi. ☐ Other optional domains. Describe any optional domains: [Click or tap here to enter text.](#)
 - vii. If any components above are not checked, describe: [Click or tap here to enter text.](#)
- c. When were the Lead Agency's early learning and developmental guidelines most recently updated and for what reason? [Updates are done on a regular rotation for the publication of resources and guidelines. The Infant/Toddler Foundations were released in 2010 and are being revised beginning in 2023. The Preschool Learning Foundations, Volume 1 in 2010, Volume 2 in 2011, and Volume 3 in 2013 were recently revised \(Preschool, Transitional-Kindergarten Learning Foundations\) by California Department of Education \(CDE\) and are due to be released to the field in 2024. To that end, California Department of Social Services \(CDSS\) is partnering with CDE to create professional development modules to support workforce needs as it relates to the updates to the new Preschool, Transitional-Kindergarten Learning Foundations. Additionally, CDSS will also be revising the Infant/Toddler Foundations Framework Guidelines, Preschool Program Guidelines, Guidelines for Early Learning in Child Care Home Settings, and the Curriculum Frameworks over the next three years to align with the updates made to the Preschool, Transitional- Kindergarten Learning Foundation updates, and core resources will be translated in Spanish and Chinese.](#)
- d. Provide the Web link to the Lead Agency's early learning and developmental guidelines. [Early Learning and Care Publications Resource page with links to the age specific foundations and guidelines can be found at: <https://www.cde.ca.gov/sp/cd/re/cddpublications.asp#eeresources>. The revised Infant/Toddler Learning and Development Foundations and Infant/Toddler Framework, Preschool, and Child Care Homes Guidelines when revised will be located on the CDSS' Child Care and Development Division Publications page at: <https://cdss.ca.gov/inforesources/child-care-and-development/publications>.](#)

6.4.2 Use of early learning and developmental guidelines

- a. Describe how the Lead Agency uses its early learning and developmental guidelines. [The State uses the Preschool Learning Foundations and Frameworks along with the Infant and Toddler Foundations and Framework to support the early learning and care](#)

workforce's understanding of early childhood competencies. Basic overviews of the Infant/Toddler and Preschool Foundations and Frameworks are available for all providers on the California Department of Education website and overview training modules are available on California Early Childhood Online. The Infant/Toddler Foundations and Frameworks, to be updated over the next few years, will be available through California Department of Social Services' Child Care and Development Division Publications page when available. The foundations are integrated into higher education coursework, training provided through Child Care Development Fund Quality professional development projects, and coaching activities. They are also the basis for the State's child observational assessment, the Desired Results Developmental Profile. The Infant/Toddler Foundations are source content for training provided by the Program for Infant Toddler Caregiving. The Preschool Foundations are the source content for the California Preschool Instructional Network's training and technical assistance. These foundations are embedded in the California Early Childhood Educator Competencies. The state foundations inform the curriculum frameworks and program guidelines.

- b. Check the boxes below to certify that CCDF funds are not used to develop or implement an assessment for children that:
- i. ☒ *X* Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF.
 - ii. ☒ *X* Will be used as the primary or sole basis to provide a reward or sanction for an individual provider.
 - iii. ☒ *X* Will be used as the primary or sole method for assessing program effectiveness.
 - iv. ☒ *X* Will be used to deny children eligibility to participate in CCDF.
 - v. If any components above are not checked, describe: [Click or tap here to enter text.](#)

7 Quality Improvement Activities

The quality of child care directly affects children's safety and healthy development while in care settings, and high-quality child care can be foundational across the lifespan. Lead Agencies may use CCDF for quality improvement activities for all children in care, not just those receiving child care subsidies. OCC will collect the most detailed Lead Agency information about quality improvement activities in annual reports instead of this Plan.

Lead Agencies must report on CCDF child care quality improvement investments in three ways:

1. In this Plan, Lead Agencies will describe the types of activities supported by quality investments over the 3-year period.
2. An annual expenditure report (the ACF-696). Lead Agencies will provide data on how much CCDF funding is spent on quality activities. This report will be used to determine compliance with the required quality and infant and toddler spending requirements.
3. An annual Quality Progress Report (the ACF-218). Lead Agencies will provide a description of activities funded by quality expenditures, the measures used to evaluate its progress in improving the quality of child care programs and services within the State/Territory, and progress or barriers encountered on those measures.

In this section of the Plan, Lead Agencies will describe their quality activities needs assessment and identify the types of quality improvement activities where CCDF investments are being made using quality set-aside funds.

7.1 Quality Activities Needs Assessment

7.1.1 Needs assessment process and findings

- a. Describe the Lead Agency needs assessment process for expending CCDF funds on activities to improve the quality of child care, including the frequency of assessment, how a diverse range of parents and providers were consulted, and how their views are incorporated: *The California Department of Education, when they were the Lead Agency, received technical assistance (TA) from the National Center on Early Childhood Quality Assurance to align Child Care Development Fund (CCDF) quality funds and activities to maximize investments and to ensure sufficient time for new quality investments to be launched and achieve adequate implementation. As a result of this TA, California Department of Social Services (CDSS) has started the process for future fiscal year quality investment activities that include an assessment and feedback loop with Research, professional development systems support, as well as data and evaluation. The professional development evaluation system created a continuous assessment and evaluation process that collects annual program quality reporting information, utilizes data to identify gaps in professional development accessibility, affordability, and quality, identifies the challenges and needs of the workforce including equity across programs, funding streams, and communities, and informs CDSS of when investments are fully implemented and sustainable. The evaluation of the State's professional development system allows for analysis of quarterly progress reports as well as end-of-year evaluations to inform investment decisions. The CDSS began to engage in additional federal TA in 2023 to continue to evaluate the professional development system and plan for changes that will take place over the next three years. In addition, CDSS completes formal assessments yearly on specific quality investments and the results of the evaluations are used for project improvement including how to better support family child care homes and family, friends, and neighbor providers. To increase equitable access to high-quality child care services through CCDF funds, CDSS partners with other state agencies, the child*

care community, and families to conduct ongoing evaluation of its quality improvement efforts through evaluation of trainings, surveys, contractor meetings, and public comment during meetings like the Early Childhood Policy Council meetings. Feedback is used to address gaps, concerns, or build on successes as it relates to improving quality in early learning and care programs. Additionally, to support equitable access and outcomes, CDSS continues to build from recent state planning efforts (i.e., 2020 California Early Learning and Care Master Plan, 2019 Blue-Ribbon Commission, and Preschool Development Grant-Renewal) to track measurable indicators that assess the equity of CCDF quality improvement efforts. Evaluations of these indicators help inform future decisions, as well as dismantle systemic structures, policies, and practices that produce inequitable access and outcomes.

- b. Describe the findings of the assessment, including any findings related to needs of different populations and types of providers, and if any overarching goals for quality improvement were identified: *The recent Preschool Development Grant Renewal (PDG-R) Needs Assessment provided recommendations on opportunities to positively impact racial equity through future quality investments. The report provided recommendations for 14 priorities. This is not exhaustive and the entire report can be found at https://pdqcaforallkids.org/wp-content/uploads/2023/03/PDG-R_NA-EL_Report_FINAL_ADA.pdf. The priorities and recommendations are as follows: (1) disseminate public funds equitably: map and monitor how funds flow from their respective programs to the deliverable outcomes; (2) move toward holistic, strengths-based, and authentic integration, partnering state agencies need to include information from existing data systems around child, teacher, and leader demographic makeup at the site and classroom levels; (3) embed equity in monitoring and accountability systems, establish a racial equity audit process across the child care and development ecosystem and, at least for the PDG-R partners, implement it on a set schedule that assesses gains and areas of improvement; (4) address workforce equity, examine existing workforce compensation data and identify whether disparities exist by race, ethnicity, setting type, or child ages, and establish a plan to close these pay gaps, aiming toward pay parity for all lead early educators with elementary school teachers; (5) embed equity in workforce (including leadership) preparation and development, ensure that equity-focused content across professional preparation and development systems is required and not optional, and review and update this content as needed; (6) explicitly include equity in the definition of quality across rating systems; Include actionable, equity-focused indicators in the new iteration of the state's Quality Rating and Improvement System. A non-exhaustive list of indicators is provided by the Community Eligibility Provision report: Equity is Quality, Quality is Equity; (7) ensure high-quality curricula and pedagogy are accessible and culturally responsive by evaluating which approaches and curricula close racial, ethnic, economic, and disability gaps, regardless of whether they receive public funding; (8) ensure global environmental classroom quality measurement explicitly assesses equitable experiences; (9) eliminate harsh discipline by Requiring annual professional development to understand the role of race and racism in the perceptions of children's behaviors that challenge adults and discipline decisions; (10) address equity in early intervention and special education access, identification, and inclusion by ensuring all partners involved with coaching or consultation, including the Infant and Early Childhood Mental Health Consultation Network, are required to ensure inclusion and*

support of children with disabilities is part of the content; (11) implement a data-driven continuous equity quality improvement cycle; (12) expand family leadership and engagement; (13) prioritize family child care with intentional strategies and outreach, specifically to family child care, and outreach across all training, technical assistance, and coaching; (14) equitably expand access to dual language immersion approaches for dual language learners. Overall, the PDG-R Needs Assessment recommendations highlight that achieving an equitable system requires agreeing on a clear and actionable definition of “equity” that is consistent across the state child care and development system focuses on access, experience, and outcomes across programs, policies, organizations, and agencies, and recognizes the importance of fair and just opportunity and of addressing both historical and contemporary inequities and injustices.

7.2 Use of Quality Set-Aside Funds

Lead Agencies must use a portion of their CCDF expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care. They must use the quality set-aside funds on at least one of 10 activities described in CCDF and the quality activities must be aligned with a Statewide or Territory-wide assessment of the State's or Territory's need to carry out such services and care.

7.2.1 Quality improvement activities

- a. Describe how the Lead Agency will make its Quality Progress Report (ACF – 218) and expenditure reports, available to the public. Provide a link if available. *Each year, after the Quality Progress Report is approved by Administration for Children and Families, Child Care and Development Division (CCDD) releases an announcement and link to the CCDD listserv notifying them that it has been posted to the [CCDD webpage](#).*
- b. Identify Lead Agency plans, if any, to spend CCDF funds for each of the following quality improvement activities. If an activity is checked “yes”, describe the Lead Agency’s current and/or future plans for this activity.

- i. Supporting the training and professional development of the child care workforce, including birth to five and school-age providers.
- ☐ No plans to spend in this category of activities at this time.
- ☒ *X* Yes. If yes, describe current and future investments. *The lead agency supports training and professional development of the child care workforce. Investments include the Program for Infant and Toddler care and the Quality Counts California Workforce Pathways Grants, which provides incentives to the workforce serving children from birth through school-age. Information regarding additional investments can be located on the [Quality Improvement Initiatives webpage](#).*
- ii. Developing, maintaining, or implementing early learning and developmental guidelines.
- ☐ No plans to spend in this category of activities at this time.
- ☒ *X* Yes. If yes, describe current and future investments. *The lead agency supports developing, maintaining, and implementing early learning and developmental guidelines. Investments include updating the California Infant/Toddler Learning and Development Foundations and the Curriculum Framework to align with the recent updates to the Preschool Foundations and Framework, developing an online platform for the Infant/Toddler Learning and Development Foundations and the Curriculum Framework, developing online modules to support the understanding and use of the updated Infant/Toddler Foundations and Framework, as well as developing third editions of Program for Infant/Toddler Care Caregiving Guides.*
- iii. Developing, implementing, or enhancing a quality improvement system.
- ☐ No plans to spend in this category of activities at this time.
- ☒ *X* Yes. If yes, describe current and future investments. *The lead agency is working towards updating the quality improvement system to address gaps in equity. This will include revamping the quality matrix and other ways we currently measuring quality.*
- iv. Improving the supply and quality of child care services for infants and toddlers.
- ☐ No plans to spend in this category of activities at this time.
- ☒ *X* Yes. If yes, describe current and future investments. *The primary mission of the Local Planning Councils (LPCs) is to plan for child care and development services based on the needs of families in the local community. The LPCs are intended to serve as a forum to address the child care needs of all families in the community for all types of child care, both subsidized and non-subsidized.*
- v. Establishing or expanding a statewide system of CCR&R services.
- ☐ No plans to spend in this category of activities at this time.
- ☒ *X* Yes. If yes, describe current and future investments. *The lead agency invests in Child Care Resource and Referral (CCR&R) services in every county in California. The lead agency also supports local CCR&Rs with technical*

assistance to support local CCR&R programs through the California Resource & Referral Network to increase capacity. Additionally, the lead agency invests in the online consumer education platform, Mychildcareplan.org, and the consumer education line to support families and the community with identifying child care services and the workforce with professional development to increase the quality of child care services across the state.

- vi. Facilitating compliance with Lead Agency child care licensing, monitoring, inspection and health and safety standards.
 - ☒ *X No plans to spend in this category of activities at this time.*
 - ☐ Yes. If yes, describe current and future investments. *Click or tap here to enter text.*
- vii. Evaluating and assessing the quality and effectiveness of child care services within the State/Territory.
 - ☒ *X No plans to spend in this category of activities at this time.*
 - ☐ Yes. If yes, describe current and future investments. *Click or tap here to enter text.*
- viii. Accreditation support.
 - ☒ *X No plans to spend in this category of activities at this time.*
 - ☐ Yes. If yes, describe current and future investments. *Click or tap here to enter text.*
- ix. Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development.
 - ☒ *X No plans to spend in this category of activities at this time.*
 - ☐ Yes. If yes, describe current and future investments. *Click or tap here to enter text.*
- x. Other activities determined by the Lead Agency to improve the quality of child care services and the measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry.
 - ☐ No plans to spend in this category of activities at this time.
 - ☒ *X Yes. If yes, describe current and future investments. The current Quality Rating and Improvement System (QRIS) requires participants to meet California Code of Regulations, Title 22 regulations as a baseline to quality. Sites participating in QRIS can receive site-based incentives for quality improvement. Additionally, the QRIS includes the Quality Counts California Workforce Pathways Grant and the Child Care Initiative Project incentivizes provider's for taking basic health and safety training related to improving provider preparedness, child safety, child well-being, and the Desired Results, Developmental Profile to support Kindergarten entry.*

8 Lead Agency Coordination and Partnerships to Support Service Delivery

Coordination and partnerships help ensure that the Lead Agency's efforts accomplish CCDF goals effectively, leverage other resources, and avoid duplication of effort. Such coordination and partnerships can help families better access child care, can assist in providing consumer education to parents, and can be used to improve child care quality and the stability of child care providers. Such coordination can also be particularly helpful in the aftermath of disasters when the provision of emergency child care services and the rebuilding and restoring of child care infrastructure are an essential part of ensuring the well-being of children and families in recovering communities. This section identifies who the Lead Agency collaborates with to implement services, how match and maintenance-of-effort (MOE) funds are used, coordination with CCR&R systems, and efforts for disaster preparedness and response plans to support continuity of operations in response to emergencies.

8.1 Coordination with Partners to Expand Accessibility and Continuity of Care

Lead Agencies must coordinate child care services supported by CCDF with other federal, State/Territory, and local level programs. This includes programs for the benefit of Indian children, infants and toddlers, children with disabilities, children experiencing homelessness, and children in foster care.

8.1.1 Coordination with required and optional partners

Describe how the Lead Agency coordinates and the results of this coordination of the provision of child care services with the organizations and agencies to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services that meet the needs of working families.

The Lead Agency must coordinate with the following agencies:

- a. State Advisory Council on Early Childhood Education and Care or similar coordinating body (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe the coordination and results of the coordination: *The California Department of Social Services (CDSS) coordinates with the Early Childhood Policy Council (ECPC), which is a leadership body with members appointed by the Governor, Legislature, State Superintendent of Public Instruction, and the State Senate and State Assembly. The ECPC was established in November 2019 to ensure statewide collaboration among early childhood programs to help define future policies impacting children from birth to Kindergarten age. The ECPC includes representatives from California Department of Education (CDE), School Districts, Advocacy organizations, Child Care Resource and Referrals (CCR&Rs), center and family child care home providers, program administrators, and parents. Three representatives from CDSS are appointed members of the council: Kim Johnson, Director, Lupe Jaime-Mileham, CDSS' Child Care Development Fund (CCDF) Lead Administrator and Deputy Director of the Child Care and Development Division, and pending appointment, the current CDSS' Director of the California Head Start Collaboration Office, Ristyn Woolley. The ECPC provides recommendations on all aspects of the state's mixed delivery child care system, including support for the demographic, geographic and economic diversity of the state's children and families. Additionally, the ECPC was instrumental in the development of the 2020 Master Plan for Early Learning and Care (2020 Master Plan). The ECPC holds at least four public meetings per year, convenes a Parent Committee and a Workforce Advisory Committee and prepares an annual report detailing progress made towards reaching the goals of the 2020 Master Plan.*

- b. Indian Tribe(s) and/or Tribal organization(s), at the option of the Tribe or Tribal organization. Describe the coordination and results of the coordination, including which Tribe(s) was (were) involved: *The CDSS's Office of Tribal Affairs (OTA) has the primary responsibility of building better government-to-government relationships with CDSS and the 110 federally recognized California Indian Tribes (Tribes) and counties, as well as working with Tribal organizations and American Indian/Alaska Native (AI/AN) stakeholders. Grounded in meaningful Tribal Consultation, engagement of core stakeholders, and advising leadership, the OTA guides CDSS' efforts to help create and facilitate policies, procedures, and programs that serve AI/AN children and families. The Deputy Director of the CDSS' Child Care and Development Division (CCDD) participates each month in CDSS' Office of Tribal Affairs Advisory meeting to provide updates on the work of the Division related to Tribal communities. Additionally, the CDSS' CCDD meets quarterly with Tribal early childhood program administrators, leads and representatives, via the Tribal/State/Federal CCDF Roundtable meetings held as part of the Tribal Child Care Association of California (TCCAC) meetings. The CDSS' goals with this coordination include enhancing and aligning quality of services, linking comprehensive services to children in child care settings and examining program funding and eligibility requirements to expand access, which align directly with the goals of the TCCAC. The California Tribal CCDF grantees invited quarterly to the meetings include the following: Bear River Band of the Rohnerville Rancheria, Big Sandy Rancheria of Mono Indians, Bishop Paiute Tribe, California Indian Manpower Consortium Inc., California Indian Rural Health Board, Campo Band of Mission Indians Seven Consortium, Cloverdale Rancheria of Pomo Indians, Colusa Indian Community, Dry Creek Rancheria of Pomo Indians, Enterprise Rancheria of Maidu Indians, Hoopa Valley Tribe, Hopland Band of Pomo Indians, Inter-Tribal Council of California Inc., Karuk Tribe, Mechoopda Indian Tribe of Chico Rancheria, Mooretown Rancheria of Maidu Indians, North Fork Rancheria of Mono Indians, Picayune Rancheria of Chukchansi Indians, Pinoleville Pomo Nation, Pit River Tribe, Quartz Valley Indian Community, Quechan Tribe, Redding Rancheria, Robinson Rancheria, Round Valley Indian Tribes, Scotts Valley Band of Pomo Indians, Soboba Band of Luiseno Indians, Southern California Tribal Chairmen's Association Inc., Susanville Indian Rancheria, Tolowa Dee-ni' Nation, Torres Martinez Desert Cahuilla Indians, Tyme Maidu of the Berry Creek Rancheria, Wiyot Tribe, and the Yurok Tribe. In addition, the California Head Start Collaboration Office (CHSCO) collaborates with Office of Head Start National American Indian and Alaskan Native Head Start Collaboration Office (NAIANHSCO). The NAIANHSCO serves 150 AIAN Head Start and 58 AIAN Early Head Start programs in 26 different states and seeks to develop collaborative partnerships that help improve the quality of life for AIAN children and families. The CHSSO participates in national trainings and advisory committee meetings.*

☐ Not applicable. Check here if there are no Indian Tribes and/or Tribal organizations in the State/Territory.

- c. State/Territory agency(ies) responsible for programs for children with disabilities, including early intervention programs authorized under the Individuals with Disabilities Education Act. Describe the coordination and results of the coordination: *The Special Education Division (SED) at CDE is responsible for Part B of Individuals with Disabilities Education Act (IDEA) and coordinates with CDSS on the development and use of the state child observational assessment, the Desired Results Developmental Profile, and on*

inclusive early learning and care issues. The CDDS is the lead agency for Part C of the IDEA, the federal early intervention program for infants and toddlers with disabilities. The CDDS collaborates with CDE, with advice and assistance from the State Interagency Coordinating Council on Early Intervention (ICC) regarding the California Early Start program established pursuant to the California Early Intervention Services Act (CEISA), which created state authority to develop an early intervention service system congruent with federal requirements under Part C. The ICC is comprised of parents of children with disabilities, early intervention service providers, health care professionals, state agency representatives, and others interested in early intervention and inclusion. Additionally, counties implement Help Me Grow (HMG) system or other early identification systems. The HMG system is a locally developed resource and referral system that identifies a family's child development needs. It provides the care coordination necessary to ensure the best and most timely access to appropriate services. Help me Grow programs are designed to share resources, tools, and best practices for early identification of special needs. The programs help families learn about and navigate California's early childhood system of care. The Quality Rating and Improvement System (QRIS) rating matrix within the Quality Counts California (QCC) includes a developmental screening element and many local QCCs then coordinate with HMG to ensure families are connected to referrals and services, as applicable. In addition, the CHSCO participates in national meetings and workgroups with IDEA Part B 619 coordinators and local Head Start state disabilities cluster meetings to provide information on professional development opportunities, national resources, and funding opportunities.

- d. **State/Territory office/director for Head Start State collaboration. Describe the coordination and results of the coordination:** *The CHSCO is located within CDSS' CCDD, providing opportunities for ongoing feedback and communication between Head Start funded programs and state partners who implement child care related policies and programming. The CHSCO and CCDD have shared responsibilities as required in federal law to coordinate and collaborate at the state level to provide information and resources to best serve California's most vulnerable populations. The CHSCO works regularly with CCDD to develop, facilitate, and enhance partnerships at the federal, state, and local levels. The CHSCO provides feedback on state legislation and participates on workgroups and committees to support alignment of CCDF and Head Start funded programs through the following priorities:*
- 1. Collaborate with state systems to align early care and education services and supports for children and families prenatally to age 5, including collaborating across systems to support: Health, mental health, and social and emotional well-being, Home visiting Comprehensive service delivery; Services and supports for children who are experiencing homelessness, children in foster care, children with disabilities, and children who are dual language learners; Quality improvements; School readiness initiatives; State background check systems; Child care (including migrant child care) Child welfare; Early Head Start-Child Care Partnerships; Early Childhood Comprehensive Systems Health Integration Prenatal-to-3 Programs*
 - 2. Work with state efforts to collect and use data on early childhood programs to guide decision-making and improve child and family outcomes.*
 - 3. Support the expansion of and access to high-quality workforce and career*

development opportunities for staff.

4. *Coordinate with school systems to ensure continuity and alignment across programs, as appropriate.*

5. *Other State and Regional Priorities*

This coordination has led to shared services between Head Start funded programs, Child Care, and Pre-K to include trainings, coaching, technical assistance, and cross-sector use of state learning foundations, frameworks, and assessments. In addition, the CHSCO recently created the State Health Partnership (SHP) which includes the Child Care and Adult Food Program, the Supplemental Nutrition and Safety Programs, the Family Engagement and Empowerment Division, and the California Department of Public Health (CDPH) – Women, Infants, and Children Division. This alignment of state partners serves to exchange educational approaches and materials by inviting representatives from the respective programs to attend cross-sector meetings to assist in promoting shared goals and increase access to services for children and families. The Director of CHSCO is a non-voting member of the ECPC. Additional information and ongoing coordination efforts can be found here: [California Head Start Collaboration](#).

- e. *State/Territory agency responsible for public health, including the agency responsible for immunizations. Describe the coordination and results of the coordination: The goal of CDSS' coordination with CDPH is to create and maintain the linkage between early learning and care and health care. The State provides services for pregnant women and children through various programs such as: the CalWORKs Home Visiting Program, Covered California, Access for Infants and Mothers, and the Healthy Families Program. Together, these three programs cover children up to 267 percent of the federal poverty level, and pregnant women and their infants up to 400 percent of the federal poverty level. The CDPH and CDSS have worked to address the growing concern about the immunization of children. The link between health care and child care and development is strengthened by the requirement that children be immunized at the appropriate age before being enrolled in early learning and care settings. The CDPH and CDSS have worked to spread early learning and care and school immunization laws, to assist programs in achieving higher immunization rates among children at these facilities. [Senate Bill 277 \(statute of 2015, chapter 35\)](#), no longer permits new immunization exemptions based on personal beliefs for children in early learning and care and schools. The law still requires students to provide immunization records to their early learning and care facilities and schools and in turn, early learning and care facilities must continue to report to CDPH the immunization status of all students at the existing checkpoints of early learning and care, Kindergarten and 7th grade. The bill includes provisions regarding the rights of unimmunized children with family service plans and or individualized education plans. Additional details about this law may be found at: [Shots for Schools](#). In addition, CHSCO participates in various federal, state, and local meetings to share professional development opportunities, resources, local partnerships, and funding opportunities. The CHSCO also serves as a link between Head Start (HS) funded programs and various state programs to assist HS funded programs in meeting federal requirements for oral and physical health services and parent education, including but not limited to, immunizations, vision and hearing screenings, developmental screenings, infection control, medication administration, and the importance of oral and physical health.*

- f. State/Territory agency responsible for employment services/workforce development. Describe the coordination and results of the coordination: *The CDSS is responsible for child care and development workforce development. The CDSS works with Local Planning Councils (LPCs) to implement the Quality Counts California (QCC) Workforce Pathways Grant (WPG). The QCC WPG is administered to support local, regional, or local and regional quality improvement partnerships. In most cases the LPCs have first right of refusal to apply for the QCC WPG. The QCC WPG seeks to expand the number of qualified child care and development professionals and increase the educational credentials of existing child care and development professionals. The goals of the QCC WPG are to: (1) increase the qualifications and effectiveness of the child care and development workforce by increasing the skills and competencies and the ability to provide culturally and linguistically responsive high-quality interactions with young children; (2) increase the number of child care and development professionals that have completed CCDF health and safety and child development training requirements; (3) increase the number of licensed child care and development professionals in child care deserts; (4) increase the number of child care and development professionals with degrees in the field of early childhood education; (5) increasing the number of child care and development professionals with Child Development Permits from the California Commission on Teacher Credentialing (CTC); and (6) increase the number of license-exempt family, friend, and neighbor (FFN) providers that become licensed. The local level workforce grant administrator will advance these goals by developing a one-year QCC WPG Plan that differentiates supports based on local child care and development workforce needs. If the current stipend program administrator declines or the county does not currently receive workforce stipend funds, the lead agency identified in the QCC Local Consortia and Partnership Grant application must be prioritized to serve as lead agency for the QCC WPG. The lead applicants must, at a minimum, be a participating local consortia member with the capacity to administer and implement the QCC Workforce Pathways Grant. Through the CDSS' administered QCC WPG, more than 9,000 of California's child care and development workforce were able to participate in workforce advising, professional development, and higher education services across California in the 2022-2023 fiscal year. More than 26% of participants completed higher education units as a result of their participation in the QCC WFP Grant and more than 80% of participants completed professional development training as a result of their participation in the QCC WPG. As efforts increase to address racial inequities in the workforce, coordination with organizations such as the Center for the Study of Child Care Employment and the Child Care Providers United (CCPU) are integral to addressing wage and professional training inequities. All QCC WPG grantees are required to address equity and diversity within their funding plans. Additionally, the CDSS encourages the use of a registry for all QCC WPG grantees as a state, regional, and local collaboration designed to track and promote the education, training, and experience of the early care and education workforce for the purpose of improving professionalism and workforce quality to positively impact children.*
- g. State/Territory agency responsible for public education, including pre-Kindergarten. Describe the coordination and results of the coordination: *The CDSS, in collaboration*

with CDE, coordinates California's child care and development subsidized programs across the continuum. Within CDE, the Early Education Division administers the California State Preschool Program (CSPP), and the Expanded Learning Division administers several after school care programs. In addition to promoting school readiness, CDSS collaborates with CDE and the CHSCO to facilitate transitions from early learning and care to school, link quality care to later school success, and align objectives and projects that support inclusive care and bilingual education. A further goal for coordination is to streamline and align funding sources to ensure all children receive quality pre-Kindergarten services as part of the continuum from quality early learning and care. The CDE supports Transitional Kindergarten programs, the first year of a two-year Kindergarten program offered to age eligible four-year olds. The CDE is working to coordinate the alignment of CSPP offered to families receiving subsidies and Transitional Kindergarten to allow school districts to consolidate and provide quality pre-Kindergarten services to all age eligible children.

- h. State/Territory agency responsible for child care licensing. Describe the coordination and results of the coordination: *The CDSS administers child care licensing through the Child Care Licensing Program (CCLP). The CCLP strives to provide preventive, protective, and quality services to children in care by ensuring that licensed facilities meet established health and safety standards through monitoring facilities, providing technical assistance, and establishing partnerships with providers, parents, and the child care community. The CCLP provides oversight and enforcement for licensed child care centers and family child care homes through 19 Regional Offices located throughout California. The CCLP works closely with local CCR&R agencies to keep them updated on the licensing status of existing and newly licensed facilities. This is outlined in legislation to ensure that consumers receive accurate information about safety and new options which is important for a child care referral. The CDSS also works closely with the California Child Care Resource & Referral Network (the Network), who acts as an intermediary for licensing data between CDSS and Local CCR&Rs. The Network also holds a contract that supports trainers at each CCR&R agency that work to recruit and offer professional development to home based providers. Local CCR&Rs recruit and support interested parties to learn about the licensing process and offer technical assistance for licensing and ongoing information regarding licensing requirements. Regional Licensing Offices meet with CCR&Rs in their region to share information, concerns, and best practices to support licensees. Ongoing communication at all levels between CCLP and the CCR&Rs helps in the planning, support, and targeting of new capacity building needs. In addition, CHSCO supports various meetings with CCLP and the Office of Head Start Region 9 to facilitate conversations specific to Head Start funded programs and assist in alignment with state and federal requirements.*
- i. State/Territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination and results of the coordination: *The Nutrition Services Division (NSD) at CDE is responsible for some aspects of the Child and Adult Care Food Program (CACFP) in relation to the CSPP, which are administered by CDE's Early Education Division (EED). For all other child care and development programs, the responsibility for the relationship to CACFP lies within CDSS. The CDSS works with EED to promote and articulate CACFP education for CSPP and providers. The goal of this coordination is to ensure all providers have nutritional information and/or subsidies so that children are provided nutritious snacks and meals and*

parents are educated and have access to adequate nutrition. Many of CDSS' child care and development subsidized providers utilize the CACFP. Families need to be income eligible for these services, but families do not need to apply for CACFP to be provided with information about healthy nutrition. State subsidized child care and development programs operating in centers must abide by the nutritional meal and snack requirements of the CACFP. Many Resource and Referral agencies and Alternative Payment Programs provide a forum for CACFP to introduce voluntary CACFP participation. They also serve as CACFP sponsors for child care and development providers providing services through a voucher. In addition, CHSCO recently created the State Health Partnership (SHP) which includes the Child Care and Adult Food Program, the Supplemental Nutrition and Safety Programs, the Family Engagement and Empowerment Division, and the CDPH– Women, Infants, and Children Division. This partnership of state partners serves to exchange educational approaches and materials by inviting representatives from the respective programs to attend cross-sector meetings to assist in promoting shared goals and increase access to services for children and families.

- j. McKinney-Vento State coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons. Describe the coordination and results of the coordination: *The CDSS' CCDD works with the McKinney-Vento state coordinator and the Housing and Homelessness Division (HHD) within CDSS to support families accessing housing supports and coordination on the homeless education program. The CHSSCO and HHD have shared responsibilities to coordinate and collaborate at the state level to provide information and resources to best serve California's most vulnerable populations, including children and families who are experiencing homelessness. The intended outcome of this partnership is to foster and encourage local connections and outreach to children and families experiencing homelessness by providing education and resources to the field. The HHD oversees programs vital to securing housing for families in poverty, including the CalWORKs Housing Support Program, and Project Roomkey. Additionally, R&R and Alternative Payment Programs assess the needs of families during referral and enrollment processes and offer information on local resources for homeless families.*
- k. State/Territory agency responsible for the TANF program. Describe the coordination and results of the coordination: *The CDSS administers California's Temporary Assistance for Needy Families (TANF) program. The alignment of CCDF programs, supports, and services within CDSS as the lead agency, since the transfer from CDE, provides more opportunities to facilitate and streamline services for children and families receiving TANF benefits and services (in California, this is primarily through the California Work Opportunity and Responsibility to Kids, or CalWORKs, program). The CDSS' CalWORKs and Family Resilience Branch within the Family Engagement & Empowerment Division oversees the CalWORKs cash aid program and corresponding workforce services. The CDSS' staff meet with county welfare department child care representatives at the monthly County Welfare Directors Association meetings to coordinate policy and support consistency across TANF child care quality and accessibility.*
- l. State/Territory agency responsible for Medicaid and the State Children's Health Insurance Program. Describe the coordination and results of the coordination: *The CDSS works closely with the CDPH to create and maintain the linkage between early learning and care and health care. The State provides services for pregnant women and children through*

various programs, such as Covered California, Access for Infants and Mothers, and the Healthy Families Program. Together, these three programs cover children up to 267 percent of the federal poverty level, and pregnant women and their infants up to 400 percent of the federal poverty level. Local R&Rs, Alternative Payment Programs (APPs), and CDE-contracted providers assist families in accessing Medicaid (Medi-Cal), as well as accessing subsidized health care coverage via the Covered California program. In addition, California Head Start Collaboration Office (CHSCO) participates in various federal, state, and local meetings to share professional development opportunities, resources, local partnerships, and funding opportunities. The CHSCO also serves as a link between HS Funded programs and various state programs to assist HS funded programs in meeting federal requirements for oral and physical health services and parent education, including but not limited to, immunizations, vision and hearing screenings, developmental screenings, infection control, medication administration, and the importance of oral and physical health.

- m. State/Territory agency responsible for mental health services. Describe the coordination and results of the coordination: *The California Department of Health Care Services (DHCS) administers a number of programs for children and youth related to mental health. The Medi-Cal managed care plans, county mental health plans, and county California Children Services programs deliver services at the local level. The goal of CDSS' coordination with DHCS is to ensure that all the State's Resource & Referral agencies (R&Rs), direct service contractors, and Alternative Payment Program providers are aware of the services provided at the county level, particularly early and periodic screening diagnosis and treatment.*
- n. Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Describe the coordination and results of the coordination: *The CDSS meets quarterly with staff and board members from the Resource and Referral (R&R) Network, and other key partners to address coordination and goals. Meetings include CCDD and Community Care Licensing Division (CCLD) to ensure improved coordination, shared goals, and alignment across all agencies and programs. Relevant consumer education topics and training opportunities are brought to the State and local level for dissemination to staff, providers, and families in the early learning and care community newsletters, local resources in print and on websites, and other relevant outreach efforts in the community by local R&Rs. Oversight is provided by CDSS to R&R programs related to their function as providers of Consumer Education.*
- o. Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination and results of the coordination: *In accordance with Welfare and Institution Code (WIC) Section 10273(a), the preferred placement for children who are 11 or 12 years of age, and eligible for subsidized services, will be in before or after school programs. The CDSS works with CDE's Expanded Learning Division (ELD) and the Early Education Division (EED) to support and coordinate access to these programs. Both the ELD and the EED are housed within the CDE's Opportunities for All Branch to coordinate the assessment of needs of children of school age outside of the typical school day and school year, to leverage out-of-school time care strategies, and to participate in joint technical assistance opportunities. Resource & Referral agencies offer local school age program options and information to families.*

- p. Agency responsible for emergency management and response. Describe the coordination and results of the coordination: *The CDSS works closely with the California Emergency Medical Services Authority (EMSA) regarding the curriculum and quality of preventive health and safety training for child care providers. The CDSS provides reimbursement funding to R&Rs for both licensed and unlicensed early learning and care providers to assist with costs of pediatric first aid, pediatric cardiopulmonary resuscitation, and EMSA-approved preventive health practices training. The R&R agencies also respond to local disasters, such as wildfires and earthquakes, to assist with local response and recovery efforts. California Health and Safety Training (CHST) R&R project, which are CCDF quality-funded, coordinators are required to provide technical assistance locally to connect providers and families with local disaster plan resources and training. The EMSA have assisted in the collaborative work with CDE and CDSS-CCLD as participants on the State's ongoing Health and Safety Multidisciplinary Regulatory Workgroup committee. The partnership was instrumental in supporting the work of this group in the published California Child Care Disaster Plan 2016, which is a local resource imbedded in the Statewide Interagency Disaster Plan - 2023 that assists local trainers to train early learning and care providers on disaster preparedness as well as recovery and to assist with connecting to local Office of Emergency Services (OES) local procedures. The OES continues to provide the necessary guidance to develop and revise the disaster plan, which serves as an OES annex to the Governor's State Disaster Plan. In response to a shortage of EMSA approved preventive health and safety training opportunities, CDSS provides CCDF-quality grants to seventeen California Preventive Health and Safety Practices (CPHSP) local hubs to provide no cost multilingual training statewide. The University of California, San Francisco School of Nursing is under contract with CDSS and provides R&R training-of-trainer certification and technical assistance to both R&R training staff as well as other local collaborative partners to provide ready access to this state mandated training as well as technical assistance for providing resources to support families experiencing homelessness due to disaster. Local provider training includes preventive topics based on input from local early learning and care based on the CDSS-CCLD reported citations in that locale as well as training on existing local risk factors. Local (CPHSP) hubs staff are also charged with serving as a resource for connection to the local (OES) preparedness and disaster recovery as it related to early learning and care.*
- q. The following are examples of optional partners a Lead Agency might coordinate with to provide services. Check which optional partners the Lead Agency coordinates with and describe the coordination and results of the coordination.
- i. ☐ X State/Territory/local agencies with Early Head Start – Child Care Partnership grants. Describe: *The CDSS, CHSCO, and the Office of Head Start Region IX collaborate with federal, state and local partners to promote the benefits of the Early Head Start – Child Care partnership (EHS-CCP). Through the CHSCO, additional areas of partnering with EHS-CCP recipients and local entities are supported to expand accessibility and continuity of care and to assist families enrolled in Early Head Start to receive full-day services. There are an estimated 17 EHS-CCP recipients in the state of California. The CDE is a state level recipient. The CDE participates in regular coordination and partnership meetings to address opportunities for alignment and improved coordination. The EHS-CCP grant expands the number of high-quality slots for at-risk infants and toddlers in rural California counties. Through this effort the*

grant provides financial support to implement the comprehensive services and bridges the current resource gap needed to reach the high level of quality as defined in QCC and its Rating Matrix. Children receive comprehensive education, health, development, and family support services that meet or exceed EHS standards. Services are available for low-income children birth to 36 months in center-based settings, 48 months in family child care settings, and may include home-based options such as home visiting models/group socialization. Grantee partners develop unique, locally driven models to ensure parity of service throughout their program, including children who are not directly funded through EHS-CC partnership funds. Finally, early learning and care providers gain access to Early Head Start training and technical assistance.

- ii. ☒ *X State/Territory institutions for higher education, including community colleges. Describe: The CDSS collaborates and partners with several institutions of higher education including Yosemite community college, contracted to administer the statewide Child Development Training Consortium (CDTC). This contract supports the Curriculum Alignment Project, the Faculty Professional Development Project, and the Student Career and Education Project. Faculty receive opportunities to engage in current professional development activities to further support students enrolled in child development credit-bearing units for the Child Development Permit. The CDTC offers curriculum development to faculty to ensure community colleges align content and student learning outcomes within a core set of eight courses and offers incentives to the workforce to support progression related to the career lattice. Additionally, CDSS partners with Chabot community college to administer the statewide California Early Childhood Mentor Program. This project works in collaboration with 108 other participating community colleges to support the success of the California Early Childhood Mentorship program. The program provides incentives to director and teacher mentors who partner with workforce members (mentees) working in child care settings including practicum, center-based, family child care and family friend and neighbor settings. The CDSS also has a partnership with the University of California, San Francisco (UCSF) to train regional Resource and Referral leads on Health and Safety standards. The UCSF provide regular opportunities for Resource & Referral (R&R) agencies' staff members to become certified as UCSF-CCHP Preventive Health trainers and provide ongoing technical assistance and support to the network of affiliated trainers. The UCSF-CCHP affiliated network of trainers currently includes over 100 certified trainers who teach the Preventive Health class. The CDSS partners with Fresno State University supporting the Program for Infant and Toddler Care (PITC) to provide academic bearing units for providers participating in PITC Online and in-person training.*
- iii. ☒ *X Other federal, State, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services. Describe: First 5 California provides joint leadership CDE and CDSS for Quality Counts California, California's quality rating and improvement system, and other initiatives that impact child care and development. The Preschool Development Renewal Grant (PDG-R), managed by the California Health and Human Services Agency (CalHHS), supports activities to build capacity of local QCC consortia to assist caregivers*

and providers. The PDG-R funds are utilized to increase the support and capacity of family, friend, and neighbor caregivers, family child care providers, and home-visiting providers to provide quality care for underserved populations. In addition, PDG-R funds were dedicated to help CDSS in improving statewide consumer education supports available to families and providers, including the MyChildCarePlan.org website designed to help California's families find child care services that meet their unique needs.

- iv. ☐ *X* State/Territory agency responsible for implementing the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) programs grant. Describe: *The CDSS administers the CalWORKs Home Visiting Program (HVP), the state's largest home visiting program. Through the HVP CDSS creates and strengthens intentional connections between CCDF eligible families and child development. The CDSS utilizes the HVP to support consumer education for families to ensure that they are aware of their choices and services available to them. As part of administration of the CalWORKs Home Visiting Program, CDSS continues to work with First 5 California, the CDPH Home Visiting Programs, the Oral Health Statewide Program, and the CDE's Homeless Education, and Every Student Succeeds Act, as well as collaborating with other safety net programs housed within CDSS, such as Child Welfare Services. Through extensive internal cross-collaboration meetings and convenings staff work to integrate CCDF efforts across these safety net programs, which was a primary goal of the transition of child care programs to CDSS. Through the HVP, CDSS has and maintains an intentional connection to child development and consumer education.*
- v. ☐ *X* Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment Program. Describe: *The DHCS is the lead agency for Medi-Cal, California's Medicaid program, including Early and Periodic Screening, Diagnostic and Treatment coverage. The CDSS coordinates with the DHCS to ensure that all of the State's R&Rs, direct service contractors, and APP providers are aware of the services provided at the county level, particularly Early and Periodic Screening Diagnosis and Treatment. In addition, the CHSCO participates in various federal, state, and local meetings to share professional development opportunities, resources, local partnerships, and funding opportunities. The CHSCO also serves as a link between HS Funded programs and various state programs to assist HS funded programs in meeting federal requirements for oral and physical health services and parent education, including but not limited to, immunizations, vision and hearing screenings, developmental screenings, infection control, medication administration, and the importance of oral and physical health.*
- vi. ☐ *X* State/Territory agency responsible for child welfare. Describe: *The CDSS is responsible for child welfare and the administration of Child Welfare Services through county welfare departments. The CDSS is responsible for the analysis, development and implementation of statewide policies and procedures, regulations, and intervention strategies related to child protection and early intervention, foster care, and adoption. The CDSS also leads efforts related to child trafficking, and continuum of care reform and processes. The alignment of CCDF programs, supports, and services within CDSS, as the lead agency, facilitates and streamlines services, including access to quality child care, for children and*

families who interact with the child welfare system. The CDSS aims to provide key supports to families prior to the need for foster care in order to reduce the need for out-of-home placements.

- vii. ☒ *X Child care provider groups or associations. Describe: The CDSS coordinates with several provider groups and associations to ensure they are aware of any updates or changes to policies and procedures based on recent legislation and to discuss current early learning and care issues in the field. This is done by participation in regularly scheduled meetings and conferences hosted by the groups and associations. These groups and associations include, but are not limited to, EveryChild California, Thriving Families California (formerly known as California Alternative Payment Program Association), the Service Employees International Union (SEIU), American Federation of State, County and Municipal Employees (AFSCME), the Head Start California Association, the California CCR&R Network, and the CCPU.*
- viii. ☒ *X Parent groups or organizations. Describe: The CDSS coordinates with Parent Voices California and its 15 chapters across the state, including Community Voices in LA county, which is described on its website as "...a parent-led, parent-run grassroots organization fighting to make quality child care accessible and affordable for all families." The CDSS encourages participation from parents in all stakeholder settings. Additionally, Parent Voices has a representative on the ECPC, who chairs the Parent Advisory Committee.*
- ix. ☐ *Title IV B 21st Century Community Learning Center Coordinators. Describe: Click or tap here to enter text.*
- x. ☐ *Other. Describe: Click or tap here to enter text.*

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

Lead Agencies may combine CCDF funds with other Federal, State, and local child care and early childhood development programs, including those in 8.1.1. These programs include preschool programs, Tribal child care programs, and other early childhood programs, including those serving infants and toddlers with disabilities, children experiencing homelessness, and children in foster care.

Combining funds may include blending multiple funding streams, pooling funds, or layering funds from multiple funding streams to expand and/or enhance services for infants, toddlers, preschoolers, and school-age children and families to allow for the delivery of comprehensive quality care that meets the needs of children and families. For example, Lead Agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a Lead Agency may allow a county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start Program Performance

Standards or State/Territory pre-Kindergarten requirements in addition to State/Territory child care licensing requirements.

As a reminder, CCDF funds may be used in collaborative efforts with Head Start and Early Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs.

8.2.1 Combining funding for CCDF services

Does the Lead Agency combine funding for CCDF services with Title XX of the Social Services Block Grant (SSBG), Title IV B 21st Century Community Learning Center Funds, State-only child care funds, TANF direct funds for child care not transferred into CCDF, Title IV-B, IV-E funds, or other federal or State programs?

☐ No. (If no, skip to question 8.2.2)

☒ Yes.

i. If yes, describe which funds you will combine. Combined funds may include, but are not limited to:

☒ Title XX (Social Services Block Grant, SSBG)

☐ Title IV B 21st Century Community Learning Center Funds (Every Student Succeeds Act)

☒ State- or Territory-only child care funds

☒ TANF direct funds for child care not transferred into CCDF

☐ Title IV-B funds (Social Security Act)

☒ Title IV-E funds (Social Security Act)

☐ Other. Describe: [Click or tap here to enter text.](#)

ii. If yes, what does the Lead Agency use combined funds to support, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care, or developing the supply of child care for vulnerable populations? *The California Department of Social Services utilizes all fund sources to maximize the availability of quality services for as many eligible children as possible. The lead agency maximizes available resources to support programs for working families, smooth transitions for children, enhance and align the quality of services, link comprehensive services to children in early learning and care, and develop the supply of early learning and care for vulnerable populations. California would need to receive additional funds to serve all eligible children and ensure the quality level has the components associated with improved child learning and well-being.*

8.2.2 Funds used to meet CCDF matching and MOE requirements

Lead Agencies may use public funds and donated funds to meet CCDF match and maintenance of effort (matching MOE) requirements.

Note: Lead Agencies that use State pre-Kindergarten funds to meet matching requirements must check State pre-Kindergarten funds and public and/or private funds.

Use of private funds for match or maintenance-of-effort: Donated funds do not need to be under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies must identify and designate in the State/Territory CCDF Plan the donated funds given to public or private entities to implement the CCDF child care program.

☐ Not applicable. The Lead Agency is a Territory (skip to 8.3.1).

a. Does the Lead Agency use public funds to meet match requirements?

☐ *X* Yes. If yes, describe which funds are used: *State General Funds*

☐ No.

b. Does the Lead Agency use donated funds to meet match requirements?

☐ Yes. If yes, identify the entity(ies) designated to receive donated funds:

i. ☐ Donated directly to the state.

ii. ☐ Donated to a separate entity(ies) designated to receive donated funds. If checked, identify the name, address, contact, and type of entities designated to receive private donated funds: *Click or tap here to enter text.*

☐ *X* No.

c. Does the Lead Agency certify that, if State expenditures for pre-Kindergarten programs are used to meet the MOE requirements, the following is true:

- The Lead Agency did not reduce its level of effort in full-day/full-year child care services.
- The Lead Agency ensures that pre-Kindergarten programs meet the needs of working parents.
- The estimated percentage of the MOE requirement that will be met with pre-Kindergarten expenditures (does not to exceed 20 percent).
- If the percentage is more than 10 percent of the MOE requirement, the State will coordinate its pre-Kindergarten and child care services to expand the availability of child care.

Public pre-Kindergarten funds may also serve as MOE funds as long as the State can describe how it will coordinate pre-Kindergarten and child care services to expand the availability of child care while using public pre-Kindergarten funds as no more than 20 percent of the State's MOE or 30 percent of its matching funds in a single fiscal year.

If expenditures for pre-Kindergarten services are used to meet the MOE requirement, does the Lead Agency certify that the State or Territory has not reduced its level of effort in full-day/full-year child care services?

☐ Yes.

☐ *X* No. If no, describe: *The Lead Agency does not use match funds for pre-kindergarten programs as these programs are administered by California Department of Education and apply eligibility and other policies that are not consistent with Child Care Development Fund funding rules.*

8.3 Coordination with Child Care Resource and Referral Systems

Lead Agencies may use CCDF funds to establish or support a system or network of local or regional child care resource and referral (CCR&R) organizations that is coordinated, to the extent determined by the Lead Agency, by a statewide public or private non-profit, community-based or

regionally based, lead child care resource and referral organization (such as a statewide CCR&R network).

If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency:

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

8.3.1 Funding a system or network of CCR&R organization(s)

Does the Lead Agency fund a system or network of local or regional CCR&R organization(s)?

- ☐ No. The Lead Agency does not fund a system or network of local or regional CCR&R organization(s) and has no plans to establish one.
- ☐ No, but the Lead Agency has plans to develop a system or network of local or regional CCR&R organization(s).
- ☒ *Yes. The Lead Agency funds a system or network of local or regional CCR&R organization(s) with all the responsibilities outlined above. If yes, describe the activities outlined above carried out by the CCR&R organization(s), as directed by the Lead Agency: California has a non-profit statewide resource and referral organization, the California Child Care Resource and Referral Network (CCCR&R), and one or more Child Care R&R service providers in each of California's 58 counties, some counties having more than one child care R&R. The California Department of Social Services (CDSS) funds and contracts these entities through 68 R&R contracts at 57 agencies in the network. These agencies are primarily non-profit or Offices of Education. The California Child Care Resource and Referral Network (CCCR&R) coordinates, supports, and organizes the local child care R&R's working with CDSS. These state contracted local community-based organizations and Offices of Education help families, regardless of income, find child care that best meets their needs, provide consumer education, recruit and train child care providers, and collect data from parents and child care providers. The R&Rs provide a variety of services to parents seeking care, to providers seeking professional development and incentives for remaining in the profession, and to communities seeking support for their youngest residents, including working to expand the supply of services as needed. There is*

8.4 Public-Private Partnerships

Lead Agencies must demonstrate how they encourage partnerships among other public agencies, Tribal organizations, private entities, faith-based organizations, businesses, or organizations that promote business involvement, and/or community-based organizations to leverage existing service delivery (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation) to leverage existing child care and early education service delivery systems and to increase the supply and quality of child care services for children younger than age 13.

8.4.1 Lead Agency public-private partnerships

Identify and describe any public-private partnerships encouraged by the Lead Agency to leverage public and private resources to further the goals of CCDF: *Transforming the early childhood system—will take time, intentionality through purposeful changes in the system, and significant resources—supported through public investments, business contributions, and philanthropy. The California Department of Social Services (CDSS) seeks to leverage public and private resources to further the goals of the Child Care and Development Block Grant Act. Our partnerships with local governments, housing/community development agencies, and developers can bring additional quality and ample resources to ensure we build a comprehensive and equitable early learning and care system over the next decade. The David and Lucile Packard Foundation awarded CDSS a \$60,000 grant to aid in CDSS’ development of strategic frameworks that are informed by Child Care and Development Division (CCDD) staff. These funds were used by CCDD to develop an internal framework for organizational structure and an external framework for stakeholder outreach. Other CDSS partnerships with philanthropy include \$2.9 million in public-private funding committed to by the David and Lucile Packard Foundation and Heising-Simons Foundation. A portion of these investments has been directed towards the creation of a Consumer Education website, which is a merger of our existing child care search website and various local resource and referral information into a single site. The website will serve parents, providers/licensees, and the state needs to ensure access to quality child care and policy related information. The CDSS is using this funding to contract these services with the California Child Care Resource & Referral Network (The Network). Our partnership with Heising-Simons is also supporting our Subsidized Provider Reports (SPR) efforts to streamline our data collection. These partnerships also support our work in the development of internal and external frameworks with Center for Law And Social Policy on presumptive eligibility. Another partnership CDSS has is with New Venture Fund, and this partnership supports our collaboration with the Child Care Law Center as a consultant on our efforts towards Rate Reform. Our partnerships expand beyond just financial investments as CDSS meets regularly with both private and public organizations regarding our commonly shared goals for the early learning and care system.*

8.5 Disaster Preparedness and Response Plan

Lead Agencies must establish a Statewide Child Care Disaster Plan and demonstrate how they will address the needs of children—including the need for safe child care before, during, and after a state of emergency declared by the Governor or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122)—through a Statewide Disaster Plan.

8.5.1 Statewide Disaster Plan updates

- a. When was the Lead Agency’s Child Care Disaster Plan most recently updated and for what reason? *The California Department of Social Services (CDSS), in partnership with other state agencies, wrote the California Statewide Interagency Childcare Disaster Plan – 2020 to meet areas of non-compliance. The existing California Child Care Disaster Plan 2016 fell short in describing the collaboration between partner agencies at the state and local levels. The new plan describes the relationship of the existing Childcare Disaster Plan 2016 within the context of the new Statewide Interagency Childcare Disaster Plan – 2020. This was needed to ensure the plan was developed in collaboration with other state and local partners and that it met the requirements to demonstrate how child care services would be provided before, during and after an emergency or disaster. Since the transition of child care and development programs from California Department of Education (CDE) to CDSS, in July 2021, processes needed to be updated again, resulting in the most recent*

Statewide Interagency Child Care Disaster Plan 2023. Specifically, the Statewide Interagency Child Care Disaster Plan – 2023, focuses on three main sections. The first section is “Before = Preparedness” plan, including how the California Child Care Disaster Plan 2016 is used at the local level to support providers in establishing the required procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodations of infants and toddlers, children with disabilities, and children with chronic medical conditions. Additionally, this section now includes current Health and Safety Codes and Licensing Regulations for licensed child care centers and family child care homes to demonstrate how the state meets the requirements for Procedures for staff and volunteer emergency preparedness training and practice drills, including training requirements for child care providers. In the second section, “During = Communication” plan, the plan describes in detail the roles and responsibilities of local and state-level child care entities during state of emergency, the communication system for temporary operating standards, continuation of payment, expedited background checks and other adjustment of state requirements for child care during a state of emergency, and data and information gathering systems among local and state agencies to meet local need for emergency supplies to maintain child care. In section three of the plan, “After = Recovery”, the plan includes the processes for ensuring the continuity of services after the emergency. Finally, the state added several attachments, including Child Care State Agency Partners and Contact Information, State Agency Communication Flow Chart, Licensing Status Update Data Points via SharePoint, Report to Region IX Administration for Children and Families, and an appendix, which includes relevant links to California Code of Regulations and Health and Safety Code that was referenced within the document. Finally, the California Statewide Interagency Child Care Disaster Plan provides updated information on the Everbridge automated emergency notification system. During an emergency or disaster, CDSS-Child Care and Development Division activates the Everbridge system. Everbridge determines which licensed care facilities are impacted and can access information from those facilities through a mass notification process using the most current contact information on file (text, email, phone). The system allows for quick status response and helps determine which facilities have immediate needs. The use of Everbridge has dramatically reduced the number of direct phone calls to facilities and improves response time and efficient communication and collaboration between state agencies responsible for child care.

- b. Please certify compliance by checking the required elements the Lead Agency includes in the current State Disaster Preparedness and Response Plan.
- i. The plan was developed in collaboration with the following required entities:
- ☒ X State human services agency.
 - ☒ X State emergency management agency.
 - ☒ X State licensing agency.
 - ☒ X State health department or public health department.
 - ☒ X Local and State child care resource and referral agencies.
 - ☒ X State Advisory Council on Early Childhood Education and Care or similar coordinating body.

- ii. ☒ X The plan includes guidelines for the continuation of child care subsidies.
- iii. ☒ X The plan includes guidelines for the continuation of child care services.
- iv. ☒ X The plan includes procedures for the coordination of post-disaster recovery of child care services.
- v. ☒ X The plan contains requirements for all CCDF providers (both licensed and license-exempt) to have in place:
 - ☒ X Procedures for evacuation.
 - ☒ X Procedures for relocation.
 - ☒ X Procedures for shelter-in-place.
 - ☒ X Procedures for communication and reunification with families.
 - ☒ X Procedures for continuity of operations.
 - ☒ X Procedures for accommodations of infants and toddlers.
 - ☒ X Procedures for accommodations of children with disabilities.

☐ *X* Procedures for accommodations of children with chronic medical conditions.

- vi. ☐ *X* The plan contains procedures for staff and volunteer emergency preparedness training.
- vii. ☐ *X* The plan contains procedures for staff and volunteer practice drills.
- viii. If any of the above are not checked, describe: [Click or tap here to enter text.](#)
- ix. If available, provide the direct URL/website link to the website where the Statewide Child Care Disaster Plan is posted: [Statewide Interagency Child Care Disaster Plan 2023](#)

9 Family Outreach and Consumer Education

CCDF consumer education requirements facilitate parental choice in child care arrangements, support parents as child care consumers who need information to make informed choices regarding the services that best suit their family's needs, and the delivery of resources that can support child development and well-being. Lead Agency consumer education activities must provide information for parents receiving CCDF assistance, the general public, and, when appropriate, child care providers. Lead Agencies should use targeted strategies for each group to ensure tailored consumer education information and take steps to ensure they are effectively reaching all individuals, including those with limited English proficiency and those with disabilities.

In this section, Lead Agencies address their consumer education practices, including details about their child care consumer education website, and the process for collecting and maintaining a record of parental complaints.

9.1 Parental Complaint Process

Lead Agencies must maintain a record of substantiated parental complaints against child care providers and make information regarding such complaints available to the public on request. Lead Agencies must also provide a detailed description of the hotline or similar reporting process for parents to submit complaints about child care providers; the process for substantiating complaints; the manner in which the Lead Agency maintains a record of substantiated parental complaints; and ways that the Lead Agency makes information on such parental complaints available to the public on request. Lead Agencies are not required to limit the complaint process to parents.

9.1.1 Parental complaint process

- a. Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process: *For licensed child care providers, any person can submit a complaint to the Central Complaint and Information Bureau (CCIB), an office of California Department of Social Services' (CDSS') Community Care Licensing Division (CCLD), by calling the CCLD Complaint Hotline at 1-844-LET-US-NO (538-8766) or by emailing LetUsNo@dss.ca.gov. The CCIB intakes complaints for licensed facilities and disseminates them to the appropriate licensing regional office for investigation and response. More information regarding the CCLD Complaint Hotline can be found at:*

(<https://www.cdss.ca.gov/inforesources/cclcd-complaint-hotline>). Parents/guardians of children in licensed child care have the right to be informed that they may file a complaint. Licensed providers are required to provide parents/guardians with a form as part of enrollment to notify them of the CCLD contact information for complaint purposes. Licensed providers are required to post this information in a public location of the facility. California received a preliminary notice of non-compliance from the Office of Child Care on December 13, 2021, for this provision in relation to license-exempt providers and needs additional time to meet the requirement. The CDSS is exploring how to meet these requirements for the license-exempt family, friend and neighbor providers taking into consideration the recommendations of the 2019 Assembly Blue Ribbon Commission, the 2020 Master Plan and the priorities of the Department to focus on the equitable treatment of these providers.

- b. Describe how the parental complaint process ensures broad access to services for families that speak languages other than English: *The CCIB uses Focus Language International, Inc. a translation vendor that provides telephone-based interpretation services. We also have two Spanish bilingual analysts who handle complaints and provide general licensing information for Spanish-speaking complainants. Callers can hear a choice of either an English or Spanish telephone greeting and menu options when calling CCIB.*
- c. Describe how the parental complaint process ensures broad access to services for persons with disabilities: *The CCIB offers a variety of ways to file a complaint. Complaints can be submitted by email, letter, telephone, fax, or through the online complaint web page. Individuals can also file a complaint in person at the applicable Regional Office. We accept phone calls sent with teletypewriter's telecommunication devices for the deaf. The CCLD web site follows accessibility guidelines so people can more easily navigate through the site. Additionally, CCIB staff have received training about the range of individuals served in child day care facilities and provide customer service to accommodate a broad variety of individuals, including individuals with disabilities.*

- d. For complaints about providers, including CCDF providers and non-CCDF providers, does the Lead Agency have a process and timeline for screening, substantiating, and responding to complaints, including information about whether the process includes monitoring?

☒ *X Yes. If yes, describe: For licensed child care providers (regardless of whether a Child Care Development Fund (CCDF) or non-CCDF provider), the CDSS' CCLD has specified processes for screening, substantiating, and responding to complaints. Upon receipt of a complaint, the CCLD conducts a preliminary review. The CCLD will conduct an onsite inspection within 10 calendar days after receiving the complaint, except where the visit would adversely affect the licensing investigation or the investigation by other agencies including, but not limited to, law enforcement agencies. In either event, the complainant must be promptly informed of the CCLD's proposed course of action. During an investigation, CCLD has the authority to inspect the facility; inspect, audit, and copy child or facility records; and interview children (including observing their physical condition, which could indicate child abuse, neglect or inappropriate placement) or interview staff. If CCLD determines that the complaint allegation occurred, the allegation will be substantiated and CCLD will take appropriate action. There are no differences in processes or timelines for CCDF and non-CCDF licensed providers regarding screening, substantiating, and responding to complaints. For child care facilities that are challenged with maintaining compliance issues, monitoring may occur more frequently after an informal meeting with the licensee. For license-exempt programs run by local educational agencies (LEAs), the LEAs have a Uniform Complaint Process (UCP). All UCP complaints received by CDSS are logged and tracked on a database. Complaints pertaining to CCDF-funded programs are investigated, which includes interviews with complainant and the license-exempt voucher provider. Evidentiary documents are collected, reviewed, and a final determination on whether the allegations have merit or not is made. The final letter will include whether CDSS determined the agency to be compliant or non-compliant. If the agency is determined to be non-compliant, CDSS will notify complainants and the contractors in writing. The CDSS direct service contractor may also be required to submit a corrective action plan that will be monitored by the assigned consultant. California received a preliminary notice of non-compliance from the Office of Child Care (OCC) on December 13, 2021, for this provision in relation to license-exempt providers and needs additional time to meet the requirement. The CDSS is conducting a full analysis of how to meet these requirements for license-exempt family, friend and neighbor caregivers, including processes and timelines for screening, substantiating, and responding to complaints.*

☐ No.

- e. For substantiated parental complaints, who maintains the record for CCDF and non-CCDF providers? *For licensed child care providers, CCLD maintains records of substantiated complaints in hard copy and electronic formats. There are no differences in CCLD's procedures for maintaining records of substantiated complaints between CCDF and non-CCDF providers. In programs operated by programs run by LEAs, if a parent has a complaint regarding program operations that are exempt from licensing requirements, the parent must utilize the UCP established by the LEA. Records of*

substantiated complaints are kept by the LEA. The UCP complaint records, including those regarding providers exempt from licensure, are maintained in a database maintained by CDSS. California received a preliminary notice of non-compliance from the OCC on December 13, 2021, for this provision in relation to license-exempt providers and needs additional time to meet the requirement. The CDSS is conducting a full analysis of how to meet these requirements for license-exempt family, friend and neighbor providers including a full analysis of UCP to develop an appropriate process for maintaining a record of substantiated parental complaints.

- f. Describe how information about substantiated parental complaints is made available to the public; this information can include the consumer education website discussed in subsection 9.2: *For licensed child care facilities (regardless of whether a CCDF or non-CCDF provider), CDSS' CCLD makes information about substantiated complaints (which may be made to the CDSS by anyone concerned, including parents) available to the public for at least the previous five years on the [Child Care Facility Search](#) webpage, over-the-phone by calling to request a file review from the local licensing regional office, or in-person by visiting the local licensing regional office. Licensed facilities are responsible for posting substantiated complaint investigation reports in a public location in the facility and furnishing a copy of the reports to parents with acknowledgements signed by parents to confirm receipt. In license-exempt programs operated by LEAs, if a parent has a complaint regarding program operations not covered by licensing requirements, the parent must utilize UCP established by the LEA. Records of substantiated complaints are kept by the LEA. The UCP complaint records, including those regarding providers exempt from licensure, are maintained in a database maintained by CDSS. In addition, Oliver's Law (AB 458, Statutes of 1999) requires every child care resource and referral program and every alternative payment program to advise every person who requests a child care referral of their right to the licensing information of a licensed child day care facility required to be maintained at the facility, and to access any public files pertaining to the facility that are maintained by the CDSS. MyChildCarePlan.org (MCCP) includes information regarding the complaint process and how to access the CDSS [Child Care Facility Search](#). California received a preliminary notice of non-compliance from the OCC on December 13, 2021, for this provision in relation to license-exempt providers and needs additional time to meet the requirement. The CDSS, is conducting a full analysis of how to meet these requirements for license-exempt family, friend and neighbor providers including a full analysis of the how to make information about substantiated complaints available to the public.*

9.2 Consumer Education Website

Lead Agencies must provide information to parents, the general public, and child care providers through a State or Territory website, which is consumer-friendly and easily accessible for families who speak languages other than English and persons with disabilities. The website must:

- Include information to assist families in understanding the Lead Agency's policies and procedures, including licensing child care providers;
- Include monitoring and inspection reports for each provider and, if available, the quality of each provider;

- Provide the aggregate number of deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings;
- Include contact information for local CCR&R organizations to help families access additional information on finding child care; and
- Include information on how parents can contact the Lead Agency and other organizations to better understand the information on the website.

9.2.1 Consumer-friendly website

Does the Lead Agency ensure that its consumer education website is consumer-friendly and easily accessible?

- i. Provide the URL for the Lead Agency's consumer education website homepage:
<https://mychildcareplan.org/>; <https://www.cdss.ca.gov/inforesources/child-care-licensing>; <https://www.cdss.ca.gov/Portals/9/Additional-Resources/Research-and-Data/DSSDS/Child%20Care%20Facility%20Fatality%20Data.pdf>; and <https://www.cdss.ca.gov/inforesources/community-care-licensing/facility-search-welcome>
- ii. Does the Lead Agency certify that the consumer education website ensures broad access to services for families who speak languages other than English?
☐ *X* Yes.
☐ No. If no, describe: [Click or tap here to enter text.](#)
- iii. Does the Lead Agency certify that the consumer education website ensures broad access to services for persons with disabilities?
☐ *X* Yes.
☐ No. If no, describe: [Click or tap here to enter text.](#)

9.2.2 Additional consumer education website links

Provide the direct URL/website link for the following:

- i. Provide the direct URL/website link to how the Lead Agency licenses child care providers: [*The California Department of Social Services \(CDSS\) Child Care Licensing Program*](#) webpage, for “Do I Need A License”, contains user-friendly resources, including an easy-to-watch video [*Understanding Licensed Care and License-exempt Care*](#). The [*How to Become Licensed*](#) webpage includes a one-page document entitled “What is licensed exempt care?”, which outlines exemptions from licensing requirements for certain providers. The [*Public Information and Resources*](#) webpage provides a written overview for licensing, compliance, and enforcement of licensed child day care facilities. In addition, the Webpage has links to relevant information (e.g., laws and regulations) and a video entitled [*An Overview of Community Care Licensing*](#). Additionally, the [*Becoming a Family Child Care Provider*](#) can be found on the [*My Child Care Plan Resources*](#) webpage.
- ii. Provide the direct URL/website link to the processes for conducting monitoring and inspections of child care providers: [*The Child Care Licensing Program Public Information and Resources*](#) webpage provides a written overview for licensing, compliance and enforcement of licensed child day care facilities. In addition, the webpage has links to relevant information (e.g., laws and regulations) and a video entitled “An Overview of Community Care Licensing”. The [*MyChildCarePlan.org*](#) website also provides [*Licensing and Safety Resources*](#).
- iii. Provide the direct URL/website link to the policies and procedures related to criminal background checks for staff members of child care providers: [*The Care Provider Management Webpage for Background check processes*](#) provides a written overview of policies and procedures for prospective child care licensees, providers, and staff. In addition, the Webpage has links to relevant information and FAQs. This webpage can also be accessed on the [*MyChildCarePlan.org*](#) webpage. [*Health and Safety Code section 1596.871\(b\)\(1\)*](#) addresses criminal record checks for prospective TrustLine providers, licensed child care providers, and staff in licensed child care facilities.
- iv. Provide the direct URL/website link to the offenses that prevent individuals from being employed by a child care provider: [*There is a Non-exemptible crimes list on CDSS’ Care Provider Management Branch Background Check Process webpage.*](#)

9.2.3 Searchable list of providers

- a. The consumer education website must include a list of all licensed providers searchable by ZIP code.
 - i. Does the Lead Agency certify that the consumer education website includes a list of all licensed providers searchable by ZIP code?
☐ Yes.

☐ *X* No. If no, describe: *Health and Safety Code section 1596.86(b) protects the confidentiality of licensed small family day care home names, addresses, and identifying information. However, consumers may obtain information about small family day care homes in their area by contacting a California Department of Social Services (CDSS) Community Care Licensing Division (CCLD) Child Care Licensing Program Regional Office or the Resource and Referral Network or by searching the MyChildCarePlan.org website.*

ii. Provide the direct URL/website link to the list of child care providers searchable by ZIP code: *For a list of licensed child care centers and large family child care home providers searchable by ZIP code, please visit either the <https://mychildcareplan.org/> website or CDSS' [Child Care Facility Search](#) webpage.*

iii. In addition to the licensed child care providers that must be included in the searchable list, are there additional providers included in the Lead Agency's searchable list of child care providers? Check all that apply:

☐ *X* License-exempt center-based CCDF providers.

☐ License-exempt family child care CCDF providers.

☐ *X* License-exempt non-CCDF providers.

☐ Relative CCDF child care providers.

☐ Other (e.g., summer camps, public pre-Kindergarten). Describe: *[Click or tap here to enter text.](#)*

- b. Identify what additional (optional) information, if any, is available in the searchable results by ZIP code. Check the box when information is provided.

Provider Information Available in Searchable Results					
	All licensed providers	License-exempt CCDF center-based providers	License-exempt CCDF family child care home providers	License-exempt non-CCDF providers	Relative CCDF providers
Contact information	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/> X	<input type="checkbox"/>
Enrollment capacity	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/> X	<input type="checkbox"/>
Hours, days, and months of operation	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/> X	<input type="checkbox"/>
Provider education and training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Languages spoken by the caregiver	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/> X	<input type="checkbox"/>
Quality information	<input type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monitoring reports	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to accept CCDF certificates	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ages of children served	<input type="checkbox"/> X	<input type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/> X	<input type="checkbox"/>
Specialization or training for certain populations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care provided during nontraditional hours	<input type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- c. Identify any other information searchable on the consumer education website for the child care provider type listed below and then, if checked, describe the searchable information included on the website.
- ☐ X All licensed providers. Describe: *Enrollment availability, transportation services, meals offered, Special Needs experience (yes/no), program descriptions.*
 - ☐ X License-exempt CCDF center-based providers. Describe: *Enrollment availability, transportation services, meals offered, Special Needs experience (yes/no), program descriptions.*
 - ☐ License-exempt CCDF family child care providers. Describe: *Click or tap here to enter text.*
 - ☐ X License-exempt, non-CCDF providers. Describe: *Enrollment availability, transportation services, meals offered, Special Needs experience (yes/no), program*

descriptions.

- v. ☐ Relative CCDF providers. Describe: *Click or tap here to enter text.*
- vi. ☐ Other. Describe: *Click or tap here to enter text.*

9.2.4 Provider-specific quality information

Lead Agencies must identify specific quality information on each child care provider for whom they have this information. Provider-specific quality information must only be posted on the consumer education website if it is available for the individual child care provider.

- a. What specific quality information does the Lead Agency provide on the website?
 - i. ☒ X Quality improvement system.
 - ii. ☒ X National accreditation.
 - iii. ☒ X Enhanced licensing system.
 - iv. ☒ X Meeting Head Start/Early Head Start Program Performance Standards.
 - v. ☒ X Meeting pre-Kindergarten quality requirements.
 - vi. ☒ X School-age standards.
 - vii. ☐ Quality framework or quality improvement system.
 - viii. ☐ Other. Describe: [Click or tap here to enter text.](#)
- b. For what types of child care providers is quality information available?
 - i. ☒ X Licensed CCDF providers. Describe the quality information: [Rating elements include Child Observation, Developmental and Health Screenings, Minimum Qualifications for Lead Teacher/Family Child Care Home Provider, Effective Teacher-Child Interactions, Ratios and Group Size, Program Environment, and Director Qualifications.](#)
 - ii. ☒ X Licensed non-CCDF providers. Describe the quality information: [Rating elements include Child Observation, Developmental and Health Screenings, Minimum Qualifications for Lead Teacher/Family Child Care Home Provider, Effective Teacher-Child Interactions, Ratios and Group Size, Program Environment, and Director Qualifications.](#)
 - iii. ☐ License-exempt center-based CCDF providers. Describe the quality information: [Click or tap here to enter text.](#)
 - iv. ☐ License-exempt FCC CCDF providers. Describe the quality information: [Click or tap here to enter text.](#)
 - v. ☐ License-exempt non-CCDF providers. Describe the quality information: [Click or tap here to enter text.](#)
 - vi. ☐ Relative child care providers. Describe the quality information: [Click or tap here to enter text.](#)
 - vii. ☐ Other. Describe: [Click or tap here to enter text.](#)

9.2.5 Aggregate data on serious injuries, deaths, and substantiated abuse

Lead Agencies must post aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year on the consumer education

website. This aggregate data must include information about any child in the care of a provider eligible to receive CCDF, not just children receiving subsidies.

This aggregate information on serious injuries and deaths must be separated by category of care (e.g., centers, family child care homes, and in-home care) and licensing status (i.e., licensed or license-exempt) for all eligible CCDF child care providers in the State/Territory. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. Information must also include the total number of children in care by provider type and licensing status, so that families can better understand the data presented on serious injuries, deaths, and substantiated cases of abuse.

- a. Certify by checking below that the required elements are included in the Aggregate Data Report on serious incident data that have occurred in child care settings each year.
 - i. ☐ The total number of serious injuries of children in care by provider category and licensing status.
 - ii. ☐ ☒ The total number of deaths of children in care by provider category and licensing status.
 - iii. ☐ The total number of substantiated instances of child abuse in child care settings.
 - iv. ☐ The total number of children in care by provider category and licensing status.
 - v. If any of the above elements are not included, describe: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Currently the Community Care Licensing Division (CCLD) Child Care Licensing Program does not have sufficient data systems to collect and post an aggregate data report regarding serious injuries or substantiated instances of child abuse that includes the total number of children in care by provider category/licensing status. The CCLD is currently updating its data functionality through its Facility Management System (FMS) project which is tentatively anticipated to be completed by October 2026.*
- b. Certify by providing:
 - i. The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care and describe how the Lead Agency obtains the aggregate data from the entity: *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. Licensed child care facilities submit reports of injuries or deaths to their local CCLD Child Care Licensing Regional Office that provides licensing oversight for the respective facility. The CCLD is currently updating its data functionality through its FMS project which is tentatively anticipated to be completed by October 2026.*
 - ii. The definition of “substantiated child abuse” used by the Lead Agency for this requirement: *For licensed providers, "substantiated child abuse" includes physical injury inflicted upon a child by another person by other than*

accidental means, sexual abuse as defined in Penal Code section 11165.1, neglect as defined in Penal Code section 1165.2, or unlawful corporal punishment or injury as defined in Penal Code Section 11165.4, when the person responsible for the child's welfare is a licensee, administrator, or employee of any facility licensed to care for children, or an administrator or employee of a public or private school or other institution or agency. (See Health and Safety Code sections 1596.99(f)(2) and 1597.58(f)(2).)

- iii. The definition of "serious injury" used by the Lead Agency for this requirement: *For licensed providers, "serious injury" includes serious impairment of physical condition, including, but not limited to loss of consciousness, concussion, bone fracture, protracted loss or impairment of function of any bodily member or organ, a wound requiring extensive suturing, and serious disfigurement. (See California Health and Safety Code section 1596.8865(d).)*

- c. Provide the direct URL/website link to the page where the aggregate number of serious injuries, deaths, and substantiated child abuse, and the total number of children in care by provider category and licensing status are posted. *California received a preliminary notice of non-compliance from Office of Child Care (OCC) on May 8, 2024, for this provision. The CDSS needs additional time to develop an implementation plan and may seek technical assistance from OCC. The CDSS-CCLD Child Care Licensing Program does not have sufficient data systems to collect and post information regarding serious injuries or substantiated instances of child abuse for licensed child care facilities. However, the licensed facility inspection reports include this information at the facility level and is provided to the public on the Child Care Transparency webpage on the CDSS' website at: the CDSS CCLD <https://www.cclld.dss.ca.gov/carefacilitysearch/> Facility Search Welcome Page. The CCLD is currently updating its data functionality through its FMS project which is tentatively anticipated to be completed by October 2026. The aggregate data for reports regarding deaths in licensed facilities may be found at: <https://www.cdss.ca.gov/Portals/9/Additional-Resources/Research-and-Data/DSSDS/Child%20Care%20Facility%20Fatality%20Data.pdf>.*

9.2.6 Contact information on referrals to local child care resource and referral organizations

The Lead Agency consumer education website must include contact information on referrals to local CCR&R organizations.

- a. Does the consumer education website include contact information on referrals to local CCR&R organizations?
 - ☒ X Yes.
 - ☐ No.
 - ☐ Not applicable. The Lead Agency does not have local CCR&R organizations.
- b. Provide the direct URL/website link to this information: *Each of the following links provide information and resources about local resource and Referral Agencies: the Consumer Education website [MyChildCarePlan.org](https://www.mychildcareplan.org), and California Department of Social Services; [Resources for Parents](#), [Resources for Providers](#).*

9.2.7 Lead Agency contact information for parents

The Lead Agency consumer and provider education website must include information on how parents can contact the Lead Agency or its designee and other programs that can help the parent understand information included on the website.

- a. Does the website provide directions on how parents can contact the Lead Agency or its designee and other programs to help them understand information included on the website?
 - ☐ Yes.
 - ☒ No.
- b. Provide the direct URL/website link to this information: <https://mychildcareplan.org/contact/>

9.2.8 Posting sliding fee scale, co-payment amount, and policies for waiving co-payments

The consumer education website must include the sliding fee scale for parent co-payments, including the co-payment amount a family may expect to pay and policies for waiving co-payments.

- a. Does the Lead Agency certify that their consumer education website includes the sliding fee scale for parent co-payments, including the co-payment amount a family may expect to pay and policies for waiving co-payments?
 - ☐ Yes.
 - ☒ No.
- b. Provide the direct URL/website link to the sliding fee scale. *Not applicable at this time. California is working with the vendor for maintenance of the Mychildcareplan.org website to provide this information by October 1, 2024.*

9.3 Increasing Engagement and Access to Information

Lead Agencies must collect and disseminate information about the full range of child care services to promote parental choice to parents of children eligible for CCDF, the general public, and child care providers.

9.3.1 Information about CCDF availability and eligibility

Describe how the Lead Agency shares information with eligible parents, the general public, and child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible. The description should include, at a minimum, what is provided (e.g., written materials, the website, and direct communications) and what approaches are used to tailor information to parents, the general public, and child care providers. *The California Department of Social Services has a toll-free number for those that are seeking child care services. Seekers can speak to an information specialist who can answer general child care questions or connect seekers with their local resource and referral agency (available in English and Spanish) 1-800-KIDS-793. Additionally, there is an online consumer website that is available at <https://mychildcareplan.org/> to support consumer education services. Based on the callers need, callers may expect to receive general child care information, or information specialist may connect callers to local resource and referral agencies. At the local level, agencies that contract with the lead agency also have contractual requirements to share information with eligible parents, the general public, and child care providers about the availability of child care services. Per California*

Code of Regulations, Title 5, Section 18277, each contractor shall include in its program a community involvement component which shall include, but not be limited to providing information to the community regarding the services available. Contractors may utilize media or other forms of communication in the community.

9.3.2 Information about child care and other services available for parents

Does the Lead Agency certify that it provides information described in 9.3.1 for the following required programs?

- Temporary Assistance for Needy Families (TANF) program.
- Head Start and Early Head Start programs.
- Low Income Home Energy Assistance Program (LIHEAP)

- Supplemental Nutrition Assistance Program (SNAP).
- Women, Infants, and Children Program (WIC) program.
- Child and Adult Care Food Program (CACFP).
- Medicaid and Children's Health Insurance Program (CHIP).
- Programs carried out under IDEA Part B, Section 619 and Part C.

☐ *X* Yes.

☐ No. If no, describe: [Click or tap here to enter text.](#)

9.3.3 Consumer statement for parents receiving CCDF services

Lead Agencies must provide parents receiving CCDF services with a consumer statement in hard copy or electronically that contains general information about the CCDF program and specific information about the child care provider they select.

Please certify if the Lead Agency provides parents receiving CCDF services a consumer statement that contains the following 8 requirements:

1. Health and safety requirements met by the provider
2. Licensing or regulatory requirements met by the provider
3. Date the provider was last inspected
4. Any history of violations of these requirements
5. Any voluntary quality standards met by the provider
6. How CCDF subsidies are designed to promote equal access
7. How to submit a complaint through the hotline
8. How to contact a local resource and referral agency or other community-based organization to receive assistance in finding and enrolling in quality child care

Does the Lead Agency provide to families, either in hard copy or electronically, a consumer statement that contains the required information about the provider they have selected, including the eight required elements above?

☐ *X* Yes.

☐ No. If no, describe: [Click or tap here to enter text.](#)

9.3.4 Informing families about best practices on child development

Describe how the Lead Agency makes information available to parents, providers, and the general public on research and best practices concerning children's development, including physical health and development, and information about successful parent and family engagement. At a minimum, the description should include what information is provided; how the information is provided; any distinct activities for sharing this information with parents, providers, the general public; and any partners in providing this information. *The California Department of Social Services' (CDSS') Child Care and Development Division (CCDD) hosts monthly contractor meetings. This meeting series is open to CCDD contractors and is intended to be a space to discuss contracts,*

funding, provide guidance and information to the field, and respond to questions and concerns. Also, the California Child Care Resource & Referral (R&R) Network along with CDSS host a monthly webinar for R&R members to provide programmatic, funding and legislative updates, technical assistance, contractual support, and resources. The California Child Care Resource & Referral Network is a non-profit organization helping to make reliable child care more affordable and accessible for families in California. Additionally, each R&R provides information to the child care community including families and the workforce. Information is whole child related and supports best practices related to health and safety, children's development, including physical health and development resources, quality child care resources, and training and professional development for the early learning and care workforce. The CDSS also funds 58 Local Planning Councils (LPCs), one in each county. The LPCs assess child care needs which include the needs of the workforce and identify local priority areas for state and federal child care funds. The LPCs provide a forum that encourages public input on local child care needs and fosters partnerships to establish priorities for county wide child care services. There is a membership requirement and planning councils must include child care consumers, providers, public agency representatives, and community representatives. The planning councils act as the liaison to the state and the local child care community. This means they share health and safety, policy, budget, child care and development resources, and professional development information with parents, providers, and the general public. More information about the local planning council mandates can be located at:

https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=10485.&nodeTreePath=16.4.28.2&lawCode=WIC . The CDSS also hosts the Early Childhood Policy Council (ECPC), which is the body appointed by the governor to discuss and elevate the needs of California's children and families and makes recommendations to address current issues. The ECPC meetings are open to the public and address the child care community priorities. Resources from the meetings are available online at <https://www.chhs.ca.gov/home/committees/early-childhood-policy-council/>. The CDSS also makes the California Early Childhood Online platform available to parents, the workforce, the child care and development community members, and public. The website can be found at <http://www.caearlychildhoodonline.org/>. This platform is free, and a variety of topical child development resources and trainings are available on the platform including health and safety, and healthy eating and physical activity resources. Other resources include [California Early Learning Videos](#), the Desired Results website at <https://www.desiredresults.us/>, California Teaching Pyramid, Program Infant and Toddler, Strengthening Families Network (supports family engagement), [All About Young Children website](#), and the Quality Counts California website to name a few and they all provide developmental best practices resources. The CDSS also posts child care bulletins (CCB) that provide legislative and state programmatic updates and implementation guidance which can be found on the Child Care and Development Division CCB webpage at <https://www.cdss.ca.gov/inforesources/letters-regulations/letters-and-notices/child-care-bulletins> . Furthermore, the lead agency is committed to using research, consulting subject matter experts, and adopting best practices that are diverse and inclusive of a variety of voices and sources which will include communities of color, experts of color, child care providers who work in a variety of settings, parents, and minoritized communities to ensure that all voices are elevated and utilized to support the needs of California's children, families, and the workforce.

9.3.5 Unlimited parental access to their children

Does the Lead Agency have procedures to ensure that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds:

☒ *X* Yes.

☐ No. If no, describe: *Click or tap here to enter text.*

9.3.6 Informing families about best practices in social and emotional health

Describe how the Lead Agency shares information with families, providers, and the general public regarding the social-emotional and behavioral and mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age: *Information regarding the social-emotional development of young children is provided through the statewide training made available through the Program for Infant/Toddler Care (PITC) for infant/toddler providers, through the California Preschool Instructional Network (CPIN) for preschool providers, through Family Child Care at its Best (FCCB) for home-based providers, and through coaching content offered through the California Coaching Companion. Additionally, information about the social-emotional development of children is provided to parents through the All About Young Children website (<https://allaboutyoungchildren.org/>). The California Teaching Pyramid provides training and coaching to providers on the social-emotional and behavioral needs of young children, including positive behavioral intervention and is a support model based on research and best practices. The California Teaching Pyramid offers support to local agency partners training child care providers in their area and beginning in 2024, provides direct training and coaching on the pyramid model to family child care providers, which will continue through 2026. Online asynchronous overview learning modules are also available for the California Teaching Pyramid through California Early Childhood Online (CECO). The Infant and Early Childhood Mental Health Consultation (IECMHC) Network delivers consultation services, resources, and training activities for early learning and care center-based program staff, family child care providers, and family, friend, and neighbor providers. The IECMHC Network services are offered at no cost for early learning and care center-based programs and home-based care providers in California. The IECMHC Network's services are designed to build the capacity of program staff and care providers to foster the developmental, social, and emotional health and well-being of young children in their care. Additional Quality Counts California (QCC) Measured Quality Elements previously referred to as the Rating Matrix lists the Ages and Stages Questionnaire (ASQ) as a health and screening tool under Core 1 Item 2: Child Development and School Readiness, Developmental and Health Screenings. These programs aid in families being engaged in the screening process and given results in a supportive and confidential manner. Providers can then use this information to work on next steps regarding learning, monitoring, and intervention. Additionally, effective July 1, 2023, AB 2806 provided procedures for suspension and expulsion in child care and development programs but does not apply to licensed family child care providers until the joint labor-management committee makes recommendations for potential changes related to suspensions and expulsions. The purpose of the legislation is to provide guidance to child care programs on supports and resources to provide to children and families prior to suspending or expelling. Some of the guidance provided to the contracting agencies via Child Care Bulletin (CCB) 23-24 includes resources to build out interagency supports and referral systems, build connections with local resources such as regional centers, provide resources for children exhibiting challenging behaviors, and ensure teachers and service providers receive training and support. Lastly, the legislation requires the Department to gather data on suspensions and expulsions to provide data to the department to identify*

additional training and technical assistance needs of the field. A new team will be established within California Department of Social Services' Child Care and Development Division to support the implementation and will provide technical assistance and training to contracting agencies. Once the team has been hired, they will support contractors with implementation through webinars, 1:1 technical assistance, and connecting to local resources.

9.3.7 Policies on the prevention of the suspension and expulsion of children

- a. The Lead Agency must have policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds. Describe those policies and how those policies are shared with families, providers, and the general public: *The California Department of Social Services (CDSS), upon enactment of Assembly Bill 2806 signed September 30, 2022, is required to create guidance for the field regarding the policies and procedures for suspension and expulsion of children in early child care learning settings. The AB 2806 added Welfare and Institutions Code (WIC) section 10491 which prohibits general child care development (CCTR) services, child care and development services for children with severe disabilities (CHAN) programs, and migrant child care and development from suspending or expelling a child because of a child's behavior. Specific requirements include: (1) implementation of definitions for expulsion, program, suspension, and persistent and serious behaviors; (2) implementation of policy and procedure requirements for providers specific to suspension and expulsion; (3) annual data reporting by facilities, beginning July, 1, 2030, on use of expulsion and suspension procedures and, subject to appropriations, annual publishing of data by CDSS and the California Department of Education (CDE) beginning in 2031; (4) permitting facilities to appeal any citation or civil penalty related to the behavior of a child, including the actions of its staff related to the child's behavior, if the facility is in the process of complying with specified provisions; (5) consideration by CDSS, prior to issuing a citation or civil penalty, whether a child care and development program is in the process of complying with WIC 10491.1; (6) promulgation by CDSS of new regulations specific to these requirements, and (7) creation of guidelines for offering additional supports and required additional training for programs with exceptionally high number of suspension and expulsion. The CDSS, as the lead agency, has posted guidance to contractors with General Child Care and Development programs, Migrant Child Care and Development programs, and Child Care for Children with Severe Disabilities programs regarding the implementation of the suspension and expulsion provisions and related procedures for suspension and expulsion within child care. The requirements will apply to licensed family child care providers after completion of a Joint Labor Management Committee. The bulletin emphasizes the importance of suspension and expulsion being a last resort and that contractors must follow all procedures per WIC section 10491 and WIC 10491.1. Contractors are required to follow California Code of regulations, Title 5, Sections 18119 and 18122, to inform parents and guardians of due process for challenging disenrollment. The Child Care and Development Division (CCDD) also informs contractors through annual contractors and providers meetings about policy changes through meetings. The CDSS' CCDD continues to collaborate with CDE and CDSS' Community Care Licensing Division (CCLD) in order to establish consistent policies and procedures in the field regarding different early learning settings such as family child care providers. In March 2024, the Joint Labor Management Committee is anticipated to make recommendations on Suspension and Expulsion procedures from Child Care Providers United (CCPU), CDE, and*

CDSS. Furthermore, CDSS is engaging in technical assistance with the National Center on Early Childhood Quality Assurance with our partners at CDE. As CDSS implements suspension and expulsion procedures, CDSS is aware of the training and resources the workforce in California will need to implement the new requirements. The CDSS continues to collaborate with WestED to release California Early Childhood Online modules that address high rates of suspension and expulsion among young boys of color. Furthermore, CDSS is understanding the field's needs through State Plan Input Sessions regarding the new policies.

- b. Describe what policies, if any, the Lead Agency has to prevent the suspension and expulsion of school-age children from child or youth care settings receiving CCDF funds: *The CDSS currently has policies preventing the suspension and expulsion of children from birth through five years of age in many of the settings supported by our contracted agencies. Currently, those policies do not apply to Child Care Development Fund (CCDF)-funded settings. However, the State and CCPU are participating in a Joint Labor Management Committee which may result in recommendations related to the application of such policies to family child care home settings that provide care to children receiving subsidies supported by CCDF funding.*

9.4 Providing Information on Developmental Screenings

Lead Agencies must provide information on developmental screenings to parents as part of the intake process for families participating in CCDF and to child care providers through training and education. This information must include:

- Existing resources and services that the State can make available in conducting developmental screenings and providing referrals to services when appropriate for children who receive child care assistance, including the coordinated use of the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under Title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C; and,
- A description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays.

Information on developmental screenings, as in other consumer education information, must be accessible for individuals with limited English proficiency and individuals with disabilities.

9.4.1 Developmental screenings

Does the Lead Agency collect and disseminate information on the following:

- a. Existing resources and services available for obtaining developmental screening for parents receiving CCDF, the general public, and child care providers.
- ☐ No ☒ Yes.

☐ No. If no, describe: [Click or tap here to enter text.](#)

- b. Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program—carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.)—and developmental screening services available under Part B, Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.).

☒ Yes.

☐ No. If no, describe: [Click or tap here to enter text.](#)

- c. Developmental screenings to parents receiving a subsidy as part of the intake process.

☒ Yes. If yes, include the information provided, ways it is provided, and any partners in this work: *The California Department of Social Services (CDSS) provides this information through the Resource and Referral (R&R) agencies located in each of the 58 counties. The R&Rs provides information and resources on developmental screening and share them with parents, early learning and care providers, and the broader public through their websites, trainings, collaborative meetings, and technical assistance. If it is determined that additional services are necessary, then referrals are made to local school districts or/county office of education. Additionally, many families are informed of additional resources to support children with special needs, e.g., regional centers, and "Warm Line." The Warm Line counselors provide phone consultations to providers and families and offer child care providers support with creating an inclusive and developmentally appropriate setting for all children. They also help families start a referral with the school district and their medical provider, or other community agencies. In addition, providers participating in the Quality Counts California are incentivized when they train and utilize the Ages and Stages Questionnaire (ASQ). The Quality Counts California (QCC) Matrix lists ASQ as a health screening tool under Core 1, Item 2: Child Development and Health Screenings. Programs that rate will score a five if all children at entry into the program and as indicated by results thereafter are screened. Furthermore, the QCC programs will make sure families are engaged in the screening process and are given results in a supportive and confidential manner. Programs will ensure that the screening results are used to refer families to appropriate agencies for further assessment or resources. The ASQ increases quality and uses the results of the ASQ to make referrals and implement intervention strategies and adaptations as appropriate. The CDSS also supports the Infant Early Childhood Mental Health Consultation Network (IECMHC). Although this resource does not provide direct developmental screening services, participating providers are given information, and support to guide them in supporting the children in their care. Resources provided by the IECMH Network include a toll-free helpline for immediate support, drop-in open-door sessions to join and discuss with IECMH Consultants any concerns they may have, monthly communities of support, as well as direct one-on-one consultation with an IECMH Consultant. Many resources and supports are shared with providers based on their unique needs and they are given information on the Center for Disease Control's Learn the Signs, Act Early resource for screening young children's development. In addition to advocacy through local R&Rs, contractors that are required to adhere to Program Quality Requirements outlined in California Code of Regulations, Title 5, Section 18276 identify the health and social service needs of children. This identification is often conducted by using an assessment or questionnaire, such as the*

ASQ. Through these identification processes, families are referred to other resources or agencies that may conduct further development screenings.

☐ No. If no, describe: *Click or tap here to enter text.*

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

☒ Yes.

☐ No. If no, describe: *Click or tap here to enter text.*

10 Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. As stewards of federal funds, Lead Agencies must ensure strong and effective internal controls to prevent fraud and maintain continuity of services to meet the needs of children and families. In order to operate and maintain a strong CCDF program, regular evaluation of the program's internal controls as well as comprehensive training for all entities involved in the administration of the program are imperative. In this section, Lead Agencies will describe their internal controls and how those internal controls effectively ensure integrity and accountability. These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors and should apply to all CCDF funds.

10.1 Effective Internal Controls

Lead Agencies must ensure the integrity of the use of CCDF funds through effective fiscal management and must ensure that financial practices are in place. Lead Agencies must have effective fiscal management practices in place for all CCDF expenditures.

10.1.1 Organizational structure to support integrity and internal controls

Describe how the Lead Agency's organizational structure ensures the oversight and implementation of effective internal controls that promote and support program integrity and accountability. Describe: *State law, in Welfare and Institutions Code (WIC) section 10267 requires the Department to develop and coordinate resources to monitor program implementation. The Child Care and Development Division (CCDD), per WIC section 10267, delegates onsite program monitoring to the Program Quality Improvement Branch (PQIB) Consultants and program integrity staff. The review process includes a comprehensive review of the fiscal, program, and audit requirements of the program. The Program Integrity Monitoring Tool is used to complete a Contract Monitoring Review on all contract types held by the agency. Program consultants coordinate with fiscal and audit staff during the monitoring process. In addition to contract monitoring the review of fiscal, enrollment, and attendance reporting is reviewed by fiscal analysts quarterly. The Office of Audit Services (OAS) receives and reviews the annual financial and compliance audit submitted by child development contractors.*

Monitoring of program requirements is conducted by CCDD consultants and program integrity analysts per California Code of Regulations, Title 5, (5 CCR) Section 18023. Responsibilities include development of monitoring tools and resources, conducting onsite reviews of programs, and Error

Rate Reviews. Additionally, there are Divisions within the Department such as Fiscal and Audit. These divisions have staff that provide oversight of child care and development programs. The California Department of Social Services (CDSS) fiscal team is responsible for the review of enrollment, attendance, and expense reporting by child care and development program contracts. Contractors are required per 5 CCR, section 18071 to submit an acceptable financial and compliance audit. The OAS within CDSS conducts reviews of the audits submitted by the contracting agencies and works collaboratively with other CDSS' teams to address any findings. The program and fiscal staff review equipment and improvement expenditures for reasonableness and use allowance. If action is taken by the Department as a result of program, fiscal, or audit noncompliance, the three offices will work collaboratively to address the findings and identify any changes to the agency's status with the Department through the contract review process titled a Case Conference Committee.

Child Development Consultants determine which contractor requires review by conducting a risk assessment of existing contractors. The CDSS is required to conduct reviews at least once every three years, or as resources permit, to ensure programs are meeting the contractual requirements. Program Integrity and Improvement Section staff are assigned to complete Error Rate Reviews specific to the areas of eligibility, need for child care services, family fees, and reimbursement payments to child care providers. During the contract review process fiscal and audit staff will provide PQIB staff with information related to the verification of complete and accurate fiscal reports and addressing audit findings, if applicable. The PQIB maintains a working relationship with fiscal partners as well as audit partners within the Department. There are weekly meetings with program and fiscal staff. Program staff will ensure that the Finance and Accounting Division is contacted to support contractors as needs arise.

The CDSS has divided the management of contracts amongst three separate offices to ensure that staff with expertise in each component of the contracts provides oversight, technical assistance, and monitoring of program regulation implementation, fiscal reporting, and audit requirements. Multiple activities conducted by the Department ensure checks and balances internally and externally. The OAS conducts a review of the annual compliance and financial audits submitted by the child development contractors in accordance with state regulations. The OAS provides fiscal and program staff summaries of any findings identified during the internal audit process via internal memos. Program consultants are responsible for addressing the findings with the contractor and ensure the findings are corrected via action plan. Serious and persistent audit findings are addressed through the Case Conference Committee process, which consists of staff from audits, program, and fiscal. The committee will review the severity of the program and/or fiscal violations along with relevant background information on the contractor to determine if the contractor will be placed on Conditional contract status. Conditional status requires a comprehensive action plan to address all programmatic and fiscal violations and successful progress towards addressing the findings. In instances of serious program violations including identified fraud the Case Conference Committee may rule to discontinue the relationship through what is called No Offer of Continued Funding. Substantiated fraud may be handed to the local district attorney for investigation and/or prosecution. In addition to the audit and contract review process the PQIB conducts Error Rate Reviews during the contract monitoring process. A random sampling of family data files is selected, and programs receive an error rate percentage along with guidance on current enrollment guidance.

Include the following elements in your description:

1. Assignment of authority and responsibilities related to program integrity.
2. Delegation of duties.

3. Coordination of activities.
4. Communication between fiscal and program staff.
5. Segregation of duties.
6. Establishment of checks and balances to identify potential fraud risks.
7. Other activities that support program integrity.

10.1.2 Fiscal management practices

Describe how the Lead Agency ensures effective fiscal management practices for all CCDF expenditures, including:

- a. Fiscal oversight of CCDF funds, including grants and contracts. Describe: *The California Department of Social Services (CDSS) ensures adequate fiscal oversight of Child Care Development Fund (CCDF) funds through multiple reporting and monitoring functions. For example, the oversight in grants can be accomplished by providing reporting requirements to grantees to receive reimbursements once the expenses have been reviewed by the lead agency. In addition, grantees are required to retain records and comply with Department requests for records for a period of time following the grant award. Pursuant to a period of time established by federal or state law. All contracting agencies on Provisional or Conditional status are required to report program expenditures monthly while existing contractors on Clear contract status report expenditures quarterly. Fiscal Analysts monitor the expenditures and reach out to the agencies as needed to ensure they are reporting correctly. In addition to fiscal reporting contracting agencies are required to submit annual compliance and financial audits per state regulation at California Code of Regulations, Title 5, (5 CCR) Section 18071 and a review is conducted by the Office of Audit Services per 5 CCR Section 18072. The Child Care and Development Division (CCDD) in collaboration with fiscal and audit offices conducts contract monitoring review of each contracting agency every three years in which audit and fiscal reporting requirements are reviewed. In addition to the contract monitoring review the Program Integrity and Improvement Section conducts Error Rate Reviews. Fiscal analysts can also pull and review monthly and quarterly fiscal reports for oversight and technical assistance. The CCDD in collaboration with fiscal and audit offices conducts contract monitoring review of each contracting agency every three years in which audit and fiscal reporting requirements are reviewed. In addition to the contract monitoring review the Program Integrity and Improvement Section conducts Error Rate Reviews. Fiscal analysts can also pull and review monthly and quarterly fiscal reports for oversight and technical assistance.*
- b. Tracking systems that ensure reasonable and allowable costs and allow for tracing of funds to a level of expenditure adequate to establish that such funds have not been used in violation of the provision of this part. Describe: *As described in section (a) the Lead Agency has systems within the fiscal, program, and audit offices to track the use of CCDF funds. The review of annual compliance and fiscal audits, monthly or quarterly fiscal reporting requirements, enrollment and attendance data, and contract monitoring all have been implemented to ensure program expenditures are reasonable and necessary to operate the contract and do not violate any state or federal requirements. During the contract monitoring review process Consultants are ensuring audit and fiscal reporting requirements are met through collaboration with the fiscal*

and audits offices. During contract monitoring the consultant provides technical assistance on any discrepancies in attendance and enrollment data or expenses reported through the Child Development Program Enrollment Attendance and Fiscal Reporting (CDPR) or CalWORKs/ Alternative Payment Program Online Reporting System in partnership with the assigned fiscal analysts. If an agency has audit finding from the independent audit the consultant works with the agency on a corrective action and requires documentation of resolution to be provided. Lastly, programs physical inventory, and procurement policies to ensure alignment with federal and state purchasing rules are reviewed through the contract monitoring process.

- c. Processes and procedures to prepare and submit required state and federal fiscal reporting. Describe: *The Department has multiple systems to collect data on student enrollment as well as contract expenditures. Programs are required to submit quarterly fiscal reports to the CDSS on student enrollment and attendance as well as expenditures related to the program types held on the fiscal reporting system known as CDPR. Programs that are deemed high risk such as Provisional (new) and Conditional (ongoing program violations) contractors are required to submit monthly reports and are reviewed by the assigned fiscal analyst. Voucher based programs such as the Alternative Payment Program submit fiscal reports via the CalWORKs/ Alternative Payment Program Online Reporting System. Programs also submit an annual financial and compliance audit that verifies the program has accounting and procurement procedures in place that meet state and federal reporting requirements. Additionally, to meet federal student data reporting programs submit monthly enrollment and family data into the Child Development Management Information System. (Information on the reporting systems can be found on the [CDSS Fiscal Resources](#) page)*
- d. Other. Describe: *Click or tap here to enter text.*

10.1.3 Effectiveness of fiscal management practices

Describe how the Lead Agency knows there are effective fiscal management practices in place for all CCDF expenditures, including:

- a. How the Lead Agency defines effective fiscal management practices. Describe: *The California Department of Social Services (CDSS) has internal and external processes to ensure effective fiscal management procedures are in place and adhered to. The CDSS conducts internal audits to monitor activities within the offices responsible for the implementation and oversight of Child Care Development Fund (CCDF) funds. The Child Development Fiscal Services Office issues a fiscal handbook annually that describes the fiscal reporting and recording requirements for child development contractors providing direct and support services. The Fiscal Handbook is broken into sections and can be located on the [CDSS Fiscal Resources](#) page. Reporting requirements per the Funding Terms and Conditions are described by contract and program type. Internal audits of staff responsible for the implementation of CCDF requirements and external audits of contractors providing services ensures effective fiscal management practices are implemented for all CCDF expenditures.*
- b. How the Lead Agency measures and tracks results of their fiscal management practices. Describe: *The lead agency has multiple methods to track results of fiscal management practices. Direct service child development contractors submit fiscal reports monthly or quarterly through the Child Development Program Enrollment Attendance and Fiscal*

Reporting. Voucher based contractors submit caseload and expenditure reports through CalWORKs/Alternative Payment Program Online Reporting System ([CDSS Fiscal Resources](#) page). Each contracting agency is assigned a fiscal analyst that reviews expenditure data for reasonableness and alignment with program requirements. Program consultants work in collaboration with fiscal staff to address any discrepancies in fiscal reporting. Contracting agencies are responsible for submitting an acceptable fiscal and compliance audit that includes an independent review of operations in accordance with Funding Terms and Conditions including but not limited to; effectiveness and efficiency of operations and program, internal controls, safeguarding of assets; and compliance with laws, regulations, policies, procedures. In addition to external audit requirements of child development contractors lead agency staff participate in internal audits of program policies and procedures. Any findings identified during the internal audit process are addressed through an action plan.

- c. *How the results inform implementation. Describe: The results of the internal and external audit procedures inform lead agency staff on CCDF requirements that require training, additional oversight, or implementation guidance. Audit, fiscal, and program leadership meet regularly to cross collaborate on the effective implementation of program requirements. Trends identified through the monitoring of child development programs, independent financial and compliance audits, and fiscal reporting are addressed through training, technical assistance, 1:1 support, reporting system infrastructure updates, corrective action plans, Child Care Bulletins, and resource documents.*
- d. *Other. Describe: California Government Code (GC) sections 13440 to 13407 requires each agency to establish and maintain effective systems of internal control, to objectively evaluate and monitor the effectiveness of those controls on an ongoing basis, document the system(s) and ensure the system(s) are functioning as prescribed and are modified as appropriate for changes in conditions. GC sections 13400 to 13407 also requires state agencies to biennially report on the adequacy of the systems of internal control and implement plan(s) to mitigate risks and weaknesses. To assist CDSS in meeting this requirement, the Office of Audit Services will: 1) Perform risk assessments by evaluating risk exposure relating to reliability and integrity of financial and operational information; effectiveness and efficiency of operations and program, internal controls, safeguarding of assets; and compliance with laws, regulations, policies, procedures, and contracts, to determine the adequacy of CDSS' program monitoring. 2) perform audits of child care and development agencies and providers, provide technical assistance, and provide analysis and support for appeals of audit findings and testimony in hearings and other legal actions.*

10.1.4 Identifying risk

Describe the processes the Lead Agency uses to identify risk in the CCDF program including:

- a. *Each process used by the Lead Agency to identify risk (including entities responsible for implementing each process). Describe: California Government Code sections 13440 to 13407 require each agency to establish and maintain effective systems of internal control, to objectively evaluate and monitor the effectiveness of those controls on an ongoing basis, document the system(s) and ensure the system(s) are functioning as prescribed and are modified as appropriate for changes in conditions. The Lead*

Agency's Program Quality Improvement Branch (PQIB) developed a risk assessment process to assign selection criteria to ensure the contracting agencies with the highest potential risk receive priority when the team schedules annual monitoring reviews. The assessment criteria include initial visits on newly awarded contractors, whistleblower complaints, conditional contract status due to serious and ongoing program violations, follow-up visits to ensure previous corrective actions have been resolved and existing contractors on clear contract status are organized into cohorts to receive contract monitoring reviews. All contractors are required to conduct independent financial and compliance audits. To assist California Department of Social Services (CDSS) in meeting this requirement, the Office of Audit Services (OAS) will: 1) Perform risk assessments by evaluating risk exposure relating to reliability and integrity of financial and operational information; effectiveness and efficiency of operations and program, internal controls, safeguarding of assets; and compliance with laws, regulations, policies, procedures, and contracts, to determine the adequacy of CDSS' program monitoring. 2) perform audits of child care and development agencies and providers, provide technical assistance, and provide analysis and support for appeals of audit findings and testimony in hearings and other legal actions. The Contract Monitoring Reviews are conducted by Child Development Consultants. The Error Rate Reviews which focus on need, eligibility, family fee assessment, and provider payments are conducted by staff in the Program Integrity and Improvement Section. The OAS have their own staff, as well as the Finance and Accounting Division.

- b. *The frequency of each risk assessment. Describe: Pursuant to California Government Code 13440-13407, state agencies biennially report on the adequacy of the systems of internal control and implement plan(s) to mitigate risks and weaknesses. Contract Monitoring Reviews and Error Rate Reviews take place once every three years, as resources permit. Additionally, the PQIB reviews the risk assessment selection criteria annually to ensure contractors identified as high risk are prioritized for monitoring reviews.*
- c. *How the Lead Agency uses risk assessment results to inform program improvement. Describe: Annually the PQIB develops their monitoring scheduling around the risk assessment criteria. The risk assessment criteria ensures to prioritize high risk agencies for contract monitoring or individualized technical assistance. High risk agencies are identified through a variety of factors including newly awarded contractors who are new to the program requirements and agencies on Conditional Contract status due to program violations. Contract Monitoring Reviews and Error Rate Reviews provide consistent data on what information contractors are having difficulty understanding and/or implementing. This information is shared during regular check-ins with Program Quality and Improvement Branch staff and other partners within the Lead Agency as applicable.*
- d. *How the Lead Agency knows that the risk assessment processes utilized are effective. Describe: The PQIB uses data from contract monitoring, Error Rate Reviews, and annual self-evaluation surveys to measure the effectiveness of their risk assessment criteria. The PQIB staff will analyze data collected to determine if training, resources, and tools have supported the effective implementation of program requirements. Trends revealed within the data collected are used to modify existing risk assessment procedures to ensure the selection criteria is identifying the child development contractors that require more intensive supports and monitoring.*

e. Other. Describe: [Click or tap here to enter text.](#)

10.1.5 Processes to train about CCDF requirements and program integrity

Describe the processes the Lead Agency uses to train staff of the Lead Agency and other agencies engaged in the administration of CCDF, and child care providers about program requirements and integrity.

- a. Describe how the Lead Agency ensures that all staff who administer the CCDF program (including through MOUs, grants, and contracts) are informed and trained regarding program requirements and integrity.
 - i. Describe the training provided to staff members around CCDF program requirements and program integrity: *The Program Quality Improvement Branch (PQIB) staff meet annually, or more often (as needed), to receive training on program requirements, monitoring, and Error Rate Reviews. Project leads and leadership staff provide training on trends identified during monitoring, updates to program requirements or implementation guidance, and invite guest speakers to present on various topics (Ex: West Ed trains on updates to the Desired Results Developmental Profile online system). The PQIB staff meet bi-weekly and quarterly to calibrate staff's understanding of implementation guidance and monitoring procedures. The PQIB leadership meets with staff individually to provide coaching on topics identified in their annual review as areas of focus.*
 - ii. Describe how staff training is evaluated for effectiveness: *The PQIB staff conducts internal training annually for all PQIB staff responsible for providing direct support and monitoring of child development contractors using statewide data and latest research. To ensure training is effective, the Branch uses current data compiled from monitoring, in-person and webinar trainings, and annual evaluation data to determine the training and support needs of the internal staff as well as child development contractors. The PQIB staff calibrate their understanding of program requirements annually using the Program Integrity Monitoring Tool and Environment Rating Scales. The staff identify trends from monitoring and Error Rate Reviews. Annual training and calibration ensure statewide monitoring is uniform and aligned with regulations. Training PowerPoints are created and updated using the most up to date guidance and requirements. The material is reviewed by a training team and program leadership to ensure training materials align with all program requirements and implementation guidance. A survey is conducted at the end of the fiscal year to determine what changes and adjustments can be made to be more effective in the delivery of the training.*
 - iii. Describe how the Lead Agency uses program integrity data (e.g., error rate results, risk assessment data) to inform ongoing staff training needs: *The PQIB staff use data from monitoring, program self-evaluations, and feedback from trainings provided to evaluate the needs of internal staff as well as Child Care Development Fund providers. The data is used to identify internal staff training topics as well as external training needed for child development contractors. Monitoring data is compiled by item and Error Rate Review results. Trends presented during monitoring reviews that identify a need for additional training are addressed through staff meetings which occur quarterly, monthly*

if needed, and professional development sessions which occur or annually. If inconsistencies are identified within current monitoring procedures the PQIB leadership team provides staff training and individual coaching on requirements. When a training topic requires subject matter experts PQIB will collaborate with policy, fiscal, and audit staff to provide in depth training to PQIB staff. Annually, the monitoring team reviews the tools and resources used by PQIB staff to conduct monitoring. Updates to materials are made each year and are reviewed by Child Care and Development Division leadership prior to being made available to the public. Policy staff provide training and overviews to PQIB on new or updated implementation guidance.

- b. Describe how the Lead Agency ensures all providers for children receiving CCDF funds are informed and trained regarding CCDF program requirements and program integrity:
 - i. Describe the training for providers around CCDF program requirements and program integrity: *The PQIB staff provides training through webinars, Child Care Bulletins, monitoring, and 1:1 technical assistance. The PQIB staff conducts annual webinar trainings on eligibility and need, attendance and family fees, fiscal and audit requirements, and monitoring and the self-evaluation process. The trainings are updated annually to ensure that any changes in guidance are provided to contractors. The webinars are recorded and posted on the contractor webpage. Child Care Bulletins are published to inform contractors of changes to guidance. The contract monitoring process is designed as a training and monitoring approach so that when onsite visits occur consultants are reviewing systems and providing technical assistance to ensure all regulations and requirements are adhered to. All contractors have an assigned consultant and fiscal analyst available to provide individual support and training on the effective implementation of program requirements and procedures to ensure program integrity.*
 - ii. Describe how provider training is evaluated for effectiveness: *Training is delivered in a variety of modalities for meet the different learning styles of contracting agency staff. Trainings are delivered as follows: via online interactive webinar recorded and posted to the California Department of Social Services' (CDSS') website and available on demand to contractors (along with PowerPoint), via cluster trainings targeted to address specific geographic needs (typically done in person), and in collaboration with provider organizations via workshops (CDSS' staff are requested to present on topics selected by the provider organization). A survey is conducted at the end of the fiscal year to determine whether there are suggestions and feedback from contractors to adjust future trainings and/or address and modifications that can be made. Contract monitoring and the annual program self-evaluation process are used to ensure provider training efforts are effective. Data trends by monitoring tool items reveal whether additional training or support is needed.*
 - iii. Describe how the Lead Agency uses program integrity data (e.g., error rate results, risk assessment data) to inform ongoing provider training needs: *The PQIB team meets on a bi-weekly basis to discuss emergent trends discovered during the Contract Monitoring Review process. In addition, the Branch participates in a debrief session during the summer months where there are discussions regarding*

focus areas for the coming review year and promising practices from the prior year. This information is utilized to adjust practice and upcoming training efforts.

10.1.6 Evaluate internal control activities

Describe how the Lead Agency uses the following to regularly evaluate the effectiveness of Lead Agency internal control activities for all CCDF expenditures.

- a. Error rate review triennial report results (if applicable). Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls: *The most recent review took place in early 2022. A random sample of 276 family data files were reviewed and an error rate for the state was assessed. The error rate for California was 1.9 percent. This error rate signified the total amount of payments for the random sample that were improper payments. This error rate assessment and review of the errors that caused the improper payments allowed the lead agency to identify and evaluate internal controls which allowed adjustments to guidance provided to the field in areas found to have produced the majority of the state's error rate. The results of the Error Rate Review are shared with the state legislature, stakeholders, and child development contractors.*
- b. Audit results. Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls: *Annual compliance and financial audits are submitted in accordance with California Code of Regulations, Title 5, Section 18071 to the Office of Audit Services for review. Any concerns with internal controls are identified during the review of the fiscal audit and a memo describing the internal control findings are provided to the Child Care and Development Division and Finance and Accounting Division. Program and fiscal staff work with agency staff on corrective actions. Serious and persistent internal control concerns may result in loss of funding or programs placed on Conditional Status.*
- c. Other. Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls: *Click or tap here to enter text.*

10.1.7 Identified weaknesses in internal controls

Has the Lead Agency or other entity identified any weaknesses in its internal controls?

- a. ☒ No. If no, describe when and how it was most recently determined that there were no weaknesses in the Lead Agency's internal controls. *The Child Care and Development Division (CCDD) has implemented several collaborative and communication systems with the Fiscal and Audit Divisions within California Department of Social Services (CDSS) to identify and/or eliminate any potential weaknesses in its internal controls. The review of alignment and implementation of internal control procedures is ongoing. The CCDD scheduled regular standing meetings to proactively address potential internal control weaknesses. The Program Quality Improvement Branch (PQIB) meets with the fiscal staff weekly to ensure consistency with fiscal practices in accordance with federal and state reporting. The staff participating in the weekly meetings disseminate guidance to internal staff as well as external agencies who hold child development contracts to ensure procedures are followed and align with federal requirements. In addition to ongoing meetings for calibration within fiscal reporting and accounting procedures the PQIB has a team that works directly with the Audits Division and their review of*

the annual financial and compliance audit. The CDSS Audits sends internal memos to PQIB staff to address findings within the independent audit findings. In collaboration the three offices collaborate on guidance, implementation, and ongoing compliance of internal control procedures as well as fiscal practices of child development contractors. As a best practice when a potential deficiency is identified the three offices connect and address through a variety of methods such as written guidance to the field, implement a new procedure, updates to fiscal reporting software or add additional monitoring procedures to ensure compliance. As contractors or community partners provide feedback, CCDD Leadership discusses areas of improvement, and a solution is quickly developed.

- b. ☐ Yes. If yes, what were the indicators? How did you use the information to strengthen your internal controls?. [Click or tap here to enter text.](#)

10.2 Fraud Investigation, Payment Recovery, and Sanctions

Lead Agencies must have the necessary controls to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process and other review processes, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition.

10.2.1 Strategies used to identify and prevent program violations

Check the activities the Lead Agency employs to ensure program integrity, and for each checked activity, identify what type of program violations the activity addresses, describe the activity and the results of these activities based on the most recent analysis.

- a. ☐ Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).
- i. ☐ Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: [Click or tap here to enter text.](#)
- ii. ☐ Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: [Click or tap here to enter text.](#)
- iii. ☐ Agency errors. Describe the activities, the results of these activities, and how they inform better practice: [Click or tap here to enter text.](#)
- b. ☐ Run system reports that flag errors (include types).
- i. ☐ Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: [Click or tap here to enter text.](#)
- ii. ☐ Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: [Click or tap here to enter text.](#)
- iii. ☐ Agency errors. Describe the activities, the results of these activities, and how they inform better practice: [Click or tap here to enter text.](#)

- c. ☒ X Review enrollment documents and attendance or billing records.
 - i. ☒ X Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *The Program Integrity and Improvement Section (PIIS), in the Child Care and Development Division, reviews contractor files as a supplementary function of the Contract Monitoring Review process that occurs for each contracting agency every three years or as resources permit. The Program Integrity Section staff review enrollment documents, attendance, and billing records. If an error is discovered, it is discussed with the contractor and their processes are reviewed. If technical assistance is needed, it is provided at that time. The PII section staff request that the error be corrected. The Contracting Agency will be required to submit a corrective action plan to correct any program violations. In addition to contract monitoring, programs are required to complete an independent financial and compliance audit annually that includes review of enrollment documents, attendance, and/or billing records. The requirement to conduct an independent audit and submit the results to The Department is reflected in California Code of Regulations, Title 5, Section 18071.*
 - ii. ☐ Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *Click or tap here to enter text.*
 - iii. ☐ Agency errors. Describe the activities, the results of these activities, and how they inform better practice: *Click or tap here to enter text.*
- d. ☒ X Conduct supervisory staff reviews or quality assurance reviews.

- i. ☒ *X* Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *Intentional program violations may be identified through Error Rate Review via the contract monitoring process, or the financial audit submitted by contracting agencies annually. Programs with significant intentional program violations are brought to Case Conference Committee to determine whether the contract status will be placed on “conditional status”, which requires corrective action within the fiscal year or “no offer of continued funding”. Significant violations may be referred to the local county district attorney’s office for prosecution consideration.*
- ii. ☒ *X* Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *An Error Rate Review is conducted during the contract monitoring process by reviewing a random sampling of family data files containing enrollment documentation, attendance records, attendance and enrollment claims, and provider payments, if applicable. Unintentional program violations are addressed through technical assistance and an Error Rate Reduction Plan. If the programs error rate exceeds the allowable threshold, the contractor is placed on a corrective plan with the program analyst from the Program Integrity and Improvement Section to receive training and 1:1 technical assistance regarding the program violations identified.*
- iii. ☒ *X* Agency errors. Describe the activities, the results of these activities, and how they inform better practice: *An Error Rate Review is conducted during the contract monitoring process by reviewing a random sampling of family data files containing enrollment paperwork, attendance records, attendance and enrollment claims, and provider payments, if applicable. Agency errors are addressed through technical assistance and training. Contract agencies develop error rate reduction plans. Contractor staff receive 1:1 technical assistance to address systemic errors. Consultants and analysts provide training on topics related to the enrollment and attendance process via webinar, in cluster trainings, or 1:1.*
- e. ☒ *X* Audit provider records.
 - i. ☐ Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *Click or tap here to enter text.*
 - ii. ☐ Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *Click or tap here to enter text.*
 - iii. ☒ *X* Agency errors. Describe the activities, the results of these activities, and how they inform better practice: *The PIIS conducts review of provider records during a Contract Monitoring Review on a file- by-file basis to identify errors, estimate the error rates, and assist the contractor in developing a robust error rate reduction plan for provider reimbursements. The PIIS provides specific technical assistance based on the error rate reduction plan as well as a follow-up review to ensure the contractor's policy and procedures produce the required reduction of error rates for provider reimbursements. These processes result in*

better understanding of statute and regulations and have contributed to a reduction of overall error rates.

- f. ☒ *X* Train staff on policy and/or audits.
- i. ☐ Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *Click or tap here to enter text.*
- ii. ☒ *X* Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *The CDSS conducts a yearly comprehensive off-site training of three to five days for its staff members. The staff members also meet weekly through collaborative conversations to discuss issues regarding Child Care Development Fund (CCDF) program administration, requirements, and integrity. They provide on-going training and Technical Assistance to contractors in regional sessions, in 1:1 sessions, and/or in clusters with webinars or during face-to-face presentations. These sessions address CCDF program administration, requirements, and integrity.*
- iii. ☒ *X* Agency errors. Describe the activities, the results of these activities, and how they inform better practice: *On an annual basis CDSS provides training to child care and development contractors on the following areas, at a minimum: 1) Eligibility certification and recertification; 2) Income calculation; 3) Need and family fee assessment; 4) Collecting and earning family fees; 5) Attendance recording and reporting; 6) Earning your contract; and 7) Written information for Parents and Providers. Trainings are provided at statewide conferences, local regional area trainings, individual contractor level trainings, by webinar and video conferences. Trainings focus on how contractors can meet the regulatory requirements, implementation guidance, practical applications and simulated contractor examples are described to audience members with an emphasis placed on the categories of eligibility, need, family fees, provider payments, and attendance. These trainings result in contractors being better informed and having a clearer understanding of regulatory requirements.*
- g. ☒ *X* Other. Describe the activity(ies): *The Program Integrity and Improvement Section is dedicated to supporting contractors in achieving program integrity through on-site visits. These on-site visits allow for staff to work with contractors in enhancing their understanding of the rules and regulations tied to their programs and evaluate any training needs.*
- i. ☐ Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *Click or tap here to enter text.*
- ii. ☒ *X* Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: *The CDSS has analysts working in teams, full-time, reviewing files, identifying administrative errors, and assisting contractors in crafting and implementing error rate reduction plans. Agency specific error rates have been successful in identifying issues and reducing the instance of errors. For all contractors, an annual independent*

audit is required and reviewed by CDSS. Actions Taken: on-site reviews of contractors to identify and reduce errors, follow-up reviews to assess effective implementation of error rate reduction plans, and review of annual agency audits and completion of on-site audits of high-risk contractors by CDSS' auditors. Analysts are available to answer contractor's questions about specific challenges or questions which arise throughout the year when applying regulatory and contractual obligations.

- iii. ☐ Agency errors. Describe the activities, the results of these activities, and how they inform better practice: [Click or tap here to enter text.](#)

10.2.2 Identification and recovery of misspent funds

Lead Agencies must identify and recover misspent funds that are a result of fraud, and they have the option to recover any misspent funds that are a result of unintentional program violations or agency errors.

Identify which agency is responsible for pursuing fraud and overpayments (e.g., State Office of the Inspector General, State Attorney): [Local County District Attorney, in conjunction with CDSS.](#)

- a. Check and describe all activities, including the results of such activity, that the Lead Agency uses to investigate and recover improper payments due to fraud. Consider in your response potential fraud committed by providers, clients, staff, vendors, and contractors. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Activities can include, but are not limited to, the following:
- i. ☒ X Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis: *California believes the cost of recovery, including staff time to investigate whether an improper payment occurred, construct a billing, and address any contractor appeals would cost more than the amount recovered. At this time, given the relatively low amount of funds identified as improper payments, California believes its resources will be more effectively expended on practices that will decrease future error rates. California, however, pursues issues of fraud.*
 - ii. ☒ X Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities and the results of these activities based on the most recent analysis: *California Department of Social Services (CDSS) and the contracting agency would work in conjunction with the local county district attorneys to prosecute instances of fraud in the child care program. This activity sometimes results in funds owed being recovered.*
 - iii. ☒ X Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: *Within special circumstances or per the directive of legal settlements and decisions, the CDSS will generate a repayment plan with the contractor for one or multiple outstanding invoices. Repayment plans will stipulate a specific amount to be paid by a predetermined schedule until the remaining balance is paid-in-full. This activity sometimes results in funds owed being recovered.*
 - iv. ☒ X Reduce payments in subsequent months. Describe the activities and the results of these activities based on the most recent analysis: *The CDSS may reduce monthly or quarterly advance apportionments to contractors in subsequent months of the fiscal year if and when the contractor has misrepresented/misreported actual contract earnings. The results of this activity have ensured that funds owed are recovered.*
 - v. ☒ X Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis: *The CDSS will follow the existing process, utilizing Franchise Tax Board to collect delinquent overpayments in the child care program, similar to the CalWORKs and Temporary Assistance for Needy Families programs.*
 - vi. ☐ Recover through other means. Describe the activities and the results of these activities based on the most recent analysis:
 - vii. ☒ X Establish a unit to investigate and collect improper payments and describe the composition of the unit. Describe the activities and the results of these

activities based on the most recent analysis: *The CDSS fraud investigative staff would investigate, establish, and pursue claims against child care providers. As applicable, county welfare fraud investigative staff would investigate, establish and pursue claims against recipients. This unit has not been established therefore there are no results.*

viii. ☐ Other. Describe the activities and the results of these activities: *Click or tap here to enter text.*

b. Does the Lead Agency investigate and recover improper payments due to unintentional program violations?

☒ No.

☐ Yes.

If yes, check and describe below any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity.

i. ☐ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis: *Click or tap here to enter text.*

- ii. ☐ Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities and the results of these activities based on the most recent analysis: [Click or tap here to enter text.](#)
 - iii. ☐ Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: [Click or tap here to enter text.](#)
 - iv. ☐ Reduce payments in subsequent months. Describe the activities and the results of these activities based on the most recent analysis: [Click or tap here to enter text.](#)
 - v. ☐ Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis: [Click or tap here to enter text.](#)
 - vi. ☐ Recover through other means. Describe the activities and the results of these activities based on the most recent analysis: [Click or tap here to enter text.](#)
 - vii. ☐ Establish a unit to investigate and collect improper payments and describe the composition of the unit. Describe the activities and the results of these activities based on the most recent analysis: [Click or tap here to enter text.](#)
 - viii. ☐ Other. Describe the activities and the results of these activities: [Click or tap here to enter text.](#)
- c. Does the Lead Agency investigate and recover improper payments due to agency errors?
- ☒ X No.
- ☐ Yes.
- If yes, check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.
- i. ☐ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis: [Click or tap here to enter text.](#)
 - ii. ☐ Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities and the results of these activities based on the most recent analysis: [Click or tap here to enter text.](#)
 - iii. ☐ Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: [Click or tap here to enter text.](#)
 - iv. ☐ Reduce payments in subsequent months. Describe the activities and the results of these activities based on the most recent analysis: [Click or tap here to enter text.](#)

- v. ☐ Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis: *Click or tap here to enter text.*
 - vi. ☐ Recover through other means. Describe the activities and the results of these activities based on the most recent analysis: *Click or tap here to enter text.*
 - vii. ☐ Establish a unit to investigate and collect improper payments and describe the composition of the unit. Describe the activities and the results of these activities based on the most recent analysis: *Click or tap here to enter text.*
 - viii. ☐ Other. Describe the activities and the results of these activities: *Click or tap here to enter text.*
- d. What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to intentional program violations or fraud? Check and describe all that apply:
- i. ☐ ☒ Disqualify the client. Describe this process, including a description of the appeal process for clients who are disqualified. Describe the activities and the results of these activities based on the most recent analysis: *The contract agency provides the parent with a Notice of Action (NOA), termination of services. If the parent disagrees with the written decision, the parent has 14 days (19 days if the NOA was received by mail) to request a hearing. Within 10 calendar days of the receipt of the request for a hearing, the contractor must notify the parent of the date and time of the hearing. The parent or an authorized representative is required to attend the hearing and must have the opportunity to explain the reasons they believe the action was incorrect. Within 10 days of the hearing the hearing officer must mail or deliver to the parent a written decision. If the parent disagrees with the written decision, they may request an appeal, specifying the reason why they believe the decision is incorrect. Upon receipt of the appeal request, CDSS may investigate as necessary to resolve the appeal. The decision of CDSS shall be mailed or delivered to the parent and the contractor within 30 calendar days after the receipt of the appeal request. As a result, after the appeal process is complete, child care services could be continued or terminated.*
 - ii. ☐ ☒ Disqualify the provider. Describe this process, including a description of the appeal process for providers who are disqualified. Describe the activities and the results of these activities based on the most recent analysis: *Contractors must develop and implement written policies and procedures for provider participation, which includes grievance procedures for parents and providers in the program. (California Code of Regulations, Title 5, Section 18223). Any appeal by a provider must be handled by the contractor. After the appeal process is complete, the business relationship between a contractor and provider could be continued or terminated. Results are unknown to CDSS as these steps are independent of CDSS.*
 - iii. ☐ ☒ Prosecute criminally. Describe the activities and the results of these activities based on the most recent analysis: *The local prosecuting authorities will prosecute recipients and providers who, through investigation, are*

determined to have committed fraud. When the investigation and prosecution concludes they will notify the CDSS accordingly. In cases where this occurs the recipient or provider may be required to pay back monies received through fraudulent means.

- iv. ☐ Other. Describe the activities and the results of these activities based on the most recent analysis: [Click or tap here to enter text.](#)

Appendix 1: Lead Agency Implementation Plan

For each non-compliance, Lead Agencies must describe the following:

- **Action Steps:** List the action steps needed to correct the finding (e.g., update policy manual, legislative approval, IT system changes, etc.). For each action step list the:
 - **Responsible Entity:** Indicate the entity (e.g., agency, team, etc.) responsible for completing the action step.
 - **Expected Completion Date:** List the expected completion date for the action step.
- **Overall Target Date for Compliance:** List date Lead Agency anticipates completing implementation, achieving full compliance with all aspects of the findings. (Note: Compliance will not be determined until the FFY 2025-2027 CCDF Plan is amended and approved).

Appendix 1: Form

[Plan question with non-compliance and associated provision will pre-populate based on preliminary notice of non-compliance]

A. Action Steps for Implementation	B. Responsible Entity(ies)	C. Expected Completion Date
Step 1:		
Step 2 (as necessary):		
[Additional steps added as necessary]		
Overall Target Date for Compliance:		