

OMB Control No: 0970-0114

Expiration date: 11/30/2018

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 200 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and completing the form.

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



**Child Care and Development Fund (CCDF) Plan**

**for**

**State/Territory \_\_\_\_\_**

**FFY 2019–2021**

This Plan describes the Child Care and Development Fund program to be administered by the State or Territory for the period from 10/1/2018 to 9/30/2021, 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.

## Table of Contents

<b>Introduction and How to Approach Plan Development .....</b>	<b>1</b>
<b>1 Define CCDF Leadership and Coordination with Relevant Systems.....</b>	<b>3</b>
1.1 CCDF Leadership .....	3
1.2 CCDF Policy Decision Authority .....	4
1.3 Consultation in the Development of the CCDF Plan.....	9
1.4 Coordination with Partners to Expand Accessibility and Continuity of Care .....	11
1.5 Optional Use of Combined Funds, CCDF Matching and Maintenance-of-Effort Funds .....	18
1.6 Public-Private Partnerships .....	27
1.7 Coordination with Local or Regional Child Care Resource and Referral Systems .....	29
1.8 Disaster Preparedness and Response Plan.....	30
<b>2 Promote Family Engagement through Outreach and Consumer Education.....</b>	<b>32</b>
2.1 Outreach to Families with Limited English Proficiency and Persons with Disabilities .....	33
2.2 Parental Complaint Process.....	34
2.3 Consumer Education Website .....	35
2.4 Additional Consumer and Provider Education .....	44
2.5 Procedures for Providing Information on Developmental Screenings.....	49
2.6 Consumer Statement for Parents Receiving CCDF Funds .....	51
<b>3 Provide Stable Child Care Financial Assistance to Families.....</b>	<b>52</b>
3.1 Eligible Children and Families.....	52
3.2 Increasing Access for Vulnerable Children and Families .....	66
3.3 Protection for Working Families.....	69
3.4 Family Contribution to Payments.....	75
<b>4 Ensure Equal Access to Child Care for Low-Income Children .....</b>	<b>77</b>
4.1 Parental Choice in Relation to Certificates, Grants, or Contracts .....	77
4.2 Assessing Market Rates and Child Care Costs .....	80
4.3 Setting Payment Rates.....	84
4.4 Summary of Facts Used to Determine That Payment Rates Are Sufficient to Ensure Equal Access .....	86
4.5 Payment Practices and the Timeliness of Payments .....	92
4.6 Supply-Building Strategies to Meet the Needs of Certain Populations.....	95
<b>5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings .....</b>	<b>99</b>
5.1 Licensing Requirements.....	99
5.2 Health and Safety Standards and Requirements for CCDF Providers .....	101
5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers .....	150
5.4 Criminal Background Checks .....	156
<b>6 Recruit and Retain a Qualified and Effective Child Care Workforce .....</b>	<b>176</b>
6.1 Professional Development Framework .....	176
6.2 Training and Professional Development Requirements.....	179
6.3 Early Learning and Developmental Guidelines.....	183

<b>7</b>	<b>Support Continuous Quality Improvement.....</b>	<b>185</b>
7.1	Quality Activities Needs Assessment for Child Care Services.....	186
7.2	Use of Quality Funds.....	192
7.3	Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds .....	193
7.4	Quality Rating and Improvement System (QRIS).....	198
7.5	Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers .....	202
7.6	Child Care Resource and Referral .....	207
7.7	Facilitating Compliance with State Standards .....	208
7.8	Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services .....	209
7.9	Accreditation Support .....	210
7.10	Program Standards .....	211
7.11	Early Learning and Development Guidelines and Other Quality Improvement Activities.....	211
<b>8</b>	<b>Ensure Grantee Program Integrity and Accountability.....</b>	<b>212</b>
8.1	Internal Controls and Accountability Measures to Help Ensure Program Integrity.....	212
	<b>Appendix A: Background Check Waiver Request Form .....</b>	<b>228</b>

## Introduction and How to Approach Plan Development

The Child Care and Development Fund (CCDF) program provides resources to state, territory, and tribal grantees that enable low-income parents to work or pursue education and training so that they can better support their families while at the same time promoting the learning and development of their children. The CCDF program also provides funding to enhance the quality of child care for all children. On November 19, 2014, the Child Care and Development Block Grant (CCDBG) Act of 2014 was signed into law (Pub. L. 113-186). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for state and territory grantees. In September 2016, the Final Rule was released. The Final Rule makes regulatory changes to the CCDF program based on the CCDBG Act of 2014. These changes strengthen requirements to protect the health and safety of children in child care; help parents make informed consumer choices and access information to support child development; provide equal access to stable, child care for low-income children; and enhance the quality of child care and the early childhood workforce.

The Plan is the primary mechanism that the Administration for Children and Families (ACF) uses to determine state and territory compliance with the requirements of the law and rule. The Preprint provides a tool for states and territories to describe to ACF their progress on the following sections:

1. Define CCDF Leadership and Coordination With Relevant Systems
2. Promote Family Engagement Through Outreach and Consumer Education
3. Provide Stable Child Care Financial Assistance to Families
4. Ensure Equal Access to Child Care for Low-Income Families
5. Establish Standards and Monitoring Processes To Ensure the Health and Safety of Child Care Settings
6. Recruit and Retain a Qualified and Effective Child Care Workforce
7. Support Continuous Quality Improvement
8. Ensure Grantee Accountability

These organizational categories reflect key functions of an integrated system of child care for low-income working families. Although the Plan is divided into sections for reporting and accountability purposes, ACF encourages Lead Agencies to approach the Plan in a cross-cutting, integrated manner. The intention is that grantees and the federal government will be able to use this information to track and assess progress, determine the need for technical assistance (TA), and determine compliance with specific requirements and deadlines.

## Instructions:

### *CCDF Plan Response Options for Areas Where Implementation Is Still in Progress*

As indicated in the Preamble to the CCDF Final Rule (81 FR, p. 67443–4), States must demonstrate compliance with all requirements of the Final Rule no later than October 1, 2018 (the effective date of the FY 2019–2021 CCDF Plan). The only exception is background check requirements, for which States may request time-limited waiver extensions. As such, this

Preprint was developed with the expectation that all requirements, with the exception of background check requirements, would be fully implemented no later than October 1, 2018.

Note that for any changes to the CCDF program effective prior to September 30, 2018, Lead Agencies will be required to submit Plan amendments to the FY 2016-2018 CCDF Plans.

ACF recognizes that Lead Agencies may still be working on implementing some requirements of the Final Rule in order to meet this deadline and may have pending actions (such as legislation or administrative rules) to be implemented at the time of Plan submission. To facilitate responses in these areas, Lead Agencies should use associated “Describe” boxes to provide up-to-date information on the status for these requirements at the time of Plan submission. In the description of the CCDF requirements, ACF requests that the Lead Agency specify what components are implemented (if any) and identify what components are still pending. For pending components, Lead Agencies should list any major pending actions (passage of legislation, approval of administrative rules, etc.) needed to complete implementation and expected completion date. Lead Agencies may update these descriptions prior to Plan approval by the end of September, as appropriate, or submit a Plan Amendment pursuant to the requirements at 98.18(b) after the Plan becomes effective on October 1, 2018.

Please note that all requirements not fully implemented by the Final Rule deadline are subject to compliance actions, such as corrective action plans and/or penalties in accordance with CCDF regulations.

#### *Citations*

ACF recognizes that Lead Agencies use different mechanisms to establish policies, such as state statute, regulations, administrative rules, or policy manuals or policy issuances. When asked to provide a citation in the CCDF Plan, Lead Agencies should list the citation(s) for the policy that clearly identifies and establishes the requirement and that allows the Lead Agency to enforce the requirement. Lead Agencies may list multiple sources as needed to cover all types of providers receiving CCDF (e.g., policies for licensed providers may be established in licensing regulations and policies for license-exempt providers may be in subsidy rules).

#### *CCDF Plan Submission*

States and territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions on the ACF-118 site 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. (See <http://www.section508.gov/> for more information.)

In responding to questions, states and territories are asked to provide brief, specific summaries and/or bullet points only with specific language that responds to the question. Do not use tables or copy and paste charts, add attachments, or paste manuals into the Plan. All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing oversight and monitoring efforts.

# 1 Define CCDF Leadership and Coordination with Relevant Systems

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

## 1.1 CCDF Leadership

The Governor of a state or territory 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 appended hereto (658D; 658E(c)(1)). Note: An amendment to the CCDF State Plan is required if the Lead Agency changes or if the Lead Agency official changes.

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

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

#### a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: [Department of Education/Office of Early Learning, OEL](#)

Street Address: [250 Marriott Drive](#)

City: [Tallahassee](#)

State: [Florida](#)

ZIP Code: [32399](#)

Web Address for Lead Agency: [www.floridaeearlylearning.com](http://www.floridaeearlylearning.com)

#### b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: [Rodney](#)

Lead Agency Official Last Name: [MacKinnon](#)

Title: [Executive Director](#)

Phone Number: [850-717-8554](#)

Email Address: [Rodney.mackinnon2@oel.myflorida.com](mailto:Rodney.mackinnon2@oel.myflorida.com)

### 1.1.2 Who is the CCDF Administrator?

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the state's or territory's CCDF program. ACF will

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

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: [Rodney](#)

CCDF Administrator Last Name: [Mackinnon](#)

Title of the CCDF Administrator: [Executive Director](#)

Phone Number: [850-717-8554](#)

Email Address: [rodney.j.mackinnon@oel.myflorida.com](mailto:rodney.j.mackinnon@oel.myflorida.com)

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

Street Address: [250 Marriott Drive](#)

City: [Tallahassee](#)

State: [Florida](#)

ZIP Code: [32399](#)

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

CCDF Co-Administrator First Name: [Stephanie](#)

CCDF Co-Administrator Last Name: [Gehres](#)

Title of the CCDF Co-Administrator: [Deputy Director](#)

Description of the role of the Co-Administrator: [The Co-Administrator is responsible for ensuring timely communication with the Office of Child Care, responding to requests and ensuring all reporting requirements are met. The Co-Administrator ensures the CCDF Administrator is apprised of all communications, technical assistance and policy implications.](#)

Phone Number: [850-717-8598](#)

Email Address: [stephanie.gehres@oel.myflorida.com](mailto:stephanie.gehres@oel.myflorida.com)

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

Street Address: [250 Marriott Drive](#)

City: [Tallahassee](#)

State: [Florida](#)

ZIP Code: [32399](#)

## 1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or

public or private local agencies as long as it retains overall responsibility for the administration of the program (658D(b)). Administrative and implementation responsibilities undertaken by agencies other than the Lead Agency must be governed by written agreements that specify the mutual roles and responsibilities of the Lead Agency and other agencies in meeting the program requirements.

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

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

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

- ☒ State or territory
- ☐ Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set. \_\_\_\_\_
- ☐ Other. Describe: \_\_\_\_\_

2. Sliding-fee scale is set by the:

- ☐ State or territory
- ☒ Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set. [The 30 early learning coalitions \(ELCs\) and Redlands Christian Migrant Association \(RCMA\) establish their individual local sliding fee scales. The sliding fee scales include full-time and part-time parent copayment rates and any sibling discounts. The sliding fee scales are updated each year based on the Federal Poverty Guidelines and are submitted to and approved by the Office of Early Learning \(OEL\). A listing of the ELC's and RCMA can be found at the following link: \[http://www.floridaearlylearning.com/parents/find\\\_quality\\\_child\\\_care/locate\\\_a\\\_child\\\_care\\\_resource\\\_referral\\\_program/countys\\\_early\\\_learning\\\_coalition.aspx\]\(http://www.floridaearlylearning.com/parents/find\_quality\_child\_care/locate\_a\_child\_care\_resource\_referral\_program/countys\_early\_learning\_coalition.aspx\)](#)
- ☐ Other. Describe: [REDACTED]

3. Payment rates are set by the:

- ☐ State or territory



- ☒ Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set. [The 30 early learning coalitions and RCMA establish child care provider payment rates for their service delivery areas, taking into consideration the average market rate. The rates are approved by OEL.](#)
- ☐ Other. Describe:

4. Other. List and describe other program rules and policies (e.g., quality rating and improvement systems [QRIS], payment practices): [Click or tap here to enter text.](#)

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

a) Who conducts eligibility determinations?

- ☐ CCDF Lead Agency
- ☒ Temporary Assistance for Needy Families (TANF) agency
- ☒ Other state or territory agency
- ☐ Local government agencies, such as county welfare or social services departments
- ☐ Child care resource and referral agencies
- ☐ Community-based organizations
- ☒ Other. [Early Learning Coalitions](#)

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

- ☒ CCDF Lead Agency
- ☐ TANF agency
- ☒ Other state or territory agency
- ☒ Local government agencies, such as county welfare or social services departments
- ☒ Child care resource and referral agencies
- ☒ Community-based organizations
- ☒ Other. [Early Learning Coalitions, Redlands Christian Migrant Association \(RCMA\), Head Start Agencies, Local Early Steps Programs.](#)

c) Who issues payments?

- ☒ CCDF Lead Agency
- ☐ TANF agency.
- ☐ Other state or territory agency.
- ☐ Local government agencies, such as county welfare or social services departments.
- ☐ Child care resource and referral agencies.
- ☐ Community-based organizations.
- ☒ Other. [The 30 early learning coalitions and RCMA. Payments for child care services are issued to providers and are distributed electronically \(EFT\) or by check by the early learning coalitions and RCMA.](#)

- 1.2.3 Describe the processes the Lead Agency uses to monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.2, including written agreements, monitoring and auditing procedures, and indicators or measures to assess performance of those agencies (98.16(b)). Note: The contents of the written agreement may vary based on the role the agency is asked to assume or type of project, but must include at a minimum, tasks to be performed, schedule for completing tasks, budget which itemizes categorical expenditures in accordance with CCDF requirements, and indicators or measures to assess performance (98.11(a)(3)). [The Office of Early Learning \(OEL\) administers early learning programs through grant awards with 30 or fewer local early learning coalitions \(ELCs\) that are registered not-for-profit 501\(c\)\(3\) organizations statutorily tasked with implementing early learning programs within their local service areas, and the Redlands Christian Migrant Association, a non-profit statewide entity that serves the unique populations of migrant, seasonal and former farm worker families. OEL also oversees contracts with several additional organizations for the delivery of other aligned early learning program services and activities. Some services are also provided by other state agencies and coordinated with OEL. Oversight of Services & Activities: The Office of Early Learning fulfills its fiscal and programmatic monitoring responsibilities for OEL sub-recipients through several mechanisms. Each ELC is responsible for submitting a coalition school readiness \(SR\) service delivery plan for review/approval by the Office. ELC SR plans must include the ELC's operations, minimum number of children to be served by care level, procedures for implementing the SR application and waiting list, eligibility, enrollment processes, use of contracted slots, parent access and parental choice, sliding fee scale \(and policies on applying the waiver or reduction of fees\), child screening, program assessment policies, use of observation based child assessments as applicable, provider payment rates, a detailed description of quality activities and services, a detailed budget, a detailed accounting, policies and procedures for procurement, maintenance of tangible personal property, maintenance of records, information technology, and disbursement controls, a description of the procedures for monitoring CCDF \(School Readiness\) program providers \(including a parental complaint process\), and documentation that the ELC has solicited and considered comments regarding its proposed program plan from the local community. Each ELC must update its SR plan at least biennially and more frequent revisions are required if needed. OEL has a formal SR plan amendment process in place for submission, review and approval of SR plan changes. For RCMA, an annual services contract is executed that outlines the service delivery plan for SR program activities. These tasks are incorporated into the RCMA scoped contract deliverables. This approach is also applied to other services contracts as they occur. The Office of Early Learning also maintains Memoranda of Understanding with the Department of Children and Families and the local child care licensing agencies \(LLAs\) in Broward, Hillsborough, Palm Beach, Pinellas, and Sarasota counties to perform mandatory health and safety inspections. Annual Risk Assessments: A preliminary risk assessment is performed at the beginning of the fiscal year by OEL's Program Integrity Unit to establish proposed monitoring priorities, testing tasks and sample sizes. During the planning phase for the fiscal and programmatic monitoring tasks, a final risk assessment is performed using information provided by each as part of the planning/data gathering process for annual monitoring visits. Individual scores are compiled for each ELC to reach a composite risk score. That score is compared to pre-set ranges to determine each entity's overall risk level \(low, medium, high\). This score is used to identify the number and type of sample items selected for testing. Internal Control Surveys: Each early learning coalition and material OEL sub-recipient is responsible for completing an annual internal control questionnaire. The completed questionnaire is submitted to and reviewed by OEL Program Integrity staff and used as part of the annual financial](#)

monitoring process by the Office's contracted monitors. Fiscal Desk Reviews: Fiscal Desk Reviews are also conducted by OEL's Financial Administration and Budget Services Unit on selected coalition expenditures to determine the allowability of reimbursed expenditures as a compliment to the monthly invoice submission process and annual financial monitoring activities. These desk reviews select a limited number of sample items from administrative, quality and other non-direct service expenditures. Annual Budget, Revenue, and Expenditure Reporting: OEL staff reviews annual budget, revenue, and expenditure reporting to ensure reporting of costs in accordance with the uniform chart of accounts, and in compliance with targeted funds and restrictions. Programmatic Monitoring: OEL's Program Integrity Unit includes an Accountability section (AS) that conducts ongoing programmatic reviews for each early learning coalition and RCMA. This review process addresses compliance with the School Readiness and Voluntary Prekindergarten programs. This is completed with a two-phase approach: 1. Biennial Accountability Review – AS staff conduct an onsite or desk review of each coalition which includes Governance, Operations, Educational Service Delivery, Child Care Resource and Referral, Data Security, and Data Accuracy (which includes data edit reports related to eligibility and standard billing group codes). When onsite, OEL staff also conduct a provider focus group forum to receive input from local providers and the community. 2. Eligibility Review – AS staff conducts these tests on an annual basis for all ELCs and RCMA. Tests will include a random sample of SR and VPK eligibility files and SR and VPK payment validation files. 3. Quarterly Data Edit Report Review – Office staff review edit reports related to eligibility and standard billing group codes. Potential errors are identified and shared with the affected coalitions so any needed corrections can be made. 4. Training – Office staff conduct periodic training sessions related to eligibility issues. The AS has developed standard statewide eligibility monitoring guides for coalitions to use when monitoring their sub-recipients (if applicable). Validation of each coalition's sub-recipient monitoring results is completed during the coalition accountability review. In addition to validating a coalition's sub-recipient monitoring results for SR and VPK eligibility, the AS has developed monitoring tools to evaluate compliance in the areas of governance, operations, educational service delivery, child care resource and referral, data security, and data accuracy. For coalitions (and RCMA) who provide SR and VPK services directly, the AS uses these monitoring tools to evaluate directly evaluate compliance in the areas of governance, operations, educational service delivery, child care resource and referral, data security, data accuracy, SR and VPK child eligibility, SR and VPK provider payment validation, and VPK provider eligibility. Monitoring activities for all coalitions (and RCMA) include corrective action plan acceptance and technical assistance as it relates to each coalition's (and RCMA) programmatic monitoring review. – Financial Monitoring OEL's Program Integrity Unit includes the Financial Management Systems Assurance Section (FMSAS) which is responsible for various financial monitoring tasks of OEL sub-recipients, including the early learning coalitions. OEL contracts for financial monitoring services with a qualified CPA firm licensed to practice within the State of Florida. The CPA firm conducts the annual financial compliance onsite monitoring visits under the direction of OEL staff. Current financial monitoring tasks are detailed in OEL's financial monitoring tools and include the following categories (as applicable) for OEL sub-recipients: – Preventive/Correction Action Plan Implementation – Financial Management Systems – Internal Control Environment – Cash and Revenue Management – OEL Statewide Information System Reporting and Reconciliation – Prepaid Program Items – Cost Allocation and Disbursement Testing – Travel – Purchasing – Contracting – Sub-recipient Monitoring – Separate monitoring tools have been provided for selected sub-recipients (statewide contracts, universities, etc.). Other annual FMSAS monitoring tasks include, but may not be limited to: review of annual audit reports; notice to sub-recipients of monitoring findings; receipt of

resulting preventive/corrective action plans; analysis of all preventive/corrective action plans to ensure timely review; revisions (as needed) and final approval of these plans; and preparation of periodic progress reports as requested by OEL management. OEL also conducts internal reviews of DCF/LLA inspections to ensure that follow-up inspections are conducted when necessary.

- 1.2.4 Lead Agencies must assure that, to the extent practicable and appropriate, any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop must be made available on request to other public agencies, including public agencies in other States, for their use in administering child care or related programs (98.15(a)(11)). Assure by describing how the Lead Agency makes child care information systems available to public agencies in other states to the extent practicable and appropriate. OEL will make available any child care information system code or software that was developed with CCDF funds. OEL will ask that the entity requesting the code or software compensate OEL for the costs of securely transferring the system related data.
- 1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)). Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally identifiable information. Under Florida Statute 1002.97, individual records of children who receive CCDF assistance are confidential. Confidential records include assessment data, health data, records of teacher observation, and personally-identifiable information. The OEL requires early learning coalitions and applicable contractors to take reasonable measures to safeguard the personally-identifiable information of children receiving CCDF assistance.

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

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

- (1) Appropriate representatives of units of general purpose local government—(658D(b)(2); 98.10(c); 98.12(b); 98.14(b)). General purpose local governments are defined by the U.S. Census at [https://www.census.gov/newsroom/cspan/govts/20120301\\_cspan\\_govts\\_def\\_3.pdf](https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf).
- (2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) (658E(c)(2)(R); 98.15(b)(1)) or similar coordinating body pursuant to 98.14(a)(1)(vii).
- (3) Indian tribe(s) or tribal organization(s) within the state. This consultation should be done in a timely manner and at the option of the Indian tribe(s) or tribal organization(s) (658D(b)(1)(E)).

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

- 1.3.1 Describe the Lead Agency's consultation in the development of the CCDF Plan.

- a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments. [Local public school district representatives received invitations to the CCDF Plan workshop and were provided drafts for comments.](#)
- b) Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body. [The OEL convened a CCDF Sub-Committee that included all the stakeholders that make up the required members of the State Advisory Council.](#)
- c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for States to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many States and Tribes have consultation policies and procedures in place. [The Miccosukee Indian tribe was invited to be a part of the Sub-Committee.](#)
- d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF Plan. [N/A](#)

1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)). *Reminder:* Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

- a) Date of the public hearing. [May 30, 2018](#) *Reminder:* Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g. the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).
- b) Date of notice of public hearing (date for the notice of public hearing identified in (a). [April 9, 2018](#) *Reminder:* Must be at least 20 calendar days prior to the date of the public hearing. If more than one public hearing was held, enter one date of notice (e.g. the date of the first notice, the most recent notice or any date of notice that demonstrates this requirement).
- c) How was the public notified about the public hearing? Please include specific website links if used to provide notice. [The hearing was noticed on the Florida Administrative Register \(FAR\) and on OEL's website.](#)  
[http://www.floridaeearlylearning.com/oel\\_resources/ccdf\\_plan.aspx](http://www.floridaeearlylearning.com/oel_resources/ccdf_plan.aspx)
- d) Hearing site or method, including how geographic regions of the state or territory were addressed. [Office of Early Learning, Tallahassee, Florida. The hearing was conducted via in-person meeting and webinar.](#)
- e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.) [The plan is posted on OEL's website.](#)  
[http://www.floridaeearlylearning.com/oel\\_resources/ccdf\\_plan.aspx](http://www.floridaeearlylearning.com/oel_resources/ccdf_plan.aspx)
- f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? [The OEL recorded the hearing and captured all comments made by the public for consideration or incorporation into the final 2019-2021 Child Care Development Fund Plan. The OEL also invited public comments to be submitted via email \(ccdfplan@oel.myflorida.com\) prior to and during the hearing.](#)

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

- a) Provide the website link to where the Plan, any Plan amendments, and/or waivers are available. Note: A Plan amendment is required if the website address where the Plan is posted is changed. [The plan is posted on OEL's website, http://www.floridaearlylearning.com/oel\\_resources/ccdf\\_plan.aspx](http://www.floridaearlylearning.com/oel_resources/ccdf_plan.aspx)
- b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe the strategies below, including any relevant website links as examples.
  - ☒ Working with advisory committees. Describe: [The OEL created a CCDF Sub-Committee to provide input on the development of the 2019- 2021 Child Care and Development Fund State Plan.](#)
  - ☐ Working with child care resource and referral agencies. Describe: \_\_\_\_\_
  - ☐ Providing translation in other languages. Describe: \_\_\_\_\_
  - ☒ Sharing through social media (e.g., Twitter, Facebook, Instagram, email). Describe: [OEL shared information regarding development of the CCDF Plan through email and the website prior to the hearing.](#)
  - ☒ Providing notification to stakeholders (e.g., provider groups, parent groups). Describe: [Provider groups were invited to be members of the CCDF sub-committee.](#)
  - ☐ Other. Describe: \_\_\_\_\_

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

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

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

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

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



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

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

- ☒ (REQUIRED) Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns. Describe the coordination goals and process: [Local public school district representatives received invitations to the workshop and were provided drafts for comments.](#)
- ☒ (REQUIRED) State Advisory Council on Early Childhood Education and Care or similar coordinating body (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe the coordination goals and process: [The CCDF plan sub-committee is composed of all the stakeholders required for coordination. These stakeholders are provided with copies of the draft plan and are invited to provide input on multiple occasions throughout the drafting process.](#)
  - ☒ Check here if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.
- ☒ (REQUIRED) Indian tribe(s) and/or tribal organization(s), at the option of individual tribes. Describe the coordination goals and process, including which tribe(s) was consulted: [The OEL extended an invitation to the Miccosukee Tribe to participate in the drafting of the CCDF plan.](#)
  - ☐ N/A—There are no Indian tribes and/or tribal organizations in the State.
- ☒ (REQUIRED) State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Part B, Section 619 for preschool). Describe the coordination goals and process: [The OEL coordinates efforts with state agencies that oversee implementation of the Individuals with Disabilities Education Act \(IDEA\). The Florida Department of Health \(DOH\) oversees Part C, Early Steps Program; and the Florida Department of Education \(DOE\) oversees Part B, Pre-kindergarten Programs for Children with Disabilities. Early Head Start grantees coordinate with the Early Steps Program to recruit and provide comprehensive services to infants and toddlers with disabilities. The OEL maintains a statewide toll-free Warm Line for the purpose of providing assistance and consultation to child care personnel about health, developmental, disability and special needs issues. Early learning coalitions collaborate with comparable local service providers. Many utilize inclusion specialists \(employed by the early learning coalition or other service providers\) to promote increased awareness of early childhood inclusion issues and provide training](#)

and technical assistance regarding the needs of children with disabilities. Local inclusion specialists work with child care personnel on issues such as typical and atypical development; environmental adaptations; social and emotional needs of children, managing challenging behaviors; and strategies to help children derive maximum benefit from the child care experience. In addition, a representative of programs serving children with disabilities serves as a member of each early learning coalition board. The Florida Expanding Opportunities Workgroup for early childhood inclusion, a cross-agency initiative promoting inclusive options for young children with disabilities and their families, representing DOE, OEL, DOH, Children's Medical Services Early Steps, the Florida Head Start State Collaboration Office, parent organizations, the Florida Developmental Disabilities Council, institutions of higher education, family members and representatives from community programs has transitioned to OEL's steering committee for the inclusion and child identification initiatives. This group, now known as the Florida Inclusion Network has established a strategic plan to expand opportunities to children with special needs through greater collaboration at the state and local levels. Additionally, the workgroup is providing OEL support and expertise with the design of each quality initiative to ensure incorporation of inclusive practices for children with all exceptionalities. The OEL also works with the Florida Interagency Coordination Council for Infants and Toddlers, the steering committee for the Part C program in Florida to align efforts supporting inclusion in infants and toddlers. Additionally, the OEL is participating in a workgroup with Part C and Part B representatives to coordinate a streamlined professional development system for the early care and education workforce.

- ☒ (REQUIRED) State/territory office/director for Head Start state collaboration. Describe the coordination goals and process: Successful collaborations between Head Start, Early Head Start and Migrant and Seasonal Head Start grantees and OEL have expanded opportunities for additional children to receive Head Start comprehensive services (as described in 45 CFR Parts 98 and 99, Section 98.12). Using a variety of service delivery models, and maximizing the funds, Head Start and local early learning coalitions can provide more families with more comprehensive services, thus better meeting the needs of working families throughout the state. Head Start grantee agencies may also participate in VPK and currently provide VPK services to nearly 10,000 Head Start 4-year-old children. Each early learning coalition board has a representative member from Head Start. As a provision of the Revised Head Start Act of 2007, Head Start grantees must develop agreements with their early learning coalitions for enhanced communication, service delivery and data collection purposes. At the state level, the Head Start State Collaboration Office is housed within OEL and they work closely together on policies.
- ☒ (REQUIRED) State/territory agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals and process: The OEL coordinates with DOH for KidCare (state children's health insurance program), early



[intervention services through Children's Medical Services, Early Steps and the Child Care Food Program to enhance and align the quality of services. Some early learning coalitions contract with local county health departments to enhance the quality of services to families. A county health department director or designee serves on each early learning coalition board. The OEL's Warm Line links child care providers to early intervention services such as Early Steps.](#)

- ☒ (REQUIRED) State/territory agency responsible for employment services/workforce development. Describe the coordination goals and process: [The Department of Economic Opportunity \(DEO\) coordinates with DCF to implement employment and training work requirements for TANF recipients. The goal of these efforts is to coordinate services and resources and fund coordination and availability of services at One-Stop Centers](#)
- ☒ (REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK). Describe the coordination goals and process: [The Florida Department of Education Office of Early Learning \(OEL\) is the Lead Agency responsible for administering the State's CCDF program. Early learning coalition board representation includes the district school superintendent. Early learning coalitions and RCMA work with local school districts and community colleges within their areas to provide supports or direct services for the School Readiness and VPK Education programs. Coordination efforts with DOE also include development of the Florida Early Learning Developmental Standards: Birth to Five, development of VPK Standards for children enrolled in VPK programs and administration of accountability requirements for the VPK Program through development and implementation of the Florida Kindergarten Readiness Screener \(FLKRS\). These efforts assist the state in enhancing and aligning quality of services.](#)
- ☒ (REQUIRED) State/territory agency responsible for child care licensing. Describe the coordination goals and process: [The Department of Children and Families \(DCF\) is responsible for child care licensing and regulation. Pursuant to s. 402.26, F.S., the legislative intent is that DCF must ensure that children are well cared for in a safe, healthy, positive and educational environment by trained, qualified child care staff in licensed child care arrangements. Florida law identifies those child care establishments that must be licensed. State licensure standards address health, sanitation, safety and adequate physical surroundings; health and nutrition; and child development needs of children in child care. The DCF is statutorily responsible for administering child care licensing and training in 62 of the state's 67 counties. State law also allows county governments with licensing standards that meet or exceed state minimum standards to designate a local licensing agency \(LLA\) to license child care facilities in their counties. Currently, five counties have local licensing and inspection programs. In the remaining counties, DCF performs child care regulatory and compliance activities for licensed child care arrangements. Pursuant to s. 402.307, F.S., DCF's oversight responsibility for child care licensing in the five locally licensed counties is: - Within 30 days after the](#)

promulgation of state minimum standards, each county shall provide DCF with a copy of its standards if they differ from the state minimum standards. At the same time, each county shall provide DCF with the administrative procedures it intends to use for the licensing of child care facilities. - The DCF shall have the authority to determine if local standards meet or exceed state minimum standards. Within 60 days after the county has submitted its standards and procedures, DCF, upon being satisfied that such standards meet or exceed state minimum standards and that there is compliance with all provisions of ss. 402.301- 402.319, F.S., shall approve the local licensing agency. Approval to issue licenses for DCF shall be renewed annually. For renewal, the LLA shall submit to DCF a copy of the licensing standards and procedures applied. An onsite review may be made if deemed necessary by DCF. - If, following an onsite review, DCF finds the LLA is not applying the approved standards, DCF shall report the specific violations to the county commission of the involved county, which shall investigate the violations and take whatever action necessary to correct them. - To ensure that accurate statistical data are available, each local licensing agency shall report annually to DCF the number of child care facilities under its jurisdiction, the number of children served, the ages of children served and the number of revocations or denials of licenses. OEL, in cooperation with the early learning coalitions, coordinates with the DCF and the local licensing agencies to avoid duplicating interagency activities, such as health and safety monitoring. The DCF and the LLA's conduct inspections required for CCDF providers and provide that information on a public website for viewing.

- ☒ (REQUIRED) State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination goals and process: The OEL coordinates with DOH to share resources on healthy food and nutrition practices and to reduce fraud in the Child and Adult Care Food Program. The goal is to align services.
- ☒ (REQUIRED) McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons. Describe the coordination goals and process: The Homeless Education Program in the Florida Department of Education (DOE) participates on advisory groups and provides consultation, as needed, on outreach and identification of qualifying families. Local Education Agency (LEA) Homeless Education Liaisons provide School Readiness Program information to newly identified homeless families and make referrals to their local ELC. Head Start, Early Head Start and Migrant and Seasonal Head Start programs also coordinate with their McKinney-Vento Liaisons to recruit and enroll homeless families through partnership agreements with LEAs. This coordination of services assists the state in developing a supply of quality care for the homeless population.
- ☒ (REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program. Describe the coordination goals and process: The Department of Children and Families (DCF) is responsible for the administration of TANF eligibility. The

OEL and ELCs coordinate child care placements for TANF recipients to help ensure that TANF requirements are met and to expand accessibility and continuity of care.

- ☒ (REQUIRED) Agency responsible for Medicaid and the state Children's Health Insurance Program. Describe the coordination goals and process: The Florida Agency for Healthcare Administration (ACHA) is responsible for the administration of Medicaid in Florida. The OEL coordinates with ACHA on the drafting of the CCDF plan to ensure that any opportunities for coordination are utilized.
- ☒ (REQUIRED) State/territory agency responsible for mental health. Describe the coordination goals and process: The OEL coordinates with the Florida Association for Infant Mental Health regarding the draft CCDF plan. Additionally, OEL coordinates with FAIMH to support infant and early childhood mental health initiatives around the state. The current collaboration is focused on early childhood quality improvement coaches cross-training in mental health practices.
- ☒ (REQUIRED) Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Describe the coordination goals and process: The CCR&R State Network office, housed within OEL, contracts and coordinates with 30 early learning coalitions throughout the state to offer families and providers comprehensive child care resource and referral services at the local level, including consumer education, provider listings, information on financial and community resources, and provider training and technical assistance. State network staff develop and provide local CCR&R agencies with consumer education resources to educate parents and providers on best practices in child development and early childhood care and education. This coordination links comprehensive services to children in child care settings.
- ☒ (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals and process: The OEL coordinates with the Florida After-School Network (FAN) regarding the draft CCDF plan. OEL also coordinates with FAN regarding upcoming rule/policy changes that would affect after school programs. OEL also reviews the standards developed through FAN and assists with guidance on the Network's current initiatives. The State's Co-Administrator is a FAN Board Member.
- ☒ (REQUIRED) Agency responsible for emergency management and response. Describe the coordination goals and process: The Department of Children and Families (DCF) is responsible for emergency management and response for childcare throughout the state of Florida. DCF is involved with the composition of the plan from start to finish and the OEL continuously meets with DCF during the year on emergency management coordination.

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

- ☒ State/territory/local agencies with Early Head Start – Child Care Partnership grants. Describe: [The OEL collaborates with the Head Start State Collaboration Office, the ELCs and the nine Early Head Start- Child Care Partnership grantees to coordinate the delivery of services, inform policy decisions and to ensure smooth implementation of these new grants. OEL has set up an email address dedicated to policy questions specific to these grants. Some of these policy decisions, for these grantees, include extending to a 12-month redetermination of family eligibility instead of a six-month redetermination process and waiving parent fees on a case by case basis when parents engage in Early Head Start parent training activities.](#)
- ☒ State/territory institutions for higher education, including community colleges. Describe: [The OEL also contracts with the University of South Florida to provide the Home Instruction for Parents of Preschool Youngsters \(HIPPY\) program, which is a home-based instruction program for at-risk families with children ages 2 to 5. This coordination of services assists the state in linking comprehensive services to children in child care settings for a smooth transition between programs. Additionally, OEL works with institutes of higher education to assist with articulation processes throughout the state. OEL sits on an advisory board designing course requirements for state certificate programs offered through institutes of higher education.](#)
- ☐ Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services. Describe:
- ☒ State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe: [The OEL collaborates with the with the Maternal and Early Childhood Home Visitation program to design streamlined systems of care as well as scope development for all related quality initiatives.](#)
- ☒ Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment Program. Describe: [The Florida Agency for Healthcare Administration \(AHCA\) is responsible for the administration of Early and Periodic Screening, Diagnostic, and Treatment program in Florida. The OEL coordinates with AHCA on the drafting of the CCDF plan to ensure that any opportunities for coordination are utilized.](#)
- ☒ State/territory agency responsible for child welfare. Describe: [The OEL coordinates with the DCF Family Safety Office to promote child safety and ensure at-risk children have continuity of care and access to high-quality care.](#)
- ☐ State/territory liaison for military child care programs. Describe:
- ☒ Provider groups or associations. Describe: [The OEL is in regular contact with provider associations regarding rules, regulations, and policy that effect child care providers in the state. Wherever possible, the OEL works with provider associations to resolve any policy related issues that arise.](#)

- ☐ Parent groups or organizations. Describe:
- ☐ Other. Describe:

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

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

As a reminder, CCDF funds may be used in collaborative efforts with Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and CCDF is strongly encouraged by sections 640(g)(1)(D) and (E); 640(h); 641(d)(2)(H)(v); and 642(e)(3) of the Head Start Act in the provision of full working day, full calendar year comprehensive services. To implement such collaborative programs, which share, for example, space, equipment, or materials, grantees may layer several funding streams so that seamless services are provided (Policy and Program Guidance for the Early Head Start – Child Care Partnerships: [https://www.acf.hhs.gov/sites/default/files/occ/acf\\_im\\_ohs\\_15\\_03.pdf](https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf)).

### 1.5.1 Does the Lead Agency choose to combine funding for CCDF services for any programs identified in 1.4.1 (98.14(a)(3))?

- ☐ No (If no, skip to question 1.5.2)
- ☒ Yes. If yes, describe at a minimum:
  - a) How you define “combine” [Layering of funds to provide child care and comprehensive services. The OEL blends state and federal funds for subsidized child care at the state level and allocates the blended funds for services to local agencies.](#)
  - b) Which funds you will combine [State, CCDF, TANF, SSBG and private funds are combined at the State and local levels for seamless service delivery for families. CCDF is used to provide wrap-around care for school readiness children participating in VPK. EHS-CC Partnership grant funds and CCDF are layered to provide comprehensive services for working families meeting EHS requirements, and can be allocated to other participating children.](#)
  - c) Your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working

families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations. [The purpose and expected outcomes for combining funds is to increase access to services, extend the services available and increase capacity for quality services through combined support for early childhood educators and early care and education programs. This results in a seamless process for families applying for services and for agencies that administer the program.](#)

- d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level? [Funds are combined at the state and local levels. At the State level, the legislature annually appropriates state and federal School Readiness funds to the early learning coalitions. OEL enters into a grant agreement with each early learning coalition and provides the appropriated funds to the ELCs through Notice\(s\) of Award. Additionally, ELCs may layer in local funding to provide child care and comprehensive services. More detail can be found in section 8.1.](#)
- e) How are the funds tracked and method of oversight? [School readiness expenditures are tracked at the local and state levels. Expenditures are tracked each month, and OEL monitors subrecipients for adherence to contract terms.](#)

- 1.5.2 Which of the following funds does the Lead Agency intend to use to meet the CCDF matching and MOE requirements described in 98.55(e) and 98.55(h)? Check all that apply.

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

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

Use of Private Funds for Match or Maintenance of Effort: Donated funds do not need to be under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies do need to identify and designate in the state/territory Plan the donated funds given to public or private entities to implement the CCDF child care program (98.55(f)).

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

- If checked, identify the source of funds: [1. State General Revenue](#) [2. Local County Governments – some local early learning coalitions receive matching funds from local county governments and special taxing districts](#)
  - If known, identify the estimated amount of public funds that the Lead Agency will receive: \$
- ☒ Private donated funds are used to meet the CCDF matching funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes (98.53(f)).
- If checked, are those funds:
    - ☐ donated directly to the State?
    - ☒ donated to a separate entity(ies) designated to receive private donated funds?
  - If checked, identify the name, address, contact, and type of entities designated to receive private donated funds: [Florida Early Learning Coalitions \(ELC\) and other not-for-profits](#)

**ELC of Alachua**

**Jacki Hodges**

[jhodges@elcalachua.org](mailto:jhodges@elcalachua.org)

[4424 NW 13th Street, Suite A-5](#)

[Gainesville, FL 32609](#)

[\(P\) 352-375-4110 Ext. 137](#)

[\(F\) 352-335-1429](#)

**ELC of Big Bend (Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla)**

**Matt Guse**

[mguse@elcbigbend.org](mailto:mguse@elcbigbend.org)

[2639 N. Monroe Street, Bldg. C](#)

[Tallahassee, FL 32303](#)

[\(P\) 850-552-7338](#)

[\(F\) 850-922-0075](#)

**ELC of Brevard**

**Sky Beard**

[sbeard@elcbrevard.org](mailto:sbeard@elcbrevard.org)

[P.O. Box 560692](#)

[Rockledge, FL 32956-0692](#)

[\(P\) 321-637-1800 Ext. 2010](#)

[\(F\) 321-637-7244](#)

**ELC of Broward**

**Renee Jaffe**

[rjaffe@elcbroward.org](mailto:rjaffe@elcbroward.org)

[6301 NW 5th Way, Suite 3400](#)

Ft. Lauderdale, FL  
(P) 954-377-2188

**ELC of Duval**

**Denise Marzullo**  
dmarzullo@elcduval.org  
6500 Bowden Road, Suite 290  
Jacksonville, FL 32216  
(P) 904-208-2040 Ext. 204

**ELC of Escambia**

**Bruce Watson**  
bwatson@elcescambia.org  
3300 N. Pace Blvd, Suite 210  
Pensacola, FL 32505  
(P) 850-595-5402  
(F) 850-332-5140

**ELC of Flagler and Volusia**

**DJ Lebo**  
djlebo@elcfv.org  
135 Executive Circle, Suite 100  
Daytona Beach, FL 32114  
(P) 386-323-2400 Ext. 196

**ELC of Florida's Gateway (Columbia, Hamilton, Lafayette, Suwannee, Union)**

**LaShone Surrency**  
lsurrency@elc-fg.org  
1104 SW Main Blvd  
Lake City, FL 32025  
(P) 386-752-9770  
(F) 386-752-9786

**ELC of Florida's Heartland (Charlotte, DeSoto, Hardee, Highlands)**

**Anne Bouhebent**  
abouhebent@elcfh.org  
2886 Tamiami Trail, Suite 1  
Port Charlotte, FL 33952  
(P) 941-255-1650 Ext. 127  
(F) 941-255-5856

**ELC of Hillsborough**



**Gordon Gillette**

[ggillette@elchc.org](mailto:ggillette@elchc.org)

[6800 N. Dale Mabry Hwy, Suite 150](#)

[Tampa, FL 33614](#)

[\(P\) 813-515-0799](#)

**ELC of IRMO (Indian River, Martin, Okeechobee)**

**Migdalia Rosado, Interim**

[mrosado@elcirmo.org](mailto:mrosado@elcirmo.org)

[10 SE Central Parkway, Suite 200](#)

[Stuart, FL 34994](#)

[\(P\) 772-223-3833](#)

**ELC of Lake**

**Lesha Buchbinder**

[lbuchbinder@elclc.org](mailto:lbuchbinder@elclc.org)

[1300 Citizens Blvd, Suite 206](#)

[Leesburg, FL 34748](#)

[\(P\) 352-435-0566](#)

[\(F\) 352-435-0235](#)

**ELC of Manatee**

**Paul Sharff, CEO**

[psharff@elc-manatee.org](mailto:psharff@elc-manatee.org)

[600 8th Avenue West, Suite 100](#)

[Palmetto, FL 34221](#)

[\(P\) 941-757-2900 Ext. 201](#)

[\(F\) 941-757-2915](#)

**ELC of Marion**

**Roseann Fricks**

[rfricks@elc-marion.org](mailto:rfricks@elc-marion.org)

[2300 SW 17th Road](#)

[Ocala, FL 34471](#)

[\(P\) 352-369-2315 Ext.15](#)

[\(F\) 352-369-2475](#)

**ELC of Miami-Dade/Monroe**

**Evelio C. Torres**

[etorres@elcmdm.org](mailto:etorres@elcmdm.org)

[2555 Ponce de Leon Blvd \(5th floor\)](#)

[Coral Gables, FL 33134](#)

[\(P\) 305-646-7220](tel:305-646-7220)

[\(F\) 305-447-1608](tel:305-447-1608)

**ELC of Nature Coast (Citrus, Dixie, Gilchrist, Levy, Sumter)**

**Sonya Bosanko**

[sbosanko@elc-naturecoast.org](mailto:sbosanko@elc-naturecoast.org)

[382 N. Suncoast Blvd.](#)

[Crystal River, FL 34429](#)

[\(P\) 352-563-9939](tel:352-563-9939)

[\(F\) 352-563-5933](tel:352-563-5933)

**ELC of North Florida (Baker, Bradford, Clay, Nassau, Putnam, St. Johns)**

**Dawn Bell**

[dbell@elcnorthflorida.org](mailto:dbell@elcnorthflorida.org)

[2450 Old Moultrie Road, Suite 103](#)

[St. Augustine, FL 32086](#)

[\(P\) 904-342-2267](tel:904-342-2267)

[\(F\) 904-342-2268](tel:904-342-2268)

**ELC of Northwest Florida (Bay, Calhoun, Franklin, Gulf, Holmes, Jackson, Washington)**

**Susan Gage**

[suzan.gage@elcnwf.org](mailto:suzan.gage@elcnwf.org)

[703 West 15th Street, Suite A](#)

[Panama City, FL 32401](#)

[\(P\) 850-747-5400](tel:850-747-5400)

[\(F\) 850-747-5450](tel:850-747-5450)

**ELC of Emerald Coast**

**Renea Black**

[rblack@elc-ow.org](mailto:rblack@elc-ow.org)

[107 Tupelo Ave., SE](#)

[Ft. Walton Beach, FL 32548](#)

[\(P\) 850-833-3627](tel:850-833-3627)

[\(F\) 850-833-3632](tel:850-833-3632)

**ELC of Orange**

**Karen Willis**

[karen@elcoc.org](mailto:karen@elcoc.org)

[7700 Southland Blvd., Suite 100](#)

[Orlando, FL 32809](#)

[\(P\) 407-841-6607 x.106](tel:407-841-6607 x.106)

[\(F\) 407-749-0282](tel:407-749-0282)

**ELC of Osceola**

**Charles A. Rogers**

[crogers@elcosceola.org](mailto:crogers@elcosceola.org)

[1631 E. Vine St, Suite E](#)

[Kissimmee, FL 34744](#)

[\(P\) 407-933-5353](#)

[\(F\) 407-933-5012](#)

**ELC of Palm Beach**

**Warren Eldridge**

[warren.eldridge@elcpalmbeach.org](mailto:warren.eldridge@elcpalmbeach.org)

[2300 High Ridge Road, Suite 115](#)

[Boynton Beach, FL 33426](#)

[\(P\) 561-214-7433](#)

[\(F\) 561-214-7440](#)

**ELC of Pasco and Hernando**

**Steve Knobl**

[s.knobl@phelc.org](mailto:s.knobl@phelc.org)

[15506 County Line Road](#)

[Spring Hill, FL 34610](#)

[\(P\) 727-233-8291](#)

[\(C\) 813-947-0196](#)

**ELC of Pinellas**

**Lindsay Carson**

[lcarsen@elcpinellas.net](mailto:lcarsen@elcpinellas.net)

[2536 Countryside Blvd., Suite 500](#)

[Clearwater, FL 33763](#)

[\(P\) 727-400-4440](#)

[\(F\) 727-548-1509](#)

**ELC of Polk**

**Marc Hutek**

[DianeBowman@elcpolk.org](mailto:DianeBowman@elcpolk.org)

[115 South Missouri Ave., Suite 501](#)

[Lakeland, FL 33815-4602](#)

[\(P\) 863-577-2462](#)

**Redlands Christian Migrant Association (RCMA)**

**Gayane Stepanian**

[gayane.stepanian@rcma.org](mailto:gayane.stepanian@rcma.org)  
[402 West Main Street](#)  
[Immokalee, FL 34142](#)  
[\(P\) 239-658-3560 Ext. 252](#)  
[\(F\) 239-658-3571](#)

**ELC of Santa Rosa**

**Melissa Stuckey**

[stuckey@elcsantarosa.org](mailto:stuckey@elcsantarosa.org)  
[6460 Justice Avenue](#)  
[Milton, FL 32570](#)  
[\(P\) 850-983-5313](#)  
[\(F\) 850-983-5312](#)

**ELC of Sarasota**

**Janet Kahn**

[jkahn@earlylearningcoalitionsarasota.org](mailto:jkahn@earlylearningcoalitionsarasota.org)  
[1750 17th Street, Building L](#)  
[Sarasota, FL 34234](#)  
[\(P\) 941-954-4830](#)  
[\(F\) 941-954-4831](#)

**ELC of Seminole**

**Jennifer Grant**

[jgrant@seminoleearlylearning.org](mailto:jgrant@seminoleearlylearning.org)  
[280 Hunt Park Cove, Suite 1020](#)  
[Longwood, FL 32750](#)  
[\(P\) 407-960-2461](#)  
[\(F\) 407-960-2489](#)

**ELC of Southwest Florida (Collier, Glades, Hendry, Lee)**

**Susan Block**

[susan.block@elcofswfl.org](mailto:susan.block@elcofswfl.org)  
[2675 Winkler Avenue, Suite 300](#)  
[Ft. Myers, FL 33901](#)  
[\(P\) 239-935-6165](#)  
[\(F\) 239-935-6181](#)

**ELC St. Lucie**

**Anthony "Tony" Loupe**

[loupet01@elcslc.org](mailto:loupet01@elcslc.org)  
[4472 Okeechobee Rd.](#)

[Ft. Pierce, FL 34947](#)

[\(P\) 772-595-6424](#)

[\(F\) 772-595-6081](#)

- If known, identify the estimated amount of private donated funds that the Lead Agency will receive: \$
- ☒ State expenditures for pre-K programs are used to meet the CCDF matching funds requirement. If checked, provide the estimated percentage of the matching fund requirement that will be met with preK expenditures (not to exceed 30 percent): [30%](#)
  - If the percentage is more than 10 percent of the matching fund requirement, describe how the State will coordinate its preK and child care services: [The Office of Early Learning and early learning coalitions coordinate services to ensure prekindergarten programs meet the needs of working parents by:](#)
    - [Assisting parents through the child care resource and referral process;](#)
    - [Providing School Readiness wrap-around care \(as funding is available\) to qualified clients concurrently enrolled in the Voluntary Prekindergarten \(VPK\) Education program;](#)
    - [Maximizing resources to serve more children and families; and](#)
    - [Encouraging parents to register for the VPK Education program in addition to other programs and thereby maximizing available resources appropriately.](#)
  - If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: \$ [17,066,996.](#)
  - Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents: [The Office of Early Learning and early learning coalitions coordinate the state's VPK and child care services to expand the availability of child care so that:](#)
    - [Child care programs are eligible to receive VPK funding;](#)
    - [School Readiness wrap-around care may be provided for qualified clients concurrently enrolled in VPK programs;](#)
    - [Parents and providers are made aware of the availability of programs;](#)
    - [The needs of working parents continue to be met; and](#)
    - [The level of effort in full day/full year child care service is increased.](#)
- ☒ State expenditures for preK programs are used to meet the CCDF maintenance-of-effort requirements. If checked,
  - The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.55(h)(1) and 98.15(6).
    - ☐ No
    - ☒ Yes
  - Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents: [The Office of Early Learning and early learning coalitions](#)

coordinate the state's VPK and child care services to expand the availability of child care so that:

- Child care programs are eligible to receive VPK funding;
- School Readiness wrap-around care may be provided for qualified clients concurrently enrolled in VPK programs;
- Parents and providers are made aware of the availability of programs;
- The needs of working parents continue to be met; and
- The level of effort in full day/full year child care service is increased.

- Estimated percentage of the MOE Fund requirement that will be met with preK expenditures (not to exceed 20 percent): 20%
- If the percentage is more than 10 percent of the MOE requirement, describe how the State will coordinate its preK and child care services to expand the availability of child care: The Office of Early Learning and early learning coalitions coordinate its VPK and child care services to expand the availability of child care so that:
  - Child care programs are eligible to receive VPK funding;
  - School Readiness wrap-around care may be provided for qualified clients concurrently enrolled in VPK programs;
  - Parents and providers are made aware of the availability of programs;
  - Providers receive standards and assistance with accreditation or licensure of programs;
  - The needs of working parents continue to be met; and
  - The level of effort in full day/full year child care service is increased.
- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the MOE Fund requirement: \$ 6,683,174

## **1.6 Public-Private Partnerships**

Lead Agencies are required to describe how they encourage public-private partnerships among other public agencies, tribal organizations, private entities, faith-based organizations, businesses or organizations that promote business involvement, and/or community-based organizations to leverage existing service delivery (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation) (658E(c)(2)(P)). ACF expects these types of partnerships to leverage public and private resources to further the goals of the CCDBG Act. Lead Agencies are required to demonstrate how they encourage public-private partnerships to leverage existing child care and early education service-delivery systems and to increase the supply and quality of child care services for children younger than age 13, for example, by implementing voluntary shared service alliance models (98.14(a)(4)).

- 1.6.1 Identify and describe the entities with which and the levels at which the state/territory is partnering (level—state/territory, county/local, and/or programs), the goals of the partnerships, the ways that partnerships are expected to leverage existing service-delivery systems, the method of partnering, and examples of activities that have resulted from these partnerships (98.16(d)(2)). Florida's Early Learning Advisory Council, also referred to as ELAC, is an advisory board made up of governor-appointed early learning coalition chairs. It provides recommendations to OEL's Executive Director for the improvement of child care programs. The

council submits recommendations on such matters as the administration of the VPK Program, the School Readiness Program and the Child Care Resource and Referral Program (CCR&R). The Florida Child Care Executive Partnership (CCEP) program is a public/private partnership program that helps employers meet the needs of working parents. It operates under the statutory authority of s. 1002.94, F.S., which provides the board and participating partners staff support through OEL. The early learning coalitions are responsible for seeking local business partnerships and securing commitments from businesses, non-profit organizations and government entities. In order to request CCEP funds, each early learning coalition must annually submit a CCEP funding application listing the secured partnerships and the corresponding monetary commitment. Through this program, federal and state funding is "matched" with contributions from local governments, charitable foundations and private businesses on a dollar-for-dollar basis to provide child care services to participating families.

#### Local Level Public-Private Collaborations

Statutorily, the School Readiness Program is administered by OEL through 30 or fewer early learning coalitions at the local level, which are all not-for-profit organizations that coordinate service delivery efforts. Thus, most public-private partnerships are formed and realized in local communities. The OEL encourages and monitors these efforts. Each early learning coalition has a board that must have at least 15, but not more than 30, members. The law requires that the board of each early learning coalition include the following members:

- Governor-appointed chair and two other members who must meet the same qualifications as private sector business members.
- A Department of Children and Families regional administrator or a permanent designee authorized to make decisions on behalf of the department.
- A district superintendent of schools or a permanent designee authorized to make decisions on behalf of the district.
- A local workforce development board executive director or a permanent designee. - A county health department director or a designee.
- A children's services council or juvenile welfare board chair or executive director, if applicable.
- An agency head of a local licensing agency as defined in s. 402.302, F.S., where applicable.
- A president of a Florida College System institution or a permanent designee.
- One member appointed by a board of county commissioners or the governing board of a municipality.
- A Head Start director.
- A representative of private for-profit child care providers, including private for-profit family day care homes.
- A representative of faith-based child care providers.
- A representative of programs for children with disabilities under the federal Individuals with Disabilities Education Act.
- A central agency administrator, where applicable.

Including the members appointed by the governor, more than one-third of the members of each early learning coalition must be private-sector business members. One benefit from local early learning coalitions including members representing local public and private entities is that the coalitions are more easily able to raise and attract private funds to enhance the quality of care.

Other Examples and Results of Public-Private Collaborations at the Local Level Under Florida law, county governments are empowered to create children's services councils, which are special taxing districts that empower local voters to levy ad valorem taxes (e.g., property taxes) earmarked for children's services. There are 11 children's services councils across the state of Florida. Eight are independent special taxing districts and the remaining three are dependent upon local governmental entities for funding. Children's services councils are successful public-private partnerships that enable local communities to address many service needs of children and their families in local communities. Early learning coalitions and RCMA work collaboratively with the children's services councils where they exist, and this collaboration results in the infusion of local funds, which are used to expand local early learning coalition services and efforts. Early learning coalitions have partnered with numerous public and private entities to enhance service delivery. A few examples are

- Teacher Education and Compensation Helps (T.E.A.C.H.) Early Childhood® Scholarship Program Expansion - some early learning coalitions use business donations to supplement T.E.A.C.H.® scholarships.

- The Child Care Florida WAGE\$® Program provides salary supplements to early learning providers in participating early learning coalition service areas based on their education and continuity of employment.

- Collaborative partnerships with community-based care organizations (local child welfare service coordinators) to provide specialized services to foster families and children in protective services.

- Coordination with local civic organizations to provide books and reading opportunities for young children.

- Partnerships with civic organizations and local governments to enhance play and learning opportunities for young children and their families at local parks.

At the local level, early learning coalitions make funding decisions, administer the program, manage contributions and conduct eligibility determinations for families who wish to participate in the program.

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

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

- If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency, provide parents in the State with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.
- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most



appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).

- Collect data and provide information on the coordination of services and supports, including services under 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 State;
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

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

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

**1.7.1 Does the Lead Agency fund local or regional CCR&R organizations?**

- ☐ No. The state/territory does not fund a CCR&R organization(s) and has no plans to establish one.
- ☒ Yes. The state/territory funds a CCR&R organization(s). If yes, describe the following:
- a) What services are provided through the CCR&R organization? [Services include providing child care listings and information about consumer education, financial assistance programs, information on programs for children with special needs and community resources to families. Network staff develop written materials, brochures and guidance documents and offer technical assistance and training designed to support parents and providers.](#)
- b) How are CCR&R services organized, include how many agencies, if there is a statewide network and if the system is coordinated? [The OEL houses the CCR&R State Network and contracts with 30 early learning coalitions to provide CCR&R services locally in each of Florida's 67 counties. Each coalition is responsible for administering CCR&R services to families in its service area. CCR&R services are provided by trained specialists and available to all families regardless of income or individual circumstances. The Florida CCR&R state-level Network works closely with early learning coalitions and local CCR&R offices statewide.](#)

**1.8 Disaster Preparedness and Response Plan**

Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they will address the needs of children—including the need for safe child care, before, during, and after a state of emergency declared by the Governor or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief

and Emergency Assistance Act, 42 U.S.C. 5122)—through a Statewide Disaster Plan that, for a State, is developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to section 642B(b)(1)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i))) or similar coordinating body (98.16(aa)).

- 1.8.1 Describe how the Statewide Child Care Disaster Plan was developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care or similar coordinating body: [The Department of Children and Families developed the statewide Child Care Continuity of Operations plan in collaboration with the Florida Department of Health, the Florida Division of Emergency Management, the Office of Early Learning, and Early Learning Coalitions throughout the state.](#)
- 1.8.2 Describe how the Statewide Disaster Plan includes the Lead Agency’s guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster and temporary operating standards for child care after a disaster: [DCF has guidelines for continuing child care services after a disaster outlined in the Child Care Desk Reference Guide \(CF-Pamphlet 175-2\) for licensing offices statewide. The OEL has procedures and guidelines outlined in the Continuity of Operations Plan \(COOP\) and Program Instruction 240.20 relating to Disaster Guidance to ensure continuity of services and payments. The guidance also addresses determination of eligibility for disaster-impacted families, fee waivers and using quality funds for repair and renovation of programs after a disaster event.](#)
- 1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services: [Immediately after a disaster, DCF Regional-Emergency Operations Teams provide direct instructions to staff regarding whether or not to report to the office, an alternate location, or to telecommute. Within 24 hours after a declared emergency \(hurricane, forest fire, or other natural disaster\), the Florida Administrative Code requires the owner, operator, or director of a child care facility or family day care home \(licensed, large, or registered\) to notify the licensing authority about the status of operation. As soon as practicable after an emergency, Family Services Counselors will focus immediately on contacting facilities and homes to determine their operational status. Results of the assessment will be reported to the R-EOT and H-EOT using the Hurricane Damage Tracking Sheet.](#)
- 1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place—evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions: [Rule 6M-4.620 Health and Safety Checklists and Inspections was promulgated 10/24/2016.   
http://www.floridaeearlylearning.com/sites/www/Uploads/files/Statewide%20Initiatives/Health%20and%20Safety/HS%20Handbook%20Facilities\\_OEL-SR-6202\\_ADA.pdf . The rule requires the following for all school readiness \(CCDF\) providers: The operator must develop a written](#)

emergency preparedness plan that includes, at a minimum, procedures to be taken by the facility during a fire, evacuation, relocation, shelter in place, lockdown and inclement weather (for example: hurricanes, tropical storms or tornadoes), and to facilitate parent/guardian reunification onsite and offsite. The plan must include accommodations for infants and toddlers, if applicable, and must describe how the facility will meet the needs of all children, including children with special needs or with chronic medical conditions, during and following an emergency event.

- 1.8.5 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place for child care staff and volunteers—emergency preparedness training and practice drills as required in 98.41(a)(1)(vii): Rule 6M-4.620 Health and Safety Checklists and Inspections also requires emergency preparedness drills be conducted when children are in care. Each drill outlined in the emergency preparedness plan must be practiced a minimum of one time per year. A current attendance record must accompany staff during the drill or actual emergency and must be used to account for all children. The operator must maintain a written record of emergency preparedness drills showing the type of drill, date conducted, number of children and staff in attendance, and time taken for all individuals to complete the drill. Documentation of conducted fire and emergency preparedness drills must be available at the time of inspection. The operator must prepare and post an emergency evacuation plan in each room of the facility, excluding restrooms, including a diagram of safe routes by which the personnel and children may exit in the event of fire or other emergency requiring evacuation.
- 1.8.6 Provide the link to the website where the statewide child care disaster plan is available: [http://www.dcf.state.fl.us/programs/childcare/docs/Child%20Care%20Continuity%20of%20Operations%20Plan%20\(COOP\)-Disaster%20Preparedness-March%202017.pdf](http://www.dcf.state.fl.us/programs/childcare/docs/Child%20Care%20Continuity%20of%20Operations%20Plan%20(COOP)-Disaster%20Preparedness-March%202017.pdf)

## **2 Promote Family Engagement through Outreach and Consumer Education**

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

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

In this section, Lead Agencies will delineate the consumer and provider education information related to child care, as well as other services, including developmental screenings, which is made available to parents, providers, and the general public and the ways that it is made

available. This section also covers the parental complaint process and the consumer education website that has been developed by the Lead Agency. Finally, this section addresses the consumer statement that is provided to parents supported with CCDF funds.

## **2.1 Outreach to Families with Limited English Proficiency and Persons with Disabilities**

The Lead Agency is required to describe how it provides outreach and services to eligible families with limited English proficiency and persons with disabilities and to facilitate the participation of child care providers with limited English proficiency and disabilities in the CCDF program (98.16(dd)). Lead Agencies are required to develop policies and procedures to clearly communicate program information, such as requirements, consumer education information, and eligibility information, to families and child care providers of all backgrounds (81 FR 67456).

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

- ☒ Application in other languages (application document, brochures, provider notices)
- ☒ Informational materials in non-English languages
- ☒ Website in non-English languages
- ☒ Lead Agency accepts applications at local community-based locations
- ☒ Bilingual caseworkers or translators available
- ☒ Bilingual outreach workers
- ☒ Partnerships with community-based organizations
- ☐ Other. Describe: \_\_\_\_\_

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

- ☐ Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities
- ☒ Websites that are accessible (e.g., Section 508 of the Rehabilitation Act)
- ☒ Caseworkers with specialized training/experience in working with individuals with disabilities
- ☒ Ensuring accessibility of environments and activities for all children
- ☒ Partnerships with state and local programs and associations focused on disability-related topics and issues
- ☒ Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers
- ☒ Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies
- ☒ Availability and/or access to specialized services (e.g., mental health, behavioral specialists, therapists) to address the needs of all children

☐ Other. Describe:

## 2.2 Parental Complaint Process

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

- 2.2.1 Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process: Parents may file complaints by contacting the Department of Children and Families' (DCF) abuse hotline, by contacting the local child care licensing agency or contacting the local Early Learning Coalition. The DCF's webpage provides a directory via an interactive map so parents can easily locate the licensing office in their area. See link: <http://www.myflfamilies.com/service-programs/child-care/parent-resources>. The Office of Early Learning also accepts complaints from parents regarding providers through the Child Care Resource and Referral state network office parent line. Any complaint regarding health, safety, nutrition, or allegations of abuse or neglect is forwarded to licensing or the Child Abuse Hotline, as applicable. Additionally, parents may make complaints regarding fraud, program abuse or mismanagement through OEL's online complaint form. See link: [http://www.floridaeearlylearning.com/Content/Uploads/floridaeearlylearning.com/files/General\\_Complaint\\_Form\\_2016\\_Final\\_PDF\\_ADA.pdf](http://www.floridaeearlylearning.com/Content/Uploads/floridaeearlylearning.com/files/General_Complaint_Form_2016_Final_PDF_ADA.pdf)
- 2.2.2 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring: When the information or alleged violation given in a complaint is verified, the complaint is considered a substantiated complaint. The OEL has an online parent complaint form and takes complaints through calls to the parent line and written correspondence. When complaints are received by OEL, staff collect a summary of the complaint and caller information, including name, county and contact information. Complaints not related to health and safety that are received by OEL's CCR&R staff are resolved through coordination/working with the ELCs, LLAs or DCF, as applicable. However, complaints regarding health and safety violations are sent to DCF, and their process for substantiating and responding to complaints for non-CCDF providers is as follows. DCF Child Care Regulation Program licensing office clerical staff are responsible for receiving complaints, completing intake forms and maintaining complaint tracking logs. The licensing counselor is responsible for the planning, investigation, evaluation, communication and determination of complaints involving violations of child care standards. The Department is authorized to investigate complaints or concerns related to licensing and registration laws and rules. Only complaints alleging violations of licensing or registration standards can be investigated. Complaint investigations must be commenced within 48 hours (2 business days). Serious complaints should be investigated immediately. Once a complaint has been filed, the information is analyzed to identify other agencies that may need to be involved, relevant regulatory and statutory requirements are determined, facility or home history is reviewed and a plan for the investigation is developed. Investigation of a complaint requires an on-site visit to

the facility or home at which time the allegations are discussed with the facility director or home operator. During the on-site investigation, evidence may be gathered by interviews as appropriate and applicable and other information gathering methods can be used (incident reports, written statements, photographs, observation of child(ren), and examination of supplementary evidence such as enrollment forms, time sheets, attendance records, menus, etc.). After the on-site investigation, the evidence is evaluated to determine whether the complaint is valid or not and if there are possible violations or deficiencies. The analyzed information is then made into a complaint inspection report. A complaint inspection report must be completed in its entirety, thoroughly documenting allegations, response, and investigative findings in the Licensing Application and archived in the CCIS. The investigation is considered “complete” when all information has been evaluated and findings are determined. Once all of the evidence has been evaluated and a decision has been made, the findings must be reviewed with the facility owner/director or home operator. A copy of the complaint inspection and complaint narrative is given to the facility owner/director or home operator upon completion of the investigation and an exit interview is conducted. If a plan for corrective action is required, the licensing counselor must complete a follow up to determine compliance. Upon completion of required corrective actions, compliance should be documented in the CCIS through completion of a re-inspection report in the Licensing Application. All investigations of complaints must be included in the licensing/registration file regardless of the findings. The provider must come into compliance within a reasonably determined timeline.

- 2.2.3 Describe the Lead Agency’s process and timeline for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring: Complaints alleging violations of health and safety standards pursuant to statutory and rule language are investigated. Complaint investigations must be commenced within 2 business days. Investigation of a complaint requires an on-site visit to the facility or home at which time the allegations are discussed with the facility director or home operator. The investigation may require more than one on-site contact if the licensing counselor is having difficulty determining if the allegations can be substantiated. When a complaint is received that includes allegations that could possibly be child abuse, neglect or abandonment, it is the licensing counselor's responsibility, or whomever takes the complaint, to obtain the necessary information and refer the reporter to the Central Abuse Hotline.
- 2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints: All complaint inspections are stored in the licensing system (CARES). Complaint inspections that contain a finding of non-compliance are displayed to the public after all necessary investigations have been completed.
- 2.2.5 Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3: All complaint inspections regarding health and safety standards are stored in the licensing system (CARES). Complaint inspections that contain a finding of non-compliance are displayed to the public after all necessary investigations have been completed.
- 2.2.6 Provide the citation to the Lead Agency’s policy and process related to parental complaints: <http://www.myflfamilies.com/service-programs/child-care/parent-resources>

## **2.3 Consumer Education Website**



States and Territories are required to provide information to parents, the general public, and when applicable, child care providers through a State website, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III)). The website must include information to assist families in understanding the policies and procedures for licensing child care providers. The website information must also include provider-specific information, monitoring and inspection reports for the provider, and the quality of each provider (if such information is available for the provider) (658E(c)(2)(D); 98.33(a)). The website should also provide access to a yearly statewide report on deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To assist families with any additional questions, the website should provide contact information for local child care resource and referral organizations and any other agencies that can assist families in better understanding the information on the website.

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

- 2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible: [The Department of Children and Families \(DCF\) website is the first domain that appears when child care in Florida is searched via google. DCF ensures the content and formatting of the site meets the ADA requirements. Information placed on the website is written using plain language. Images used are appropriate to the subject of the content and are culturally appropriate. DCF works with outside entities to view and utilize webpage. The website is constantly viewed and monitored for comments from the general public to ensure it is user-friendly, or to include or clarify information, if necessary.](#)
- 2.3.2 Describe how the website ensures the widest possible access to services for families that speak languages other than English (98.33(a)):

[The OEL ensures that the \[www.floridaeearlylearning.com\]\(http://www.floridaeearlylearning.com\) can be translated through the use of Google Translate. Florida has a large population of Spanish and Haitian Creole speaking residents; print materials developed by OEL are also translated into these languages.](#)

[The Department ensures that the \[www.myflfamilies.com/childcare\]\(http://www.myflfamilies.com/childcare\) can be translated through the use of Google Translate. In addition, the Department has the following resources available:](#)

#### [DCF Auxiliary Aids and Service Plan](#)

[The Americans with Disabilities Act of 1990 \(ADA\), Americans with Disabilities Act Amendments Act of 2008 \(ADAAA\), and Title VI of the Civil Rights Act of 1964 \(as amended\), requires recipients receiving federal financial assistance to develop procedures, policies, and protocol to provide auxiliary aids for persons with disabilities and Limited English Proficient. This guide provides protocol and available resources for the implementation of Departmental policy and procedures for the provision of auxiliary aids and services in ensuring accessibility to all programs, benefits, and services to persons with disabilities and foreign language interpreters for persons with Limited English Proficiency.](#)

#### [Statewide Auxiliary Aids and Service Plan](#)

Region Points of Contact and Multilingual Staff (Please refer to the statewide auxiliary aids plan above for a complete list of available resources and contact information.)

- [Headquarters](#)
- [Northeast Region](#)
- [Northwest Region](#)
- [Central Region](#)
- [Suncoast Region](#)
- [Southern Region](#)
- [Southeast Region](#)
- [Florida State Hospital](#)
- [North East Florida State Hospital](#)
- [North Florida Evaluation and Treatment Center](#)

<http://www.myflfamilies.com/service-programs/deaf-and-hard-hearing/auxiliary-aids-plan>

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

Section 282.603, F.S. requires that each state agency use accessible electronic information and information technology that conforms to Section 508 of the Rehabilitation Act of 1973 to make their electronic and information technology (EIT) accessible to people with disabilities. To maintain compliance with the Statute and Act, OEL has staff trained in formatting guidelines set by the Americans with Disabilities Act (ADA) to ensure all information is accessible to persons with disabilities. Additionally, materials developed by OEL for print also follow the ADA guidelines for design.

The Department has resources found at <http://www.myflfamilies.com/accessibility> regarding access to services for persons with disabilities.

Accessibility: The Rehabilitation Act of 1973 prohibits discrimination on the basis of disability in programs conducted by Federal agencies, in programs receiving Federal financial assistance, in Federal employment, and in the employment practices of Federal contractors.

Section 504 states that "no qualified individual with a disability in the United States shall be excluded from, denied the benefits of, or be subjected to discrimination under" any program or activity that either receives Federal financial assistance or is conducted by any Executive agency. To see what the department is doing to assist the Deaf and hard of Hearing, please visit the departments Services for the Deaf and Hard of Hearing section. The DCF Auxiliary Aids and Service Plan is also available online. To read more about website accessibility read below.

Section 508 now establishes requirements for electronic and information technology developed, maintained, procured, or used by the Federal government. Section 508 requires Federal electronic and information technology to be accessible to people with disabilities, including employees and members of the public.

In December 2000 the Federal Access Board issued final standards for electronic and information technology under Section 508 of the Rehabilitation Act. These were adopted and published in the Federal Registrar in April 2001 with enforcement to begin June 21, 2001.



While these standards currently apply to federal government, it is the direct responsibility of Florida state government agencies and their web designers and developers to become familiar with these accessibility guidelines and to apply these principles in designing and creating any official web site.

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

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

- a) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6: <http://www.myflfamilies.com/service-programs/child-care/child-care-licensure>
- b) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2: [www.dcf.state.fl.us/programs/childcare/docs/ChildCareProgramsAndInspectionsGuide.pdf](http://www.dcf.state.fl.us/programs/childcare/docs/ChildCareProgramsAndInspectionsGuide.pdf)
- c) Provide the link to the policies and procedures related to criminal background checks for staff members of child care providers and the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in sections 5.4.1 and 5.4.11: <http://www.dcf.state.fl.us/programs/backgroundscreening/> and Florida Statutes s. 435.01, 435.04, 435.07(4)(c), and 435.12 F.S.; visit [http://www.leg.state.fl.us/statutes/index.cfm?App\\_mode=Display\\_Statute&URL=0400-0499/0435/0435ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20435](http://www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0435/0435ContentsIndex.html&StatuteYear=2018&Title=-%3E2018-%3EChapter%20435)

#### 2.3.5 List of providers

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

- a) Provide the website link to the searchable list of child care providers: <http://cares.myflfamilies.com/publicsearch>
- b) In addition to the licensed providers that are required to be included in your searchable list, which additional providers are included in the Lead Agency's searchable list of child care providers (please check all that apply):
  - ☒ License-exempt center-based CCDF providers
  - ☒ License-exempt family child care (FCC) CCDF providers
  - ☒ License-exempt non-CCDF providers
  - ☒ Relative CCDF child care providers

☐ Other. Describe:

c) Identify what informational elements, if any, are available in the searchable results. Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

- Licensed providers
  - ☒ Contact information
  - ☒ Enrollment capacity
  - ☐ Years in operation
  - ☐ Provider education and training
  - ☐ Languages spoken
  - ☒ Quality information
  - ☒ Monitoring reports
  - ☒ Other. Describe: [Assigned ID number; website link, if available; provider status and expiration date; program detail and services offered; federal/state program designations; hours of operation; and mapped location.](#)
- License-exempt, non-CCDF providers
  - ☒ Contact information
  - ☒ Enrollment capacity
  - ☐ Years in operation
  - ☐ Provider education and training
  - ☐ Languages spoken
  - ☒ Quality information
  - ☒ Monitoring reports
  - ☒ Other. Describe: [Assigned ID number; website link, if available; provider status and expiration date; program detail and services offered; federal/state program designations; hours of operation; and mapped location.](#)
- License-exempt CCDF center based providers
  - ☒ Contact information
  - ☒ Enrollment capacity
  - ☐ Years in operation
  - ☐ Provider education and training
  - ☐ Languages spoken
  - ☒ Quality information
  - ☒ Monitoring reports
  - ☒ Other. Describe: [Assigned ID number; website link, if available; provider status and expiration date; program detail and services offered; federal/state program designations; hours of operation; and mapped location.](#)
- License-exempt CCDF family child care
  - ☒ Contact information
  - ☒ Enrollment capacity

- ☐ Years in operation
- ☐ Provider education and training
- ☐ Languages spoken
- ☒ Quality information
- ☒ Monitoring reports
- ☒ Other. Describe: [Assigned ID number; website link, if available; provider status and expiration date; program detail and services offered; federal/state program designations; hours of operation; and mapped location.](#)
- Relative CCDF providers
  - ☒ Contact information
  - ☒ Enrollment capacity
  - ☐ Years in operation
  - ☐ Provider education and training
  - ☐ Languages spoken
  - ☒ Quality information
  - ☒ Monitoring reports
  - ☒ Other. Describe: [Assigned ID number; website link, if available; provider status and expiration date; program detail and services offered; federal/state program designations; hours of operation; and mapped location.](#)
- Other. Describe:  
  - ☐ Contact information
  - ☐ Enrollment capacity
  - ☐ Years in operation
  - ☐ Provider education and training
  - ☐ Languages spoken
  - ☐ Quality information
  - ☐ Monitoring reports
  - ☐ Other. Describe:

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

- a) How does the Lead Agency determine quality ratings or other quality information to include on the website?
- ☐ Quality rating and improvement system
  - ☒ National accreditation
  - ☒ Enhanced licensing system

- ☒ Meeting Head Start/Early Head Start Program Performance Standards.
- ☒ Meeting prekindergarten quality requirements
- ☐ School-age standards, where applicable
- ☐ Other. Describe:

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

- ☒ Licensed CCDF providers. Describe the quality information: [Accreditation, Head Start, VPK](#)
- ☒ Licensed non-CCDF providers. Describe the quality information: [Accreditation, Head Start, VPK](#)
- ☒ License-exempt center-based CCDF providers. Describe the quality information: [Accreditation, Head Start, VPK](#)
- ☒ License-exempt FCC CCDF providers. Describe the quality information: [Accreditation, Head Start, VPK](#)
- ☐ License-exempt non-CCDF providers. Describe the quality information:
- ☐ Relative child care providers. Describe the quality information:
- ☐ Other. Describe:

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

Certify by responding to the questions below:

- a) What is the Lead Agency's definition of plain language and describe the process for receiving feedback from parents and the public about readability of reports. [OEL does not have a formal definition of plain language. However; we follow the guidelines for plain language outlined by the federal government at <https://www.plainlanguage.gov/>. We also ensure all writing does not exceed an eighth grade reading level per the Flesch-Kincaid Grade Level Readability Statistics, as well as ensure all information posted to our website is ADA compliant. OEL receives parent feedback through the local early learning coalitions that are charged with dissemination of materials. The Department CFOP5-2, May 2008, the "Plain Language" Initiative is required by Governor's Executive Order 07-01; the Plain Language Initiative is a directive for State Agencies to communicate in a way that helps readers understand material the first time they read it, so that readers can find needed information, understand the information, and use the information to meet their needs. The Department includes contact information on their website for parents and public to contact them with any questions or feedback.](#)

- b) Are monitoring and inspection reports in plain language?
- ☒ If yes, include a website link to a sample monitoring report.  
<https://cares.myflfamilies.com/InspectionReport/PublicReport?id=448508>
  - ☐ If no, describe how plain language summaries are used to meet the regulatory requirements and include a link to a sample summary. \_\_\_\_\_
- c) Check to certify what the monitoring and inspection reports and/or their plain language summaries include:
- ☒ Date of inspection
  - ☒ Health and safety violations, including those violations that resulted in fatalities or serious injuries. Describe how these health and safety violations are prominently displayed. [Noncompliance items are noted on inspection reports with a description of the violation and a deadline for corrective action is established. The public display of a provider's inspection history indicates a red dot next to any inspection that contains violations.](#)
  - ☒ Corrective action plans taken by the State and/or child care provider. Describe: [A deadline for corrective action is established and guidance regarding what action the provider needs to take to come into compliance is noted on the inspection report.](#)
- d) The process for correcting inaccuracies in reports. [Based on Department of Children and Families' policy, inspections are reviewed and approved by licensing supervisor prior to submitting for publication on the public website; the supervisor may return inspection for correction to licensing staff. This process is the same for license exempt School Readiness providers that receive the health and safety inspections.](#)
- e) The process for providers to appeal the findings in reports, including the time requirements, and timeframes for filing the appeal, for the investigation, and for removal of any violations from the website determined on appeal to be unfounded. [An inspection report is reviewed with the child care provider prior to leaving the program. If the provider disagrees with a finding, the provider has the ability to notate the concerns under "Director Comments" section within the inspection report. The provider may contact the licensing supervisor to dispute. If enforcement action is taken based on a citation in an inspection report- the provider has the ability to request a 120 hearing to dispute the Department's action.](#)
- f) How reports are posted in a timely manner. Specifically, provide the Lead Agency's definition of "timely" and describe how it ensures that reports are posted within its timeframe. Note: While Lead Agencies define "timely," we recommend Lead Agencies update results as soon as possible and no later than 90 days after an inspection or corrective action is taken. [Routine and Renewal inspections must be available on the public website within 10 days from the inspection date.](#)
- g) Describe the process for maintaining monitoring reports on the website. Specifically, provide the minimum number of years reports are posted and the policy for removing reports (98.33(a)(4)(iv)). [3 years, if applicable; The Department of Children and Families' licensing system automatically displays a three-year history of inspections for provider, if applicable. Inspections beyond the three year time period are removed from public view.](#)

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

- ☐ License-exempt non-CCDF providers
- ☐ Relative child care providers
- ☐ Other. Describe:

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

Certify by providing:

- a) The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care (98.16 (ff)) and describe how the Lead Agency obtains the aggregate data from the entity. [Providers are required to report to the local licensing entity. The local licensing entity reports death or serious injury to program office at the beginning of each month. This process is the same for license exempt School Readiness providers that receive the health and safety inspections.](#)
  - b) The definition of “substantiated child abuse” used by the Lead Agency for this requirement. [The Department of Children and Families definition of verified is equivalent to Substantiated. "Verified" is used when a preponderance of the credible evidence results in a determination the specific harm or threat of harm was the result of abuse, abandonment or neglect](#)
  - c) The definition of “serious injury” used by the Lead Agency for this requirement. [“Serious Injury,” is any injury/incident resulting in death or serious physical or emotional harm to a child that prudently calls for medical attention, including medication errors that present a risk of ineffectiveness or adverse reaction](#)
  - d) The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted. [http://www.myflfamilies.com/service-programs/child-care/brochures-facts-progress, which beginning July 1, 2018 is broken out by provider type and licensing status.](http://www.myflfamilies.com/service-programs/child-care/brochures-facts-progress)
- 2.3.9 The consumer education website should include contact information on referrals to local child care resource and referral organizations. How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information: [The Department of Children and Families \(DCF\) child care website serves as the primary consumer education website for the state of Florida. Their webpage links to OEL’s webpage where local CCR&R contact information for each of the early learning coalitions is made available. Additionally, DCF’s webpage links to a map directory of early learning coalitions hosted on OEL’s webpage that links parents and families directly with their local early learning coalition for CCR&R services. http://www.myflfamilies.com/service-programs/child-care/contacts, http://www.floridaearlylearning.com/ccrr.aspx and](#)

<http://www.floridaearlylearning.com/family-resources/find-quality-child-care/locate-your-early-learning-coalition>

- 2.3.10 The consumer education website should include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website. Describe and include a website link to this information: [DCF's webpage for child care licensing contacts includes a map highlighting the local licensing regions as well as hyperlinks to each region's staff and their contact information. DCF's website offers links to pages regarding consumer education materials, such as brochures, fact sheets and reports for parents to reference. DCF's child care licensing webpage also links to OEL's webpage where local CCR&R contact information for each of the early learning coalitions is made available. Additionally, DCF's webpage links to a map directory of early learning coalitions hosted on OEL's web page that links parents and families directly with their local early learning coalition for CCR&R services. <http://www.myflfamilies.com/service-programs/child-care/contacts>](#)
- 2.3.11 Provide the website link to the Lead Agency's consumer education website. Note: An amendment is required if this website changes. <http://www.myflfamilies.com/service-programs/child-care> and [www.floridaearlylearning.com](http://www.floridaearlylearning.com)
- 2.3.12 Other. Identify and describe the components that are still pending per the instructions on *CCDF Plan Response Options for Areas where Implementation is Still in Progress* in the Introduction.  
[N/A](#)

## 2.4 Additional Consumer and Provider Education

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

In questions 2.4.1 through 2.4.5, certify by describing:

- 2.4.1 How the Lead Agency shares information with eligible parents, the general public, and where applicable, child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible, such as state preK, as well as the availability of financial assistance to obtain child care services. At a minimum, describe what is provided (e.g., such methods as written materials, the website, and direct communications) and how information is tailored for these audiences. [The OEL and early learning coalitions offer information on child care services, the Voluntary Pre-kindergarten program, financial assistance for child care, and information on other resources and assistance for families on their websites through brochures, flyers and other printed materials. Early learning coalitions have outreach events and programs to offer assistance and information on locating and paying for quality child care. The local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and](#)

[referrals to other human services programs. All families and providers can receive this information via phone, internet and in-person. However, local coalitions and CCR&Rs actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings.](#)

- 2.4.2 The partnerships formed to make information about the availability of child care services available to families. [OEL partners with other state agencies, TANF offices, child care resource and referral agencies, community-based organizations, local public schools, faith-based child care organizations and local Head Start, Early Head Start and Migrant and Seasonal Head Start agencies to inform parents, providers and the general public about the quality of child care services available in Florida. The Department of Children and Families, Child Care Aware, early learning coalitions, RCMA, Help Me Grow Florida, 2-1-1 organizations, local public schools and Florida Early Steps \(Florida Department of Health\) refer families to the local CCR&R programs for information on child care services. OEL also collaborates with the state Head Start Training and Technical Assistance Early Childhood Education provider and the Head Start State Collaboration Office on these initiatives.](#)
- 2.4.3 How the Lead Agency provides the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers. In the description include, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners who assist in providing this information.
- ☒ Temporary Assistance for Needy Families program: [Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the TANF program. The OEL also includes contact information for the TANF program in the community resources flyer.](#)
  - ☒ Head Start and Early Head Start programs: [Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as Early Head Start and Head Start programs. The OEL also includes contact information for Early Head Start and Head Start programs in the community resources flyer.](#)
  - ☒ Low Income Home Energy Assistance Program (LIHEAP): [Local CCR&R organizations are required by rule 6M-9.300, FAC, to offer other resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the LIHEAP program. The OEL also includes contact information for the LIHEAP program in the community resources flyer.](#)



- ☒ Supplemental Nutrition Assistance Programs (SNAP) Program: [Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the SNAP program. The OEL also includes contact information for the SNAP program in the community resources flyer.](#)
- ☒ Women, Infants, and Children Program (WIC) program: [Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the WIC program. The OEL also includes contact information for the WIC program in the community resources flyer.](#)
- ☒ Child and Adult Care Food Program (CACFP): [Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the CACFP program, along with other food programs, such as local food banks. OEL also includes contact information for the CACFP program in the community resources flyer.](#)
- ☒ Medicaid and Children's Health Insurance Program (CHIP): [Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer resources and referrals to other human services programs. All eligible families can receive this information via phone, Internet and in-person during the eligibility interview process. CCR&R specialists provide families with resources, information about and access to programs such as the Medicaid program. OEL also includes contact information for the Medicaid program in the community resources flyer.](#)
- ☒ Programs carried out under IDEA Part B, Section 619 and Part C: [Local CCR&R organizations are required by Rule 6M-9.300, FAC, to offer services to all families and providers via phone, internet and in-person. CCR&R specialists provide families with resources, information about and access to programs such as the Individuals with Disabilities Education Act. Additionally, local coalitions and CCR&Rs actively give providers information on these resources at community meetings, provider meetings, provider trainings and technical assistance meetings. Information is also shared on OEL's and local CCR&R websites. CCR&R specialists supply providers with resources and information regarding access to programs such as the IDEA program. The OEL also includes contact information for the IDEA program in the community resources flyer which is distributed to providers annually via the DCF quarterly provider mail out, or as updated. The OEL provides information on the American's with Disabilities Act and inclusive childcare in our Family Guide for Selecting Quality Early Learning Programs.](#)

- 2.4.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children’s development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners in providing this information. Consumer education resources and information on research and best practices in early childhood development, social and emotional development, behavioral health, developmental screenings, meaningful parent and family engagement, and physical and mental health and development, including healthy eating and physical activity are made available to parents, providers and the general public. This information is disseminated through the OEL’s, early learning coalitions’ and RCMA’s websites, parent workshops, newsletters, brochures, parent and provider guides, Facebook pages, Pinterest boards and Twitter. Printed materials regarding the above-mentioned research and information topics are made available to parents, providers and the public through the local early learning coalitions and are available for download on their websites and the OEL’s website. Upon request, these materials are also mailed to parents, providers or others requesting them. Some of these resources include "A Parent’s Guide to Child Care," the "Quality Checklist for Evaluating Early Learning Programs", “Child Care Compass”, “Family Engagement Toolkits” for early learning coalitions, providers and families, and a variety of other parent and provider guides, brochures and flyers. The OEL provides a monthly newsletter for families, *Parents’ Pages*, with articles on these topics. This newsletter is available for early learning coalitions and child care providers to use as well. Additionally, information regarding the above-listed topics is provided during direct communication with parents, providers and the general public - for example, during eligibility interviews or calls for resource and referral services, community events, and meetings with providers or parents. To help parents and providers know what children should understand and be able to do as they grow from birth to 5, Florida adopted the revised *Florida Early Learning and Developmental Standards: Birth to Five* in 2017. The standards address the domains of Physical Development, Approaches to Learning, Social and Emotional Development, Language and Literacy, Mathematical Thinking, Scientific Inquiry, Social Studies and Creative Expression Through the Arts. Parents and providers can read, search or download a printable version of the standards on OEL’s website (<http://flvpkonline.org/standardsresource/resources.html>) and use them to plan experiences and activities for their children. The website has resources and information specifically for providers and families. The standards have valuable information and tips for supporting children’s development in the first five years. Many early learning coalitions provide workshops and newsletters for parents and providers on these topics and have videos available onsite or online for them to view. The OEL makes resources available on all of the topics listed to all of the early learning coalitions, the Head Start Collaboration Office and RCMA through newsletters, the CCR&R Dropbox, the OEL’s website and SharePoint.
- 2.4.5 Describe how information on the Lead Agency’s policies regarding the social-emotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include what information is provided, how the information is provided, and how information is tailored to a variety of audiences and include any partners in providing this information. Parents: Resources are available as print materials such as newsletters and

brochures or flyers, online resources, and social media such as Facebook, Pinterest and Twitter. Print materials are distributed at workshops for parents and parent meetings, workshops for providers, community events and through partners. Information and materials as well as referrals for support from other agencies are offered through the CCR&R specialists. *Florida's Early Learning and Developmental Standards for children: Birth to 5* is available on OEL's website (<http://flvpkonline.org/standardsresource/resources.html>) for parents, providers and the public. Resources through 211 call centers and Help Me Grow are intended to provide linkages for children's social-emotional, behavioral and other developmental needs. Early learning coalitions also have an inclusion specialist onsite to offer information and support on social-emotional development and behavioral health to parents. **Providers:** Resources are available as print materials, online resources, and social media such as Facebook, Pinterest and Twitter. Information and support for social-emotional development and behavioral health is included in workshops for providers and provider meetings. The OEL provides newsletters and a bi-monthly New Resources for CCR&R which includes information for providers on resources for social-emotional and behavioral health. Training and technical assistance are available through the OEL, DCF, early learning coalitions/RCMA program staff and the University of Florida through Early Learning Florida. *Florida's Early Learning and Developmental Standards for children: Birth to 5* is available on the OEL's website for providers (<http://flvpkonline.org/standardsresource/resources.html>) and includes resources and activities specifically for providers on social-emotional development and behavioral health. The state has a toll-free number to provide assistance and consultation about including children with disabilities and special health care needs. The Warm Line is available to any early care and education provider requesting information relating to the disability and special health care needs of children. Each early learning coalition provides warm line services for child care providers on strategies to support inclusive practices, including positive behavioral support, curriculum, child development, health, environmental adaptations, laws and regulations (e.g., The Americans with Disabilities Act). The Florida Association of Infant Mental Health provides discounted memberships for child care providers and offers websites, trainings and conferences about infant mental health ([www.FAIMH.org](http://www.FAIMH.org)). Many of the children's services councils offer early childhood mental health consultation to child care providers and a variety of infant mental health training, aligned with IMH competencies, for child care providers. Florida's LAUNCH grant has provided training on early childhood mental health consultation. The First 1000 Days joint conference brings together for training early learning coalitions, Part C, the Florida Association of Infant Mental Health (FAIMH), Maternal Infant Early Childhood Home Visiting Program (MIECHV), Healthy Start and child advocates, including the Infant Mental Health track. **Public:** Resources are available as print materials, online resources, and social media such as Facebook, Pinterest and Twitter. There are workshops for parents and parent meetings open to the public as well as newsletters and information on children's social and emotional development distributed through other state agencies, the court system, and non-profit agencies. The early learning coalitions provide resources and information on children's social and emotional development, behavioral issues and early childhood mental health at community events. *Florida's Early Learning and Developmental Standards for children: Birth to 5* is available on the OEL's website for the general public (<http://flvpkonline.org/standardsresource/resources.html>).

- 2.4.6 Describe the Lead Agency's policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds (98.16(ee)), including how those policies are shared with families, providers, and the general public. [The OEL issued a Position Statement on Expulsion and Suspension Prevention in Early Childhood Settings](#)

in 2017. The statement can be found here <http://www.floridaearlylearning.com/statewide-initiatives/health-safety/expulsion-resources-guides>. Additionally, the Office of Early Learning enacted new health and safety rules for child care providers in 2016. The rules include requirements that all providers receiving CCDF funds:

- [Must have discipline and expulsion policies in writing.](#)
- [Must give all parents/ guardians a written copy of their discipline and expulsion policies.](#)
- [Ensure all staff comply with their program's procedures and policies.](#)

[The OEL provided training to child care providers, licensing and early learning coalitions' staff on the Health and Safety Rules, the Position Statement on Expulsion and Suspension Prevention in Early Childhood Settings and on best practices for supporting the social and emotional development of children birth to five, positive behavioral support for children, early identification and referrals for children who may have special needs and the importance of family engagement. The OEL has resources and information available for staff and providers on the prevention of expulsion and suspension of young children on the OEL website, in the CCR&R Dropbox and on SharePoint.](#)

## **2.5 Procedures for Providing Information on Developmental Screenings**

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

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

- a) How the Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF parents, the general public, and where applicable, child care providers (98.15(b)(3)). [Consumer education resources and information about research and best practices in early childhood development, social and emotional behavioral health, developmental screenings, meaningful parent and family engagement, and physical and mental health and development including healthy eating and physical activity are made available to parents, providers and the general public. This information is disseminated through the OEL, early learning coalitions and RCMA websites, parent workshops, newsletters, brochures, parent and provider guides, Facebook pages, Pinterest boards and Twitter. Additionally, information regarding these topics is provided during direct communications with parents, providers and the public, for example during eligibility interviews or calls for Child Care Resource and Referral services. Additionally, if the parent permits, each child enrolled in the School Readiness Program is screened with a developmental screener. The results of](#)

this screening are made available to parents. If a screening indicates any areas of concern, the coalition must follow up with continued supports for accessing other resources and services. If needed, the coalition facilitates the referral process with the parent(s). Additionally, if there is a Help Me Grow affiliate in the area, the family is connected to assist with the completion of the referral process. If a child needs access to additional services, the state's Warm Line may be accessed to connect children, families and providers to these services. Follow-up from a Warm Line call may include, but are not limited to, information about community resources and services, additional screenings, observations, and trainings.

- b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program—carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.)—and developmental screening services available under Part B, Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.). The early learning coalitions are required to coordinate with parents and providers to provide developmental screenings for all children enrolled in the School Readiness Program and work in cooperation with other agencies to make referrals for those families whose children may need special services. The OEL, 2-1-1 agencies, Help Me Grow Florida, The Department of Health, The Department of Children and Families and other agencies and non-profit organizations refer parents to the early learning coalitions or local health professionals to have their children screened for developmental delays, including social, emotional, physical, or linguistic delays as well as other health issues. For the School Readiness Program the initial developmental screening must be completed within the first 45 days of receiving services (Rule 6M-4.720, F.A.C.). Subsequently, all children 0-5 receiving services are rescreened annually. This is only applicable to School Readiness children with parental consent.
- c) How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work. Information about developmental screening, the importance of developmental screening, and the benefits of developmental screening is provided in the consumer education resources and information that is made available to parents, providers and the public. This information is disseminated through the OEL, early learning coalitions and RCMA websites, parent workshops, newsletters, brochures, parent and provider guides, Facebook pages, Pinterest boards and Twitter. The OEL, 2-1-1 agencies, Help Me Grow Florida, the Florida Department of Health, the Department of Children and Families and other agencies and non-profit organizations are OEL's partners in this work. They refer parents to the early learning coalitions to have their children screened for developmental delays, including social, emotional, physical, or linguistic delays as well as other health issues.
- d) How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays. The early learning coalitions are required to coordinate with parents and providers to provide developmental screenings for all children eligible for CCDF services and also, to work in cooperation with other agencies to provide screenings and make referrals for those families whose children may need special services.

- e) How child care providers receive this information through training and professional development. [The early learning coalitions offer training, technical assistance, and other targeted assistance for early learning providers in support of the provision of quality in CCDF programs. The Office of Early Learning offers webinars, up to three times a year, about the various developmental screening tools. The Department of Children and Families' mandated introductory training includes 10 hours of training in Developmentally Appropriate Practices. This training is required for all child care personnel working in licensed child care facilities.](#)
- f) Provide the citation for this policy and procedure related to providing information on developmental screenings. [Section 1002.84\(5\), F.S.; Rule 6M-4.720, F.A.C., Screening of Children in the School Readiness Program; State of Florida Office of Early Learning Grant Agreement; State of Florida Statewide School Readiness Provider Contract, Form OEL-SR 20](#)

## 2.6 Consumer Statement for Parents Receiving CCDF Funds

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

### 2.6.1 Certify by describing:

- a) How the Lead Agency provides parents receiving CCDF funds with a consumer statement. [The local early learning coalitions provide a consumer statement, in cover letter form, to each eligible parent enrolling in the School Readiness Program upon parent selection of a provider.](#)
- b) What is included in the statement, including when the consumer statement is provided to families. [The cover letter provided to each parent contains a link to the consumer education website and information on how parents can access specific information about their selected providers, including but not limited to: the provider's inspection reports, including the last date of inspection; history of health and safety violations; information on how the parent can submit a complaint about a provider to the local Department of Children and Families' child care licensing/regulation office and a link to the health and safety requirements for school readiness providers. The cover letter also includes information on whether the provider participates in any state or local voluntary quality improvement system or program, a description of how CCDF funds promote equal access to high-quality child care, and information on how the parent can contact their local Child Care Resource and Referral agency to access community-based supports.](#)



- c) Provide a link to a sample consumer statement or a description if a link is not available. [The cover letter provided to each parent contains a link to the consumer education website and information on how parents can access specific information about their selected providers, including but not limited to: the provider's inspection reports, including the last date of inspection; history of health and safety violations; information on how the parent can submit a complaint about a provider to the local Department of Children and Families' child care licensing/regulation office and a link to the health and safety requirements for school readiness providers. The cover letter also includes information on whether the provider participates in any state or local voluntary quality improvement system or program, a description of how CCDF funds promote equal access to high-quality child care, and information on how the parent can contact their local Child Care Resource and Referral agency to access community-based supports.](#)

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

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

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

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

#### **3.1 Eligible Children and Families**

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

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

- a) The CCDF program serves children from [Zero](#) (weeks/months/years) through [13](#) years (under age 13). *Note:* Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).
- b) Does the Lead Agency allow CCDF-funded child care for children ages 13 and older but below age 19 who are physically and/or mentally incapable of self-care (658E(c)(3)(B); 658P(3))?
- ☒ No
- ☐ Yes, and the upper age is \_\_\_\_\_ (may not equal or exceed age 19). If yes, provide the Lead Agency definition of physical and/or mental incapacity: \_\_\_\_\_
- c) Does the Lead Agency allow CCDF-funded child care for children ages 13 and older but below age 19 who are under court supervision ((658P(3); 658E(c)(3)(B))?
- ☒ No
- ☐ Yes, and the upper age is [\\_\\_\\_\\_\\_](#) (may not equal or exceed age 19).
- d) How does the Lead Agency define the following eligibility terms?
- “residing with”: [Living with a parent, legal guardian or other adult relative caretaker in the same home.](#)
- “in loco parentis”: [A responsible adult with whom the child lives, who is responsible for the day-to-day care and custody of the child when the child’s parent by blood, marriage, adoption or court order is not performing such duties. See Rule 6M-4.200, FAC.](#)

### 3.1.2 Eligibility criteria based on reason for care

- a) How does the Lead Agency define “working or attending a job training and educational program” for the purposes of CCDF eligibility at the time of determination? Provide the definitions below for:
- “Working” (including activities and any hour requirements): [Participating in educational or work activities a minimum of 20 hours per week for a single-parent family, 40 hours per week for a two-parent family or a two-parent family in which one of the parents with whom the child resides is exempt from work requirements due to age or disability, as determined and documented by a physician licensed under Florida Statutes, and one parent is employed or engaged in eligible work or education activities at least 20 hours per week, a one or two-parent family in which the parent\(s\) are exempt from work requirements due to age or disability as determined and documented by a physician licensed under Florida Statutes. Work activities applicable to the Welfare Transition participants \(WTP\) could include employment, non-subsidized employment; subsidized private sector employment, on the job training, subsidized public-sector employment, community service work experience, job search, job readiness assistance; or vocational education or training designed to prepare the participant for employment or other prescribed activities as approved by Welfare Transition program. Work activities for non WTP clients includes employment or educational activities. Some TANF recipients may have work requirements/activities that are not subject to the 20-hour per week minimum.](#)



“Job training” (including activities and any hour requirements): [Attendance in a job training or education program for transitional TANF clients who receive CCDF-funded child care. This requirement is monitored by the Florida Department of Economic Opportunity through regional Workforce Development Boards or their contracted providers.](#)

“Education” (including activities and any hour requirements): [Single parent families may also qualify for child care assistance if they are in school and training the equivalent of 20 hours or more per week or a combined total of at least 40 hours per week for a two-parent family. Educational activities are defined by rule 6M-4.208\(f\)\(4\), as GED programs, secondary education programs, technical or vocational programs, associate of arts, associate of science, bachelor of arts, and bachelor of science programs. An official of the school or institution must complete documentation showing the applicable number of classroom hours, any lab hours, the date the semester/training period starts and the date it ends. Documentation also includes an official school schedule and proof of enrollment. Online courses are an allowable form of education or training activities as long as appropriate documentation is submitted.](#)

“Attending job training or education” (e.g. number of hours, travel time): [The hours of child care needed depend on the parent’s attendance in education/training activities. Consideration is given to the parent’s hours of education/training and reasonable travel time. Education/training hours include class time, lab time and study time.](#)

- b) Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training participation alone (without additional minimum work requirements)?
- ☐ No. If no, describe the additional work requirements:
- ☒ Yes. If yes, describe the policy or procedure: [Attendance in a job training is allowable for transitional TANF clients who receive CCDF-funded child care. Education without additional minimum work requirements are allowable for parents if they are attending at least 20 hours or more per week for a single parent family or a combined total of at least 40 hours per week for a two-parent family. During the eligibility period, if a parent experiences a non-temporary loss or the cessation of an eligible activity, the parent will be given 3 months to re-establish a purpose of care.](#)
- c) Does the Lead Agency consider seeking employment (engaging in a job search) an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of three months of job search)
- ☒ No
- ☐ Yes. If yes, describe the policy or procedure (including any differences in eligibility at initial eligibility determination vs. redetermination of eligibility):
- d) Does the Lead Agency provide child care to children in protective services?
- ☐ No
- ☒ Yes. If yes:

- i. Please provide the Lead Agency's definition of "protective services": For the purposes of eligibility, protective services participants are defined as "at-risk" in s. 1002.81(1), F.S. "At-risk child" means
- A child from a family under investigation by DCF or a designated sheriff's office for child abuse, neglect, abandonment or exploitation.
  - A child who is in a diversion program provided by DCF or its contracted provider and who is from a family that is actively participating and complying in department-prescribed activities, including education, health services or work.
  - A child from a family that is under supervision by DCF or a contracted service provider for abuse, neglect, abandonment or exploitation.
  - A child placed in court-ordered, long-term custody or under the guardianship of a relative or nonrelative after termination of supervision by DCF or its contracted provider.
  - A child in the custody of a parent who is considered a victim of domestic violence and is receiving services through a certified domestic violence center.
  - A child in the custody of a parent who is considered homeless as verified by a DCF certified lead agency.
  - A child who has special needs, has been determined eligible as a student with a disability, has a current individual education plan with a Florida school district, and is not younger than 3 years of age and has not enter kindergarten is also defined as in need of "protective services" as identified as a vulnerable population.
  - A child who is displaced during a state of emergency due to an officially recognized natural or man-made disaster is also defined as in need of "protective services" and identified as a vulnerable population.

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

- ii. Are children in foster care considered to be in protective services for the purposes of eligibility at determination?
- ☐ No
- ☒ Yes
- iii. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis (658E(c)(5))?
- ☐ No
- ☒ Yes
- iv. Does the Lead Agency provide respite care to custodial parents of children in protective services?
- ☐ No
- ☒ Yes

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

- a) How does the Lead Agency define “income” for the purposes of eligibility at the point of initial determination? “Family income” means the combined gross income, whether earned or unearned, that is derived from any source by all family or household members who are 18 years of age or older who are currently residing together in the same dwelling unit. The term does not include income earned by a currently enrolled high school student who, since attaining the age of 18 years, or a student with a disability who, since attaining the age of 22 years, has not terminated school enrollment or received a high school diploma, high school equivalency diploma, special diploma or certificate of high school completion. Income does not include income earned by a teen parent residing in the same residence as a separate family, nor does income include food stamps, adoption subsidies, foster care payments, documented child support and alimony payments paid out of the home, federal nutrition programs, federal tax credits, state/territory tax credits, housing allotments, LIHEAP or energy assistance, military housing or other allotment/bonuses, federal housing assistance payments issued directly to a landlord or the associated utilities expense, scholarships, education loans, grants, income from work study, disaster relief or other forms of temporary assistance of families in a natural disaster areas, income of foster parents and court ordered relative and non-relative caregivers, independent living grant, lump sum settlement, money borrowed with an established repayment plan, one time only gifts, sale of personal assets, VISTA payments, Supplemental Security Income (excluded for children only).
- b) Provide the CCDF income eligibility limits in the table below at the time of initial determination. Complete columns (a) and (b) based on maximum eligibility at initial entry into CCDF. Complete columns (c) and (d) *only if* the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. Fill in the chart based on the most populous area of the state (the area serving the highest number of CCDF children). If the income eligibility limits are not statewide, please respond to c) below the table.

	(a)	(b)	(c)	(d)
Family Size	100% of SMI (\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	(IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	\$2,959	\$2,515	\$2,023	68%
2	\$3,869	\$3,289	\$2,743	71%
3	\$4,780	\$4,063	\$3,463	72%
4	\$5,690	\$4,837	\$4,183	74%
5	\$6,600	\$5,610	\$4,903	74%

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

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

- d) SMI source and year. [LIHEAP IM 2017-03 State Median Income Estimates](#)
- e) Identify the most populous area of the State used to complete the chart above. [Miami-Dade County](#)
- f) What was the date that these eligibility limits in column (c) became effective? [July 1, 2018](#)
- g) Provide the citation or link, if available, for the income eligibility limits. Program Guidance 400.01 Federal Poverty Guidelines can be found at the following link: <http://www.floridaearlylearning.com/policy>

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

- a) Describe how the family member certifies that family assets do not exceed \$1,000,000 (e.g., a checkoff on the CCDF application). [Families certify that assets do not exceed \\$1,000,000 by signing the School Readiness Application.](#)
- b) Does the Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?

☒ No

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

3.1.5 Describe any additional eligibility conditions or priority rules, which should only be applied by the Lead Agency during eligibility determination or redetermination (98.20(b)). [N/A](#)

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

- ☒ Coordinating with Head Start, prekindergarten, or other early learning programs to create a package of arrangements that accommodates parents' work schedules
- ☒ Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)
- ☐ Establishing minimum eligibility periods greater than 12 months
- ☐ Using cross-enrollment or referrals to other public benefits
- ☐ Working with IDEA Part B, Section 619 and Part C staff to explore how services included in a child's IEP or IFSP can be supported and/or provided onsite and in collaboration with child care services

- ☐ Providing more intensive case management for families with children with multiple risk factors;
- ☒ Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities
- ☐ Other. Describe:

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

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

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

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

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

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

- ☐ N/A. The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- ☐ N/A. The Lead Agency sets its exit eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- ☒ The Lead Agency sets the second tier of eligibility at 85 percent of SMI.
  - Describe the policies and procedures. [A parent enters graduated phase-out upon redetermination after 12 months if the family unit income is above 150% FPL \(entry level\) and below 85% SMI. During graduated phase-out a copayment may be increased in increments up to 85% SMI when the family is no longer eligible. Incremental increases promote and support stability.](#)
  - Provide the citation for this policy or procedure. [6M-4.400, F.A.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.
  - Provide the second tier of eligibility for a family of three.
  - Describe how the second eligibility threshold:
    - i. Takes into account the typical household budget of a low-income family:
    - ii. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:
    - iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption:
    - iv. Provide the citation for this policy or procedure:
- ☐ Other. Identify and describe the components that are still pending per the instructions on *CCDF Plan Response Options for Areas Where Implementation Is Still in Progress* in the introduction.

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

- ☐ No
- ☒ Yes
  - i. If yes, describe how the Lead Agency gradually adjusts copays for families under a graduated phase-out. [As the family's income increases the co-payment shall gradually increase based on approved sliding fee scale.](#)
  - ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? (Note: Additional reporting requirements are also discussed in section 3.3.3 of the Plan.)

- ☐ No.
- ☒ Yes. Describe: [During graduated phase out, the family shall report any changes in family size or income to the coalition within ten \(10\) calendar days.](#)

### 3.1.8 Fluctuation in earnings.

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

- ☒ Average the family's earnings over a period of time (i.e., 12 months). Describe: [For families that have irregular earnings \(fluctuations\) due to seasonal or other types of work schedules such as retail employment during the holidays or tourism in the summer, the coalition or contracted designee must:](#)
- i. [Calculate the average income for the previous 12 months. The average must reflect income changes that occur during the eligibility period, including situations in which a family had monthly income above 85 percent of the State Median Income \(SMI\), as published in the Federal Register at <https://www.gpo.gov/fdsys/pkg/FR-2015-06-10/pdf/2015-14187.pdf>, for part of the year and lower income in other months.](#)
  - ii. [For instances where a family, upon redetermination, may not have 12 months of paystubs, use an employer verification statement that affirms the average annual income.](#)
- ☐ Request earning statements that are most representative of the family's monthly income. Describe:
- ☐ Deduct temporary or irregular increases in wages from the family's standard income level. Describe:
- ☐ Other. Describe:

### 3.1.9 Lead Agencies are required to have procedures for documenting and verifying that children receiving CCDF funds meet eligibility criteria at the time of eligibility determination and redetermination (98.68(c)). Lead Agencies should note that there are no federal requirements for specific documentation or verification procedures. Check the information that the Lead Agency documents and verifies and describe, at a minimum, what information is required and how often. Check all that apply.

- ☒ Applicant identity. Describe: [The applicant must meet the definition of a parent consistent with regulatory requirements. Rule 6M-4.208\(d\) requires an applicant to submit a government issued ID in conjunction with one of the documents referenced below for purposes of establishing a relationship to the child. Federal guidelines](#)



stipulate case confidentiality, which is also defined in s. 1002.97, F.S. By speaking only to a household member with an established relationship to the child, the case worker ensures that case confidentiality is maintained.

- ☒ Applicant's relationship to the child. Describe: Each applicant must meet the definition of parent. After the applicant has established his or her identity by providing acceptable documentation, the applicant must submit one of the following documents to establish parental relationship: 1. A copy of the child's birth certificate, which includes the parent's name or maiden name, if applicable. 2. A court order or other legal documentation that substantiates the adult's relationship to the child(ren). 3. A valid DCF or Workforce Child Care Authorization Form that bears the name of the child and the parent. 4. Documentation the applicant is in receipt of relative caregiver payment or TANF benefits on behalf of the child. 5. An affidavit sworn to or affirmed by the child's parent. 6. Official public or non-public school records. 7. An affidavit from a medical professional.
- ☒ Child's information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe: Birth certificates are the most commonly used method to verify the age and citizenship status of the school readiness child. The following are recommended documents to be used to establish the following:

#### Age of the child

- An original or certified copy of the child's birth record filed according to law with the appropriate public officer.
- An original or certified copy of the child's certificate of baptism or other religious record of the child's birth, accompanied by an affidavit stating that the certificate is true and correct, sworn to or affirmed by the child's parent.
- An insurance policy on the child's life, which has been in force for at least two years.
- A passport or certificate of the child's arrival in the United States.
- An immunization record signed by a public health officer or licensed practicing physician. This may include Florida State Health Online Tracking System (SHOTS) documentation.
- A valid military dependent identification card.
- For children identified in Sections 1002.87(1)(a), (1)(d), and (1)(g), F.S., the child's age, as indicated on a child care authorization submitted by the referring agency, is sufficient to establish the child's age as verified by the parent.
- For children identified in Sections 1002.81(a)-(d), F.S., the child's age, as indicated on a child care authorization submitted by the referring agency, is sufficient to establish age as verified by the parent.
- If a child's parent is unable to submit any of the supporting documentation listed above, the early learning coalition and RCMA shall document the child's age based on an affidavit sworn to or affirmed by the child's parent. The affidavit must be accompanied by a certificate of age, signed by a public health officer or by a licensed



practicing physician, which states that the physician has examined the child and believes that the age shown in the affidavit is true and correct.

#### **Citizenship of the child**

- U.S birth certificate.
  - An original or certified copy of the child's U.S. birth record filed according to law with the appropriate public officer.
  - U.S. passport.
  - Lawfully admitted alien document (e.g. Forms I-94, I-94A, I-197, I-551 & I-766) with non-U.S. passport.
  - Certificate of U.S. citizenship or naturalization.
  - For children identified in Sections 1002.87(1)(a), (1)(d) and (1)(g), F.S., the child's status as a TANF recipient, as indicated on a child care authorization submitted by the referring agency, is sufficient to establish the child's citizenship.
  - For children identified in Sections 1002.87(1)(b) and (1)(e), F.S., the Medicaid-eligible status, as indicated on a child care authorization submitted by the referring agency, is sufficient to establish the child's citizenship.
- ☒ **Work. Describe:** Employment income: Applicants are asked to submit four weeks of current and consecutive paystubs. If an applicant cannot produce a sufficient number of paystubs, the applicant's employer is asked to complete an income verification form that details hours worked per week and rate of pay. If the applicant produces neither of the above, then the eligibility specialist contacts the applicant's employer directly. Self-employment income documentation: The most commonly accepted form of documentation is IRS Tax Schedule C from the most recent year if reflective of current earnings. The income from Schedule C (corporate documents, if incorporated) should be used and averaged over the number of months of employment. If not reflective of current earnings for the household, older than six months or applicant/recipient has not been self-employed long enough to have filed income tax, then a profit/loss statement is requested from the household. If questionable, additional receipt and expense documentation is requested.
- ☒ **Job training or educational program. Describe:** For applicants who are involved in a job training program, a TANF child care referral serves as verification. If the gross income of the applicant is not notated on the child care referral, the applicant must submit four weeks of current paystubs to the early learning coalition. School registration records: For Educational Programs, a current document completed by an official of the school or institution showing the number of classroom hours and any lab hours, date the semester/training period starts, and the date it ends on appropriate stationery from the school/institution or training program which may contain an official seal. This includes an official school schedule and proof of enrollment from an accredited education institution.

- ☒ **Family income. Describe:** Early learning coalitions can use the following documents to verify income:
- Four weeks of current and consecutive pay stubs, using gross income (before any deductions, including pretax deductions). When paid biweekly or semi-monthly, two current and consecutive pay periods are requested. For monthly pay periods, one month's pay period is requested.
  - An income verification form signed by the employer, dated within four weeks of applying for services. Hours worked times rate of pay is then used to calculate earnings.
  - A signed contract for employment that has a termination date not less than nine months from applying for services.
  - If none of the above sources are available, direct contact is made with the employer to discuss the applicant's employment income, which is used to arrive at an income projection that is representative of future earnings. Also recorded is any information provided by the employer, such as projected hours of employment, amount per hour, date the employee started and date of the first received pay.

Child support enforcement records: OEL prefers verification from child support enforcement or a clerk of the court website showing gross amount paid to the household on behalf of the child and the period over which it is paid.

Alternatively, a written statement from the absent parent stating the amount(s) the absent parent paid over the last four weeks, including the dates payments were made. Copies of checks or canceled checks can accompany written statements or be submitted in lieu of written documents.

A court order can be used if it was recently issued. However, if the court order has been established for a period of time, and the custodial parent states that the court order does not reflect current payments, then proof is requested of the last four weeks (one month if paid monthly) of payment and the income is averaged.

If, for any reason, the first two sources are not available, an attestation from the parent stating the amount of child support received or not received under the penalty of perjury is acceptable.

Other sources of unearned income: An award letter or verification statement may be used to document other sources of unearned income.

- ☒ **Household composition. Describe:** The family unit composition is determined by the application for school readiness and an acknowledgement of income and family size which may be recorded on the statewide income worksheet or a locally developed income worksheet that includes at least the information included on the statewide income worksheet. Documentation may also include a supplemental form that describes additional family members and relationships.

☒ Applicant residence. Describe: [Early learning coalitions can use the following documents to verify residence:](#)

- [Utility bill \(electric, gas, water\), cable, internet or home phone bill dated within 12 months of the date the child application is submitted.](#)
- [Pay stub from a current employer dated within 12 months of the date the child application is submitted.](#)
- [Current and signed residential rental agreement or receipt from rental payment dated within 12 months of the date the child application is submitted.](#)
- [Government-issued document \(e.g., Florida driver's license, Florida identification card, property tax assessment showing a homestead exemption\), or](#)
- [Military order showing that the child's parent is a service member in the United States Armed Forces and is assigned to duty and resides in Florida when the child attends the school readiness program \(e.g., permanent change of station\).](#)
- [For children identified in Section 1002.87, F.S., the child's status as a TANF recipient, as indicated on a child care authorization submitted by the referring agency, is sufficient to establish the child's residency.](#)
- [For children identified in Sections 1002.87\(1\)\(b\) and \(1\)\(e\), F.S., the child's Medicaid-eligible status, as indicated on a child care authorization submitted by the referring agency, is sufficient to establish the child's residency.](#)
- [If no supporting documents listed above are available, a coalition may accept a notarized statement provided by the child's parent and a letter from a landlord or property owner which confirms that the child resides at the address shown in the notarized statement.](#)

[If no supporting documents listed above are available, for a homeless child as defined in Section 1003.01, F.S., a coalition shall document residency based on other supporting documents showing that the child is homeless and resides in Florida \(e.g., letter from a shelter or a notarized statement provided by the child's parent\).](#)

☒ Other. Describe: [If an executive order is issued by the Governor of Florida, families who have been displaced during a state of emergency due to an officially recognized natural or man-made will be given an extension to submit required documentation necessary to validate/verify eligibility.](#)

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

☒ Time limit for making eligibility determinations. Describe length of time: [Ten-day time limit for processing TANF and at-risk child care referrals. For working families, eligibility determinations will be made within 10 calendar days of the date of the application \(OEL Grant Agreement; Rule 6M-4.208 FAC\).](#)

☒ Track and monitor the eligibility determination process

☐ Other. Describe:  

☐ None

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

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

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

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

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

- a) Identify the TANF agency that established these criteria or definitions: [Florida Department of Economic Opportunity](#).
- b) Provide the following definitions established by the TANF agency:
  - “Appropriate child care”: [An eligible child care provider as defined in 45 CFR 98.20 and s. 1002.88, F.S. Child care options must have hours of operation that meets the needs of the parents work schedule and meet any special needs of the individual child.](#)
  - “Reasonable distance”: [Reasonable distance depends on the geographic area and availability of public transportation. Program staff discusses and determines mileage and/or time needed for travel to and from the job site with the participant.](#)
  - “Unsuitability of informal child care”: [Informal child care is suitable only to the extent such care is provided within the constraints of applicable federal and state laws, regulations, and requirements.](#)
  - “Affordable child care arrangements”: [Annually, the Child Care Resource and Referral Network surveys all legally operating child care providers to obtain program and rate information. Biennially, the Office of Early Learning uses the rate information to determine the prevailing market rate by age category and provider type at the county-level. Coalitions use the prevailing market rate to set the maximum reimbursement rates for their service area, as approved by OEL.](#)
- c) How are parents who receive TANF benefits informed about the exception to the individual penalties associated with the TANF work requirements?
  - ☒ In writing
  - ☒ Verbally
  - ☐ Other. Describe:
- d) Provide the citation for the TANF policy or procedure: [State Plan for Temporary Assistance for Needy Families, Sections 3.4, 3.7, and Section 414.065\(1\).](#)

### 3.2 Increasing Access for Vulnerable Children and Families

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

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

#### 3.2.1 Describe how the Lead Agency defines:

- a) “Children with special needs”: [Children, ages 3 to admission to kindergarten, who have been determined eligible as students with disabilities in accordance with State Board of Education Rules Chapter 6A-6, FAC, or are eligible clients of the Agency for Persons with Disabilities.](#)
- b) “Families with very low incomes” : [Pursuant to s. 1002.81\(7\), F.S., the term “economically disadvantaged” means having a family income that does not exceed 150 percent of the federal poverty level and includes being a child of a working migratory family as defined by 34 C.F.R. s. 200.81\(d\) or \(f\) or an agricultural worker who is employed by more than one agricultural employer during the course of a year, and whose income varies according to weather conditions and market stability.](#)

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

- a) Identify how services are prioritized for children with special needs. Check all that apply:
  - ☒ Prioritize for enrollment
  - ☐ Serve without placing these populations on waiting lists
  - ☐ Waive co-payments
  - ☐ Pay higher rates for access to higher quality care
  - ☐ Use grants or contracts to reserve slots for priority populations
  - ☐ Other. Describe:
- b) Identify how services are prioritized for families with very low incomes. Check all that apply:
  - ☒ Prioritize for enrollment
  - ☐ Serve without placing these populations on waiting lists
  - ☐ Waive co-payments
  - ☐ Pay higher rates for access to higher quality care
  - ☐ Use grants or contracts to reserve slots for priority populations
  - ☐ Other. Describe:
- c) Identify how services are prioritized for children experiencing homelessness, as defined by the CCDF. Check all that apply:

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

d) Identify how services are prioritized, if applicable, for families receiving TANF program funds, those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF (98.16(i)(4)). Check all that apply:

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

3.2.3 List and define any other priority groups established by the Lead Agency. [In accordance with s. 1002.87\(c\), F.S. priority shall also be given to at risk-children. Section 1002.81\(1\), F.S. defines an at-risk child as, \(a\) a child from a family under investigation by the Department of Children and Families or a designated sheriff's office for child abuse, neglect, abandonment, or exploitation, \(b\) a child who is in a diversion program provided by the Department of Children and Families or its contracted provider and who is from a family that is actively participating and complying in department-prescribed activities, including education, health services, or work, \(c\) a child from a family that is under supervision by the Department of Children and Families or a contracted service provider for abuse, neglect, abandonment, or exploitation, \(d\) a child placed in court-ordered, long-term custody or under the guardianship of a relative or nonrelative after termination of supervision by the Department of Children and Families or its contracted provider, \(e\) a child in the custody of a parent who is considered a victim of domestic violence and is receiving services through a certified domestic violence center, \(f\) a child in the custody of a parent who is considered homeless as verified by a Department of Children and Families certified homeless shelter.](#)

3.2.4 Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.2.3. [Children defined as at-risk are prioritized for enrollment.](#)

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

a) Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained. [Notwithstanding their inability to provide full](#)

documentation at the initial eligibility determination, a coalition shall permit enrollment after initial eligibility determination to children experiencing homelessness as verified by a Department of Children and Families certified homeless shelter (Rule 6M-4.208(2), FAC).

- b) Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness (as defined by CCDF Rule) and their families.
- ☐ Lead Agency accepts applications at local community-based locations
  - ☒ Partnerships with community-based organizations
  - ☒ Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care
  - ☐ Other: \_\_\_\_\_

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

- 3.2.6 Lead Agencies must establish a grace period that allows 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 immunization and other health and safety requirements (as described in section 5). The length of such a grace period shall be established in consultation with the state, territorial, or tribal health agency (658E(c)(2)(i)(i); 98.41(a)(1)(i)(C)).

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

- a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:
- Children experiencing homelessness (as defined by the Lead Agency's CCDF Rule). To improve access to child care for homeless families, the definition of "at-risk child" includes a child in the custody of a parent considered homeless as verified by DCF designated lead agency on homelessness (s. 1002.81(1)(f), F.S.), and those receiving services through domestic violence shelters. Immunization records are not collected by the school readiness agency as a condition of initial eligibility for child care. Child care providers are responsible for obtaining and keeping on file a record of the child's immunizations, physical development and other health requirements. Parents have a 30-day grace period to submit immunization records to the child care provider. School-aged children attending public or non-public schools are not required to have student health examination and immunization records on file at the child care facility as such records are on file at the school where the child is enrolled. Provide the citation for this policy and procedure. Rule(s) 65C-22.001 and 65C-20.001, F.A.C. and ss. 1002.81(1)(e), 1002.81(1)(f) and 1002.88, F.S.
  - Children who are in foster care. To improve access to child care for foster children, the definition of "at-risk child" includes a child placed in court-ordered, long-term custody or under the guardianship of a relative or nonrelative after termination of supervision by the Department of Children and Families or its contracted provider (s. 1002.81(1)(d), F.S.), Immunization records are not collected by the school readiness agency as a



condition of initial eligibility for child care. Child care providers are responsible for obtaining and keeping on file a record of the child's immunizations, physical development and other health requirements. Parents have a 30-day grace period to submit immunization records to the child care provider. School-aged children attending public or non-public schools are not required to have student health examination and immunization records on file at the child care facility as such records are on file at the school where the child is enrolled. Provide the citation for this policy and procedure. Chapters 65C-20.001 and 65C-22.001, F.A.C., and 1002.88 F.S.

- b) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements (98.41(a)(1)(i)(C)(4)). To improve access to child care for homeless families, the definition of "at-risk child" includes a child in the custody of a parent considered homeless as verified by DCF designated lead agency on homelessness (s. 1002.81(1)(f), F.S.), and those receiving services through domestic violence shelters. The DCF recognized referring entities authorize the need for child care services for their clients. The referring entity or the family submit the child care authorization (referral) to the applicable early learning coalition to receive child care services. Immunization records are not collected by the school readiness agency as a condition of initial eligibility for child care. Child care providers are responsible for obtaining and keeping on file a record of the child's immunizations, physical development and other health requirements. Parents have a 30-day grace period to submit immunization records to the child care provider. School-aged children attending public or non-public schools are not required to have student health examination and immunization records on file at the child care facility as such records are on file at the school where the child is enrolled.
- c) Does the Lead Agency establish grace periods for other children who are not experiencing homelessness or in foster care?
- ☐ No
- ☒ Yes. Describe: Immunization records are not collected by the school readiness agency as a condition of initial eligibility for child care. Child care providers are responsible for obtaining and keeping on file a record of the child's immunizations, physical development and other health requirements. Parents have a 30-day grace period to submit immunization records to the child care provider. School-aged children attending public or non-public schools are not required to have student health examination and immunization records on file at the child care facility as such records are on file at the school where the child is enrolled.

### **3.3 Protection for Working Families**

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

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period, regardless of changes in income (as long as the income does not exceed the federal threshold of 85 percent of the state median income) or temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)).



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

- a) Describe the Lead Agency's policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements, including when a family experiences a temporary change in activity. A family shall maintain eligibility and child care funding for school readiness services during a temporary interruption in employment activity, with an option to return to that activity, not to exceed three (3) months. If the temporary interruption in employment exceeds three (3) months, services will be considered suspended, and not reimbursed, until the parent's employment resumes. The child shall not be placed on the waiting list if the parent has verification that they are still employed and returning to that employment. Care may be re-established for the remainder of the initial 12-month authorization upon resumption of employment and reevaluation of the remaining eligibility factors. A family shall maintain eligibility and child care funding for school readiness services during a temporary interruption in the parent's educational activity with an intent to return to the education activity at the next available full semester or term, not to exceed three (3) months between a semester or term. If the temporary interruption exceeds three (3) months, services will be considered suspended, and not reimbursed, until the parent's education enrollment resumes. The child shall not be placed on the waiting list if the parent has verification that they have enrolled in the next semester. Care may be re-established for the remainder of the initial 12-month authorization upon resumption of education and reevaluation of the remaining eligibility factors.
- b) How does the Lead Agency define "temporary change?" "Temporary Interruption" means interruption in the parent's work or education activity with an intent to return to that specific work or education activity. A temporary interruption in employment or education/training activity shall include: 1. Any time-limited absence from work for an employed parent due to reasons such as 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 training or education, 4. Any reduction in work, training or education hours, as long as the parent is still working or attending training or education, 5. Any other cessation of work or attendance at a training or education program that does not exceed three (3) months, 6. Any change in age, including turning 13 years old during the eligibility period; and, 7. Any change in residency within the state

- c) Provide the citation for this policy and/or procedure. [Rule 6M-4.200, F.A.C.](#)

3.3.2 Lead Agency's option to discontinue assistance during the 12-month eligibility period.

Lead Agencies have the option, but are not required, to discontinue assistance during the 12-month eligibility period due to a parent's *non-temporary* loss of work or cessation of attendance at a job training or educational program, otherwise known as a parent's eligible activity.

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

- a) Does the Lead Agency discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss or cessation of eligible activity and offer a minimum 3-month period to allow parents to engage in a job search and to resume participation in an eligible activity?
- ☐ No, the state/territory does not allow this option to discontinue assistance during the 12-month eligibility period due to a parent's *non-temporary* loss of work or cessation of attendance at a job training or educational program.
  - ☒ Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's *non-temporary* loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:
    - i. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change: [During the 12-month eligibility period, if the parent loses purpose of care due to a non-temporary loss of work or education activity, the parent will receive three \(3\) months of continued services to obtain a new purpose for care; i.e. employment or education activity. If the parent does not re-establish a new purpose for care within that three-month period, the family's services are discontinued.](#)
    - ii. Describe what specific actions/changes trigger the job-search period. [There are two ways that a job search period is initiated. For families receiving services based on child care authorization from a referring agency, the three month job search period is triggered when the referring agency does not issue another referral upon expiration or termination of the previous referral. For families that are income eligible, the three month job search period is triggered by the parent self-reporting a loss in purpose for care; i.e. employment or education activity.](#)

- iii. How long is the job-search period (must be at least 3 months)? [The job-search period is 3 months.](#)
  - iv. Provide the citation for this policy or procedure. [Rule 6M-4.200\(2\)-\(3\) and \(6\), FAC., located at <https://www.flrules.org/gateway/RuleNo.asp?title=Office of Early Learning – School Readiness Program&ID=6M-4.200>.](#)
- b) The Lead Agency may discontinue assistance prior to the next 12-month redetermination in the following limited circumstances. Check and describe any circumstances in which the Lead Agency chooses to discontinue assistance prior to the next 12-month redetermination. Check all that apply.
- ☐ Not applicable
  - ☒ Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.
    - i. Define the number of unexplained absences identified as excessive: [Absences that exceed 10 calendar days during a total month.](#)
    - ii. Provide the citation for this policy or procedure: [6M-4.200, F.A.C.](#)
  - ☒ A change in residency outside of the state, territory, or tribal service area. Provide the citation for this policy or procedure: [6M-4.200, F.A.C.](#)
  - ☒ Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility. Describe the violations that lead to discontinued assistance and provide the citation for this policy or procedure. [The ELC's are required to submit an anti-fraud plan annually that includes procedures for identifying fraud and due process procedures for clients. The ELC's must follow their anti-fraud plan to establish substantiated fraud amounting to termination prior to the conclusion of the 12-month period. In cases of intentional program violations, the ELC's are required to document instances of intentional program violations prior to termination. 6M-4.200, F.A.C.](#)

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

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

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

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

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

☐ No  
☒ Yes

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

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

- ☒ Additional changes that may impact a family's eligibility during the 12-month period. Describe: [Income changes over 85% SMI](#)
- ☒ Changes that impact the Lead Agency's ability to contact the family. Describe: [Address change is required.](#)
- ☐ Changes that impact the Lead Agency's ability to pay child care providers. Describe: [\[redacted\]](#)

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

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

- ☒ Phone  
☒ Email  
☒ Online forms  
☒ Extended submission hours  
☐ Postal Mail  
☐ Fax  
☐ In-person submission  
☐ Other. Describe: [\[redacted\]](#)

- d) Families must have the option to voluntarily report changes on an ongoing basis during the 12-month eligibility period.

Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

- i. Describe any other changes that the Lead Agency allows families to report. [Family size](#)
- ii. Provide the citation for this policy or procedure. [Rule 6M-4.200, FAC.](#)

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

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

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

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

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

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

- ☐ Postal Mail
- ☒ Email
- ☒ Online forms
- ☒ Fax
- ☒ In-person submission
- ☒ Extended submission hours
- ☐ Other. Describe:

### 3.4 Family Contribution to Payments

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

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

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

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

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?	The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?	Highest Initial or First Tier Income Level <u>Before</u> a Family Is No Longer Eligible	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?	The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?
1	1517.50	104	7%	2023.33	242.67	12%
2	2057.50	104	5%	2743.33	242.67	9%
3	2597.50	104	4%	3463.33	242.67	7%
4	3137.50	104	3%	4183.33	242.67	6%
5	3677.50	104	3%	4903.33	242.67	5%

- b) What is the effective date of the sliding-fee scale(s)? [July 1, 2018](#)
- c) Identify the most populous area of the state used to complete the chart above. [Miami-Dade County](#)
- d) Provide the link to the sliding-fee scale:  
<https://www.elcmdm.org/Content/Uploads/elcmdm.org/files/eligibility/2018%20Sliding%20Fee%20Scale%20Model%20Final.MiamiDade.pdf>
- e) If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)). [The 30 Early Learning Coalitions and RCMA](#)

3.4.2 How will the family's contribution be calculated, and to whom will it be applied? Check all that apply.

- ☒ The fee is a dollar amount and:
  - ☒ The fee is per child, with the same fee for each child.
  - ☒ The fee is per child and is discounted for two or more children.
  - ☐ The fee is per child up to a maximum per family.
  - ☐ No additional fee is charged after certain number of children.
  - ☐ The fee is per family.
  - ☒ The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe: [The OEL requires ELCs and RCMA to develop sliding fee scales based on the most current release of the Federal Poverty Guidelines and State Median Income. This information is provided in each coalition's School Readiness \(SR\) Plan or the RCMA contract and subject to OEL approval. Most, but not all ELCs allow for a discounted fee for two or more children.](#)
  - ☐ Other. Describe:
- ☐ The fee is a percent of income and:
  - ☐ The fee is per child, with the same percentage applied for each child.
  - ☐ The fee is per child, and a discounted percentage is applied for two or more children.
  - ☐ The fee is per child up to a maximum per family.
  - ☐ No additional percentage is charged after certain number of children.
  - ☐ The fee is per family.
  - ☐ The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe:
  - ☐ Other. Describe:

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

- ☐ No
- ☒ Yes. If yes, check and describe those additional factors below.
  - ☒ Number of hours the child is in care. Describe: [If a child is authorized for part-time care, the parent shall be assessed a part-time co-payment. If a child is authorized for full-time care, the parent shall be assessed a full-time co-payment.](#)
  - ☐ Lower co-payments for a higher quality of care, as defined by the state/territory. Describe:
  - ☒ Other. Describe: [During a state of emergency due to a natural or man-made disaster, the ELCs and RCMA may waive the copay for impacted families including those children whose family income is above the federal poverty level.](#)

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.45(k)) or for families who are receiving

or needing to receive protective services, as determined for purposes of CCDF eligibility, or who meet other criteria established by the Lead Agency (98.45(k)(4)). Does the Lead Agency waive family contributions/co-payments for any of the following? Check all that apply.

- ☐ No, the Lead Agency does not waive family contributions/co-payments.
- ☒ Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the Federal poverty level for families of the same size.
- ☒ Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility. Describe the policy and provide the policy citation. [A co-payment may be waived on a case-by-case basis for families participating in an at-risk program as defined in Section 1002.81\(1\), F.S. Rule 6M-4.400, F.A.C..](#)
- ☐ Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency. Describe the policy and provide the policy citation.

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

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

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

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



home care, in-home care, for-profit provider, non-profit provider or faith-based provider, etc.) (98.15 (a)(5)).

- 4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)). [Upon determination of eligibility, a parent shall be given a payment certificate to submit to an eligible child care provider to enroll the child in its school readiness program. The payment certificate shall at a minimum include the child\(ren\) for whom a coalition authorized child care, the provider the family selected, signatures of both the beneficiary and school readiness provider representative, the assessed parent copayment for each eligible child, the authorized hours of care and the authorized begin and end dates for school readiness services.](#)

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

- ☐ Certificate that provides information about the choice of providers
- ☐ Certificate that provides information about the quality of providers
- ☒ Certificate not linked to a specific provider, so parents can choose any provider
- ☒ Consumer education materials on choosing child care
- ☒ Referral to child care resource and referral agencies
- ☒ Co-located resource and referral in eligibility offices
- ☒ Verbal communication at the time of the application
- ☒ Community outreach, workshops, or other in-person activities
- ☒ Other. Describe: [Certificates may identify the provider if the parent has selected a provider at the time the certificate is issued.](#)

- 4.1.3 Child care services available through grants or contracts.

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

- ☐ No. If no, skip to 4.1.4.
- ☒ Yes, in some jurisdictions but not statewide. If yes, describe how many jurisdictions use grants or contracts for child care slots. [Nine early learning coalitions currently use contracted slots to provide child care services to a limited number of children](#)
- ☐ Yes, statewide. If yes, describe:
  - i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:
  - ii. The type(s) of child care services available through grants or contracts:
  - iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers):
  - iv. The process for accessing grants or contracts:
  - v. How rates for contracted slots are set through grants and contracts:

- vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality:
- vii. If contracts are offered statewide and/or locally:

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

- ☒ Programs to serve children with disabilities
- ☒ Programs to serve infants and toddlers
- ☒ Programs to serve school-age children
- ☒ Programs to serve children needing non-traditional hour care
- ☒ Programs to serve children experiencing homelessness
- ☒ Programs to serve children in underserved areas
- ☒ Programs that serve children with diverse linguistic or cultural backgrounds
- ☒ Programs that serve specific geographic areas
  - ☒ Urban
  - ☒ Rural
  - ☐ Other

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

- ☒ Programs to serve children with disabilities
- ☒ Programs to serve infants and toddlers
- ☒ Programs to serve school-age children
- ☒ Programs to serve children needing non-traditional hour care
- ☒ Programs to serve children experiencing homelessness
- ☒ Programs to serve children in underserved areas
- ☒ Programs that serve children with diverse linguistic or cultural backgrounds
- ☒ Programs that serve specific geographic areas
  - ☒ Urban
  - ☒ Rural
  - ☐ Other

4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds (658E(c)(2)(B); 98.16(t)). [Custodial parent or guardian access to children while in the care of any legally operating provider, whether receiving or not receiving financial assistance through the Child Care and Development Fund, is an enforceable requirement of ss. 402.305, 402.313, and 402.3131, F. S.; Chapters 65C-20 and 65C-22 F.A.C.; and the Statewide School Readiness Provider Contract, Rule 6M-4.610, FAC.](#)

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

- ☐ No
- ☒ Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.
- ☐ Restricted based on minimum the number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements. Describe: \_\_\_\_\_
  - ☐ Restricted based on the provider meeting a minimum age requirement. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2). Describe: \_\_\_\_\_
  - ☐ Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours). Describe: \_\_\_\_\_
  - ☐ Restricted to care by relatives. Describe: \_\_\_\_\_
  - ☐ Restricted to care for children with special needs or a medical condition. Describe: \_\_\_\_\_
  - ☐ Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF. Describe: \_\_\_\_\_
  - ☒ Other. Describe: [Informal child care providers are restricted to providing care to eligible children from only one family who are, by marriage, blood relationship, or court decree, the grandchild, great grandchild, sibling \(if such provider lives in a separate residence\), niece, or nephew of such provider, and complies with any applicable requirements that govern child care provided by the relative involved. Early learning coalitions ensure a Level 2 Background Screening is completed for these providers. Informal child care rates are established at no more than one-half the appropriate legally operating family child care home rate per child. Informal providers must complete an annual health and safety checklist annually, which must be posted on premises in a conspicuous location and submitted to the early learning coalition. Informal providers are also required to have either liability insurance or maintain a homeowner's insurance policy that provides a minimum of \\$100,000 of coverage per occurrence and a minimum of \\$300,000 general aggregate coverage. For children who are under the custody of DCF, license exempt child care, including Informal child care providers may only be authorized by waiver/variance when no licensed child care homes or facilities are available within close proximity to work or home.](#)

#### 4.2 Assessing Market Rates and Child Care Costs

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

Note: Any Lead Agency considering using an alternative methodology, instead of a market rate survey, is required to submit a description of its proposed approach to its ACF Regional Child

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

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

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

☒ MRS

☐ Alternative methodology. Describe:

☐ Both. Describe:

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

Describe how the Lead Agency consulted with the:

- a) State Advisory Council or similar coordinating body: [The OEL consults and works with the Association of Early Learning Coalitions along with their local child care resource and referral agencies in conducting the MRS. Additionally requirements for the market rate schedule are included in s. 1002.895, F.S.](#)

- b) Local child care program administrators: [The OEL consults and works with the Association of Early Learning Coalitions along with their local child care resource and referral agencies in conducting the MRS. Additionally, requirements for the market rate schedule are included in s. 1002.895, F.S.](#)
- c) Local child care resource and referral agencies: [The OEL consults and works with the local child care resource and referral agencies in conducting the MRS. Additionally requirements for the market rate schedule are included in s. 1002.895, F.S.](#)
- d) Organizations representing caregivers, teachers, and directors: N/A
- e) Other. Describe: N/A

4.2.3 Describe how the market rate survey is statistically valid and reliable. To be considered valid and reliable, the MRS must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variations, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data, such as child care resource and referral data, if they are representative of the market. If an alternative methodology, such as cost modeling, is used, demonstrate that the methodology used reliable methods. [The OEL requires each early learning coalition to annually update information on all providers in the Child Care Resource & Referral system. The early learning coalitions survey all providers in their communities to collect provider business profile, services offered and rate information. This information is updated in the state's information system. OEL provides three reports for coalitions to use to verify the information. One is a list of providers that have yet to be updated in the system. Another is a summary-level status report, which displays the number and percent of providers that have completed the survey. The last report displays the number and percent of providers that have reported out-of-bound rates. OEL also follows-up routinely with coalition staff on the status of their provider survey update results.](#)

[After the coalition has verified the information, OEL creates a data subset of all providers that have responded to include in the market rate calculation based on provider type groups and rate categories.](#)

[The market rate is reported as a full-time and part-time weekly rate. Annual, monthly, daily, and hourly rates are converted to full-time weekly rates for inclusion in the calculation. Part-time rates are reported as part-time weekly rates. A rate is excluded from the calculation if it is less than \\$50 for full time, \\$25 for part time or more than \\$300 for full or part-time weekly care.](#)

[The OEL calculates the 75th percentile using the market rate data subset described above. The market rate report includes rate information by the coalition, county, age group, and provider type. The Market Rate Survey is distributed to the early learning coalitions to analyze current provider payment rates and determine if payment rates should be updated.](#)

[The response rate for the 2017 Market Rate Survey was 99.88%, which included 12,940 of the 12,956 active providers in the CCR&R system.](#)

#### **Provider Update Response Rate 2017**

- [Total Number of Active Providers in CCR&R – 12,956](#)
- [Total Number of Updated Providers – 12,940](#)

#### Provider Update Completion Rate – 99.88%

#### Provider Types Used in Market Rate Calculation 2017

- Total Number of Provider Types Included in Market Rate Calculation – 12,665
- Total Number of Providers with an Included Rate Type – 12,122

#### Percent of Providers in Rate Calculation – 95.71%

- 4.2.4 Describe how the market rate survey or alternative methodology reflects variations in the price or cost of child care services by:
- a) Geographic area (e.g., statewide or local markets). Describe: The market rate is based on the rates provided by providers per county. There are a total of 67 counties in Florida.
  - b) Type of provider. Describe: Rates are calculated based on the following provider types: private center, family child care home, large family child care home, public school, non-public school, after school program and faith-based exempt center.
  - c) Age of child. Describe: Rates are displayed for the following care levels: infant (0 to <12 months), toddler (12 months to <48 months), preschool-age (48 months to school age) and school age (school entry to < 13 years).
  - d) Describe any other key variations examined by the market rate survey or alternative methodology, such as quality level. Rates are calculated based on full-time and part-time weekly rates and if the provider is Gold Seal or a non-gold provider.
- 4.2.5 After conducting the market rate survey or alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or alternative methodology. The detailed report must also include the estimated cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, pre-K standards, Head Start performance standards, or State defined quality measures.)

The Lead Agency must make the report with these results 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.

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

- a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). 11/30/2017
- b) Date the report containing results was made widely available—no later than 30 days after the completion of the report. 12/14/2017

- c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted. [The report was posted both on OEL's SharePoint site for use by coalitions and OEL's website at http://www.floridaeearlylearning.com/providers/market-rate.](http://www.floridaeearlylearning.com/providers/market-rate)
- d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report. [OEL did not receive any comments on the reports posted to the website.](#)

### 4.3 Setting Payment Rates

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

- 4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS) for the following categories below. Percentiles are not required if the Lead Agency conducted an alternative methodology only (with pre-approval from ACF), but must be reported if the Lead Agency conducted an MRS alone or in combination with an alternative methodology. The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. Please use the most populous geographic region (area serving highest number of CCDF children) to report base payment rates below, if they are not statewide. Note: If the Lead Agency obtained approval to conduct an alternative methodology, then reporting of percentiles is not required.

- a) Infant (6 months), full-time licensed center care in the most populous geographic region  
Rate \$[141.30](#) per [weekly](#) unit of time (e.g. daily, weekly, monthly)  
Percentile of most recent MRS: [81](#)
- b) Infant (6 months), full-time licensed FCC home in the most populous geographic region  
Rate \$[121.95](#) per [weekly](#) unit of time (e.g. daily, weekly, monthly)  
Percentile of most recent MRS: [58](#)
- c) Toddler (18 months), full-time licensed center care in the most populous geographic region  
Rate \$[123.15](#) per [weekly](#) unit of time (e.g. daily, weekly, monthly)  
Percentile of most recent MRS: [84](#)
- d) Toddler (18 months), full-time licensed FCC home in the most populous geographic region  
Rate \$[114.15](#) per [weekly](#) unit of time (e.g. daily, weekly, monthly)  
Percentile of most recent MRS: [69](#)
- e) Preschooler (4 years), full-time licensed center care in the most populous geographic region  
Rate \$[111.20](#) per [weekly](#) unit of time (e.g. daily, weekly, monthly)



Percentile of most recent MRS: [87](#)

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

Rate \$[105.25](#) per [weekly](#) unit of time (e.g. daily, weekly, monthly)

Percentile of most recent MRS: [73](#)

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

Rate \$[98.35](#) per [weekly](#) unit of time (e.g. daily, weekly, monthly, etc.)

Percentile of most recent MRS: [90](#)

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

Rate \$[92.40](#) per [weekly](#) unit of time (e.g. daily, weekly, monthly)

Percentile of most recent MRS: [82](#)

- i) Describe how part-time and full-time care were defined and calculated. [Full-time care is defined as daily care which is greater than or equal to 6 hours of care and less than 11 hours of care. Part-time care is defined as daily care which is greater than or equal to 3 hours of care and less than 6 hours of care.](#)

- j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS as reported in 4.2.5). [3/1/2017](#)

- k) Identify the most populous area of the state used to complete the responses above [Miami-Dade County](#)

- l) Provide the citation or link, if available, to the payment rates.  
[http://www.elcmdm.org/our\\_services/SchoolReadiness.html](http://www.elcmdm.org/our_services/SchoolReadiness.html)

- m) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)). [The 30 ELCs and RCMA.](#)

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

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

- ☐ Differential rate for *non-traditional hours*. Describe:
- ☒ Differential rate for *children with special needs*, as defined by the state/territory. Describe: [The amount of subsidy shall be consistent with the rates for special needs child care established by DCF. A special needs rate may be negotiated up to 20 percent above the](#)



[licensed center infant payment rate. The special needs rates may not exceed the private pay rate for licensed center infant care receiving the same services. This rate differential is locally determined and helps ensure that providers who accept children with special needs are able to make the appropriate modifications necessary to meet each child's unique circumstances. To justify this rate, a provider must show that they are providing care above and beyond ADA requirements for child care facilities.](#)

- ☒ 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: [Early learning coalitions and RCMA assure quality of care for infants and toddlers based on the needs of their local communities, including the payment of a Gold Seal rate differential \(see additional information on this program below\) for infants and toddlers. Early Head Start programs that are receiving subsidy are also eligible for Gold Seal rate.](#)
- ☐ 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:
- ☒ Differential rate for *higher quality*, as defined by the state/territory. Describe: [In 1996, the Florida Legislature established the Gold Seal Quality Care program to acknowledge child care facilities and family day care homes that are accredited by nationally-recognized agencies based on the applicable accrediting standards of the National Association for the Education of Young Children \(NAEYC\), the National Association of Family Child Care and the National Early Childhood Program Accreditation Commission. Head Start, Early Head Start and Migrant and Seasonal Head Start programs that receive subsidy rates and are accredited are also eligible for the Gold Seal program. In addition, the Florida Legislature has provided in its General Appropriations Act that early learning coalitions may negotiate the payment of a rate differential or stipend, which may not exceed more than 20 percent of an early learning coalition's reimbursement rate, to school readiness providers who have achieved a Florida Gold Seal Quality Care designation through accreditation](#)
- ☒ Other differential rates or tiered rates. Describe: [Early Learning Performance Funding. In 2014, in an effort to address concerns over the current payment rates and the cost of providing higher quality child care services, the Florida Legislature approved a special project, the Early Learning Performance Funding Pilot Project \(ELPFPP\), to see whether specific training and teaching approaches improve how well providers implement quality care and education that can subsequently lead to how well children do in the School Readiness Program. This project required eligible providers to participate in training/education and other quality activities such as administering child assessments and participating in technical assistance visits. The ELPFPP features tiered participation rates and bonuses that correlate with the amount of quality activities in which a provider has participated.](#)
- ☐ Tiered or differential rates are not implemented.

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

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

- a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices. [Children served in the School Readiness Program have access to all legally operating providers in the state of Florida that are eligible to provide school readiness services. The range of providers include Private Centers, Large Family Child Care Homes, Family Child Care Homes, Public Schools, Private Schools, Faith-Based Exempt, and After School. Currently, 68 percent of the total licensed child care centers and over 50 percent of the total family child care home providers in the state are also contracted to provide school readiness services to eligible children. Additionally, there are a total of 1,031 license-exempt providers, to include religious-exempt, public and non-public schools, and registered family child care providers, which are contracted as providers of the School Readiness Program. OEL has not found any barriers to participation in the School Readiness Program or with payment rates and practices.](#)
- b) Describe how payment rates are adequate and have been established based on the **most recent MRS or alternative methodology**. Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result. [The ELC's and RCMA use the MRS to establish payment rates submitted to OEL and subject to OEL approval. The approval process includes a comparison and analysis of the payment rates and MRS. Coalitions are allowed to adjust their reimbursement rates as needed based on the most current MRS. The current MRS, published on 12/14/2017, showed that average school readiness reimbursement rates were estimated to be at 76% of the average market rate for Private Centers, 82% for Large Family Child Care Homes, 82% for Family Child Care Homes, 77% for Public Schools, 63% for Private Schools, 77% for Faith-Based Exempt, and 85% for After School Providers.](#)
- c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF. [Sufficient payment rates and equal access are evident throughout the state based upon large participation rate of various provider types in the School Readiness Program. Currently, 68 percent of the total licensed child care centers and over 50 percent of the total family child care home providers in the state are also contracted to provide school readiness services to eligible children. Additionally, there are a total of 1,031 license-exempt providers, to include religious-exempt, public and non-public schools, and registered family child care providers, which are contracted as providers of the School Readiness Program. Based on an early learning cost modeling analysis, the current base reimbursement rates are sufficient to meet basic health and safety, quality and staffing requirements.](#)
- d) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, pre-K standards, Head Start performance standards, or State defined quality measures). [In 2014, in an effort to address concerns over the current payment rates and the cost of providing higher quality child care services, the Florida Legislature approved a special project, the Early Learning Performance Funding Pilot Project \(ELPFPP\), to see whether specific training and teaching approaches improve how](#)

well providers implement quality care and education that can subsequently lead to how well children do in the School Readiness Program. This project required eligible providers to participate in training/education and other quality activities such as administering child assessments and participating in technical assistance visits. The ELPFPP features tiered participation rates and bonuses that correlate with the amount of quality activities in which a provider has participated. A statewide early learning cost modeling analysis was conducted to determine the cost of quality throughout the state. Different policy decisions were reviewed to identify the fiscal impact of how different strategies improve early learning program quality and to determine how current policies impact providers' ability to improve program quality. This analysis helped the state develop policy recommendations to facilitate improving and sustaining high quality early learning programs. Some of these recommendations led the passing of House Bill 1091 in the 2017 Legislative Session, which incentivizes higher level quality through differential payments based on a program assessment that measures the quality of teacher-child interactions. The differential payments will increase as the quality of the provider increases.

- e) How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds (98.16 (k))? Check all that apply.
- ☐ Limit the maximum co-payment per family. Describe:
  - ☒ Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and describe. Copayment in excess of 10 percent must include a justification. Rule 6M4-400, FAC, states, a coalition's sliding fee scale must be set at a level that provides economically disadvantaged families equal access to the care available to families whose income is high enough not to qualify for financial assistance for school readiness services. A coalition must submit its proposed sliding fee scale to OEL for approval. The OEL shall review the sliding fee scale to determine that the scale is reflective of the annually released federal poverty level, has an effective date no later than July 1 of that year and that parent copayments do not exceed 10 percent of the family's income, regardless of the number of children in care. The OEL shall perform a sampling of different income levels and family size to confirm that the proposed parent copayments do not exceed the 10 percent level. If the coalition's proposed sliding fee scale does exceed 10 percent of family income, the coalition must provide justification of how the sliding fee scale meets the federal requirement that the copayment be affordable, prior to approval of the proposed sliding fee scale by OEL.
  - ☒ Minimize the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.7. Describe: During graduated phase-out a copayment may be increased in increments up to 85% SMI when the family is no longer eligible. Incremental increases promote and support stability.
  - ☐ Other. Describe:
- f) To support parental choice and equal access to the full range of child care options, does the Lead Agency choose the option to allow providers to charge families additional amounts

above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

☐ No

☒ Yes. If yes:

- i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families. The state does not currently have a policy to address providers charging parents additional amounts above the required co-payment and it is not addressed in state statute and rule. Providers around the state have different practices on what they charge the parents. This has not hindered access to a large variety of care. All contracted School Readiness Providers must inform parents prior to enrollment of any amount the provider charges in addition to the co-payment.
  - 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. The OEL does not have this data available, changes in the School Readiness Provider Contract and data system are in the process of being made in order to capture this data.
  - iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment and the ability of current subsidy payment rates to provide access to care without additional fees. The state is not currently capable of conducting an analysis. With the new database that the OEL has migrated to and continues to enhance, the OEL is able to see the difference between the private pay rate and the subsidy rate, however until the new school readiness contract is effective OEL will not know if the provider charges the difference or not.
- g) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers. Sufficient payment rates and equal access are evident throughout the state based upon the large participation rate of various provider types in the School Readiness Program. Currently, 68 percent of the total licensed child care centers and over 50 percent of the total family child care home providers in the state are also contracted to provide school readiness services to eligible children. Additionally, there are a total of 1,031 license-exempt providers, to include religious-exempt, public and non-public schools, and registered family child care providers, which are contracted as providers of the School Readiness Program. Each early learning coalition signs a grant agreement with the OEL to ensure that payments to providers will be made within 21 calendar days. The state supports fixed costs of providing child care services by requiring the coalition to reimburse the provider based on the child's authorized hours of care needed, either part-time or full-time. For a child who is authorized only full-time care, a coalition shall not recoup or adjust a provider's reimbursement for days a child attends part-time. The coalition shall not reduce authorized hours of care prior to redetermination unless the parent requests a reduction in the authorized hours of care based on hours of care needed (Rule 6M-4.500,

FAC). The state delinks provider payments from a child's occasional absences and providing full payment if a child is absent for up to a certain number of days in a month. In accordance with Rule 6M-4.500(4), FAC, reimbursement shall be authorized for no more than three absences per calendar month per child except in the event of extraordinary circumstances. In these cases the coalition or its designee shall provide written approval for payment based on written documentation provided by the parent justifying the excessive absence for up to an additional seven days. Reimbursement for child care is Full-time or Part-time with additional units of care for extended hours (greater than Full-time Care), and one unit of care for less than Part-time care. The 2019-20 School Readiness Provider Contract is under rule promulgation and will be final in late fall, the new database will be enhanced to capture the changes in the rule. A registration fee of up to \$75 per child will be paid to School Readiness families, this payment will be limited to two times during a child's continuous time in the School Readiness Program. All CCDF providers complete Form OEL-SR-20 - Statewide School Readiness Provider Contract. This stipulates payment policies, including rates, schedules, and any fees charged to providers, and the dispute-resolution process. The state provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment through the ELCs. ELCs provide prompt notification to providers and parents of any eligibility status changes. Rule 6M-4.500 FAC, requires coalitions notify providers within 10 calendar days if as a result of redetermination, a parent is determined ineligible. The rule requires that the coalition notify the provider a minimum of two weeks prior to a child's termination. The state also has a timely appeal and resolution process for payment inaccuracies and disputes, as provided in the Statewide School Readiness Provider Contract (contract). If a provider disputes any action taken by the coalition pursuant to the terms of the contract, the provider may request a review hearing. The coalition and provider will decide upon a date and time for the review hearing within 45 days of the request for the review hearing. At that point a Review Hearing Committee will assess the claims of the provider. The coalition will be provided a reasonable opportunity to submit rebuttal evidence. Following the completion of the presentations the Review Hearing Committee will vote on each of the provider's claims.

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

- ☒ Geographic area. Describe: The market rate is based on the rates provided by providers per county. There is a total of 67 counties in Florida.
- ☒ Type of provider. Describe: Rates are calculated based on the following provider types: private center, family child care home, large family child care home, public school, non-public school, after school program and faith-based exempt center.
- ☒ Age of child. Describe: Rates are displayed for the following care levels: infant (0 to <12 months), toddler (12 months to <48 months), preschool-age (48 months to school age) and school age (school entry to < 13 years).
- ☒ Quality level. Describe: Rates are calculated based on full-time and part time weekly rates and if the provider is Gold Seal or a non-gold provider.
- ☐ Other. Describe: [REDACTED]

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

- ☒ Payment rates are set at the 75th percentile benchmark or higher of the most recent MRS. Describe: [The OEL requires each early learning coalition to annually update information on all providers in the Child Care Resource & Referral system. The early learning coalitions survey all providers in their communities to collect provider business profile, services offered and rate information. This information is updated in the state's information system. OEL provides three reports for coalitions to use to verify the information. One is a list of providers that have yet to be updated in the system. Another is a summary-level status report, which displays the number and percent of providers that have completed the survey. The last report displays the number and percent of providers that have reported out-of-bound rates. OEL also follows-up routinely with coalition staff on the status of their provider survey update results. After the coalition has verified the information, OEL creates a data subset of all providers that have responded to include in the market rate calculation based on provider type groups and rate categories. The market rate is reported as a full-time and part-time weekly rate. Annual, monthly, daily, and hourly rates are converted to full-time weekly rates for inclusion in the calculation. Part-time rates are reported as part-time weekly rates. A rate is excluded from the calculation if it is less than \\$50 for full time, \\$25 for part time or more than \\$300 for full or part-time weekly care. The OEL calculates the 75th percentile using the market rate data subset described above. The market rate report includes rate information by the coalition, county, age group, and provider type. The Market Rate Survey is distributed to the early learning coalitions to analyze current provider payment rates and determine if payment rates should be updated.](#)

[Sufficient payment rates and equal access are evident throughout the state based upon the large participation rate of various provider types in the School Readiness Program. Currently, 68 percent of the total licensed child care centers and over 50 percent of the total family child care home providers in the state are also contracted to provide school readiness services to eligible children. Additionally, there are a total of 1,031 license-exempt providers, to include religious-exempt, public and non-public schools, and registered family child care providers, which are contracted as providers of the School Readiness Program.](#)

- ☐ Based on the approved alternative methodology, payment rates ensure equal access. Describe:
- ☒ Feedback from parents, including parent surveys or parental complaints. Describe: [There is no data or complaints showing that families are unable to access child care.](#)
- ☐ Other. Describe:



#### 4.5 Payment Practices and the Timeliness of Payments

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

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

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

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

- a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):
  - ☐ Paying prospectively prior to the delivery of services. Describe the policy or procedure.
  - ☒ Paying within no more than 21 calendar days of the receipt of a complete invoice for services. Describe the policy or procedure. [Grant Agreement requirement for ELCs. Contractual requirement for RCMA.](#)
- b) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):
  - ☒ Paying based on a child's enrollment rather than attendance. Describe the policy or procedure. [The state supports fixed costs of providing child care services by requiring the coalition to reimburse the provider based on the child's authorized hours of care needed, either part-time or full-time. For a child who is authorized](#)

only full-time care, a coalition shall not recoup or adjust a provider's reimbursement for days a child attends part-time. The coalition shall not reduce authorized hours of care prior to redetermination unless the parent requests a reduction in the authorized hours of care based on hours of care needed (Rule 6M-4.500, FAC

- ☐ Providing full payment if a child attends at least 85 percent of the authorized time. Describe the policy or procedure.
- ☒ Providing full payment if a child is absent for five or fewer days in a month. Describe the policy or procedure. The state currently supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences and providing full payment if a child is absent for up to a certain number of days in a month. In accordance with Rule 6M-4.500(4), FAC, reimbursement shall be authorized for no more than three absences per calendar month per child except in the event of extraordinary circumstances. In these cases the coalition or its designee shall provide written approval for payment based on written documentation provided by the parent justifying the excessive absence for up to an additional seven days.
- ☐ Use an alternative approach for which the Lead Agency provides a justification in its Plan. If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

- c) The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).
- i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time). Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time). Reimbursement for child care is Full-time or Part-time with additional units of care for extended hours (greater than Full-Time Care), and one unit of care for less than Part-Time care.
  - ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents. Describe the policy or procedure. The 2019-20 School Readiness Provider Contract is under rule promulgation and will be final in late fall, the new database will be enhanced to capture the changes in the rule. A registration fee of up to \$75 per child will be paid to School Readiness, this payment will be limited to two times during a child's continuous time in the School Readiness Program.  
Exceptions are:  
If the child is attending a provider and the provider closes or has its contract terminated the ELC shall pay the registration fee at the new provider due to



[this circumstance. This is a one time exception and does not count towards the lifetime limit.](#)

[If a child is in the SR Program continuously for 5 years, they are allowed an additional payment for registration fees during the 5th year.](#)

[If there is a break in care of 12 consecutive months the limit refreshes.](#)

[Foster children that change foster homes will be eligible for additional fee payment.](#)

[Provider will be required to return the registration fee if they expel children or require families to transfer within 120 days of payment of registration fee](#)

**[Hardship exception for lifetime limit:](#)**

[Illness of the child that would result in the family having to move.](#)

[Loss of a parent that would result in the family having to move.](#)

[Loss of employment that would result in the family having to move.](#)

[Being evicted that would result in the family having to move](#)

[The OEL has conducted a statewide survey and data analysis to support this policy.](#)

- d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe: [All CCDF providers complete Form OEL-SR-20 – Statewide School Readiness Provider Contract. This stipulates payment policies, including rates, schedules, and any fees charged to providers, and the dispute-resolution process.](#)
- e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur. Describe: [The state provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment through the ELCs. ELCs provide prompt notification to providers and parents of any eligibility status changes. Rule 6M-4.500 FAC requires coalitions notify providers within 10 calendar days if as a result of redetermination, a parent is determined ineligible. The rule requires that the coalition notify the provider a minimum of two weeks prior to a child's termination.](#)
- f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe: [The state also has a timely appeal and resolution process for payment inaccuracies and disputes, as provided in the Statewide School Readiness Provider Contract \(contract\). If a provider disputes any action taken by the coalition pursuant to the terms of the contract, the provider may request a review hearing. The coalition and provider will decide upon a date and time for the review hearing within 45 days of the request for the review hearing. At that point a Review Hearing Committee will assess the claims of the provider. The coalition will be provided a reasonable opportunity to submit rebuttal evidence. Following the completion of the presentations the Review Hearing Committee will vote on each of the provider's claims.](#)

g) Other. Describe:

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

☒ No, the practices do not vary across areas.

☐ Yes, the practices vary across areas. Describe:

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

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

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

☐ In licensed family child care.

☐ In licensed child care centers.

☒ Other. Sufficient payment rates and equal access are evident throughout the state based upon the large participation rate of various provider types in the School Readiness Program. Currently, 68 percent of the total licensed child care centers and over 50 percent of the total family child care home providers in the state are also contracted to provide school readiness services to eligible children. Additionally, there are a total of 1,031 license-exempt providers, to include religious-exempt, public and non-public schools, and registered family child care providers, which are contracted as providers of the School Readiness Program.

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

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

☒ Grants and contracts (as discussed in 4.1.3). Describe: Utilization of contracted slots will be based on a community needs assessment.

☐ Family child care networks. Describe:

☐ Start-up funding. Describe:

☐ Technical assistance support. Describe:

☐ Recruitment of providers. Describe:

☐ Tiered payment rates (as discussed in 4.3.2). Describe:

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

☐ Accreditation supports. Describe:

☐ Child care health consultation. Describe:

- ☐ Mental health consultation. Describe
- ☐ Other. Describe \_\_\_\_\_

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

- ☒ Grants and contracts (as discussed in 4.1.3). Describe: [Utilization of contracted slots will be based on a community needs assessment.](#)
- ☒ Family child care networks. Describe: [The Florida Family Child Care Home Association is a part of every collaborative network that OEL facilitates. They actively participate on the Florida Infant/Toddler Network where they partner to address capacity needs.](#)
- ☐ Start-up funding. Describe:
- ☒ Technical assistance support. Describe: [The Florida Infant/Toddler Network supports providers with local inclusion specialists. The Network supports the inclusion specialist through specialized trainings.](#)
- ☐ Recruitment of providers. Describe:
- ☒ Tiered payment rates (as discussed in 4.3.2). Describe: [Early learning coalitions and RCMA assure quality of care for infants and toddlers based on the needs of their local communities, including the payment of a Gold Seal rate differential \(see additional information on this program below\) for infants and toddlers. Early Head Start programs that are receiving subsidy are also eligible for Gold Seal rate.](#)
- ☒ Support for improving business practices, such as management training, paid sick leave, and shared services. Describe: [OEL offers trainings for improving business practices through the statewide training initiative. Additionally, a business practices course is a requirement for completing the application for a Florida Director Credential. This course covers child care business for all ages. Some early learning coalitions also offer local business trainings for providers, offering templates for business plans, parent handbooks, and salary scales.](#)
- ☐ Accreditation supports. Describe:
- ☐ Child care health consultation. Describe:
- ☐ Mental health consultation. Describe:
- ☐ Other. Describe:

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

- ☒ Grants and contracts (as discussed in 4.1.3). Describe: [Utilization of contracted slots will be based on a community needs assessment.](#)
- ☒ Family child care networks. Describe: [The Florida Family Child Care Home Association is a part of every collaborative network that OEL facilitates. They actively participate where their partnership could help address capacity needs.](#)
- ☐ Start-up funding. Describe:
- ☒ Technical assistance support. Describe: [The Florida Inclusion Network supports providers with local inclusion specialists. The Network supports the inclusion](#)

specialists through specialized trainings. Additionally, trainings are offered through the statewide training initiative that offers courses with technical assistance opportunities and stipends to incentivize completion.

- ☐ Recruitment of providers. Describe:
- ☒ Tiered payment rates (as discussed in 4.3.2). Describe: The amount of subsidy shall be consistent with the rates for special needs child care established by DCF. A special needs rate may be negotiated up to 20 percent above the licensed center infant payment rate. However, the special needs rates may not exceed the private pay rate for licensed center infant care receiving the same services. This rate differential is locally determined and helps ensure that providers who accept children with special needs are able to make the appropriate modifications necessary to meet each child's unique circumstances. To justify this rate, a provider must show that they are providing care above and beyond ADA requirements for child care facilities.
- ☒ Support for improving business practices, such as management training, paid sick leave, and shared services. Describe: OEL offers trainings for improving business practices through the statewide training initiative. Additionally, a business practices course is a requirement for completing the application for a Florida Director Credential. This course covers child care business for all ages and abilities. A course in support children with special needs is also required for the Florida Director Credential to encourage the leadership to be aware of appropriate business decisions for supporting children with special needs. Some early learning coalitions also offer local business trainings for providers, offering templates for business plans, parent handbooks, and salary scales.
- ☐ Accreditation supports. Describe:
- ☐ Child care health consultation. Describe:
- ☐ Mental health consultation. Describe:
- ☐ Other. Describe:

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

- ☒ Grants and contracts (as discussed in 4.1.3). Describe: Utilization of contracted slots will be based on a community needs assessment.
- ☒ Family child care networks. Describe: The Florida Family Child Care Home Association is a part of every collaborative network that OEL facilitates. They actively participate where their partnership could help address capacity needs.
- ☐ Start-up funding. Describe:
- ☒ Technical assistance support. Describe: OEL supports providers with local technical assistance specialists that are available to all providers, regardless of hours of service. Additionally, OEL offers courses through the statewide training initiative by offering course that are partnered with technical assistance opportunities and offer stipends for completion.
- ☐ Recruitment of providers. Describe:

- ☐ Tiered payment rates (as discussed in 4.3.2). Describe:
- ☒ Support for improving business practices, such as management training, paid sick leave, and shared services. Describe: [OEL offers trainings for improving business practices through the statewide training initiative. Additionally, a business practices course is a requirement for completing the application for a Florida Director Credential. This course covers child care business for all service hours. Some early learning coalitions also offer local business trainings for providers, offering templates for business plans, parent handbooks, and salary scales.](#)
- ☐ Accreditation supports. Describe:
- ☐ Child care health consultation. Describe:
- ☐ Mental health consultation. Describe:
- ☐ Other. Describe:

e) Other. Check and describe all that apply:

- ☐ Grants and contracts (as discussed in 4.1.3). Describe:
- ☐ Family child care networks. Describe:
- ☐ Start-up funding. Describe:
- ☐ Technical assistance support. Describe:
- ☐ Recruitment of providers. Describe:
- ☐ Tiered payment rates (as discussed in 4.3.2). Describe:
- ☐ Support for improving business practices, such as management training, paid sick leave, and shared services. Describe:
- ☐ Accreditation supports. Describe:
- ☐ Child care health consultation. Describe:
- ☐ Mental health consultation. Describe:
- ☐ Other. Describe:

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

- a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment? [Significant poverty areas are identified by census tracts with 40% or more of the population at or below 150% FPL.](#)
- b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs. [OEL works closely with Head Start, Early Head Start, Migrant and Seasonal Head Start and Early Head Start – Child Care Partnerships grantees to coordinate services and to assure families in targeted low-income areas have more access to quality child care settings. For example, families are referred by CCR&R to other programs and OEL is working to have applications for multiple programs linked on one website. ELPFP providers located in high poverty](#)

[tract areas are given a higher rate for participation in order to help increase access to high quality providers in those areas of the state.](#)

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

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

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

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

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

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

### 5.1 Licensing Requirements

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

Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

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

- ☒ Center-based child care. Describe and provide the citation: [Child Care Facilities, as defined in s. 402.302\(2\), F. S.; Chapter 65C-22, F.A.C.](#)
- ☒ Family child care. Describe and provide the citation: [Family Day Care Homes, as defined in s. 402.302\(8\), F.S. and Chapter 65C-20, F.A.C.; Also, Large Family Child Care Homes, as defined in s. 402.302\(11\), F.S.; Chapter 65C-20, F.A.C.](#)
- ☐ In-home care (care in the child's own home). Describe and provide the citation (if applicable):

- 5.1.2 Describe if any providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)). Note: Additional information about exemptions related to CCDF providers is required in 5.1.3. [Center-based child care programs exempt from licensure under s. 402.316, F.S., are required to be accredited by an agency that has set minimum standards for health and safety and ensures the program maintains compliance with these standards. License-exempt providers are also required to complete background screening in accordance with s. 402.305, F.S. Public and Nonpublic school programs, as defined in s. 402.305, F.S., which are operated and staffed directly by the school must comply with State Board of Education standards. All license-exempt child care programs that provide CCDF services must meet minimum standards for health, safety and sanitation set in 6M-4.620, F.A.C., and must complete an annual inspection to verify compliance with these minimum standards. Registered family day care homes exempt from licensure are required to complete an annual health and safety checklist as part of their annual registration renewal. Registered family day care homes that provide CCDF services must meet minimum standards for health, safety and sanitation, and must complete an annual inspection to verify compliance with minimum standards. Informal child care providers that provide CCDF services must meet minimum standards for health, safety and sanitation, and must complete an annual inspection to verify compliance with minimum standards.](#)

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

- ☒ Center-based child care. If checked, describe the exemptions. [Religious exempt child care facilities \(s. 402.316, F.S.\) exempt from licensure are an allowable provider type; however, these providers must meet personnel screening requirements pursuant to ss. 402.305 and 402.3055, F.S., must be accredited by or a member of an organization which publishes and requires compliance with standards for health, safety and sanitation, and must also meet minimum requirements of any applicable local governing body as to health, sanitation and safety.](#)



Public School programs for children in 5-year old kindergarten and grades one or above and programs for children who are at least 3 years of age, but under 5 years of age, provided the programs are operated and staffed directly by the schools and provided they meet age-appropriate standards as adopted by the State Board of Education, are not deemed child care and are exempt from licensure.

Nonpublic School programs for children in 5-year-old kindergarten and grades one or above and programs for children who are at least 3 years of age, but under 5 years of age, provided the programs are operated and staffed directly by the schools and provided that a majority of the children enrolled in the schools are 5 years of age or older and provide the programs meet background screening requirements for personnel, are not deemed child care and are exempt from licensure. However, nonpublic school programs for children who are at least 3 years of age, but under 5 years of age, which are not licensed must substantially comply with child care standards. These programs, as described, are allowable provider types.

- ☒ Family child care. If checked, describe the exemptions. Family child care homes can be licensed or registered. Family child care homes shall be licensed if existing county licensing ordinance or if the board of county commissioners passes a resolution that the family day care homes must be licensed. Other family day care homes may choose to be licensed. Currently, there are 15 counties in Florida that require family child care homes to be licensed. Registered Family Day Care Homes (s. 402.313, F.S.) - If not subject to licensure, family day care homes must register annually with DCF. Family day care home means an occupied residence in which child care is regularly provided for children from at least two unrelated families and which receives a payment, fee, or grant for any of the children receiving care, whether or not operated for profit.
- ☒ In-home care. If checked, describe the exemptions. Informal providers, defined as persons who provide care for eligible children from only one family who are, by marriage, blood relationship, or court decree, the grandchild, great grandchild, sibling (if such provider lives in a separate residence), niece, or nephew of such provider, are not required to be licensed. However, if the informal provider receives CCDF funding, they must meet the same health, safety, sanitation, screening and inspection requirements as family day care home providers.

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

### **5.2.1 Standards on ratios, group sizes, and qualifications for CCDF providers.**

Lead Agencies are required to establish child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories.



a) Licensed CCDF center-based care

1. Infant

- How does the State/territory define infant (age range): [Children from birth to 1 year of age.](#)
- Ratio: [1:4.](#)
- Group size: [maximum of 12.](#)
- Teacher/caregiver qualifications: [Minimum child care personnel requirements are established in s. 402.305\(2\)\(c\), F.S. for licensed programs, and in Rule 6M-4.620, F.A.C., for all CCDF providers, prohibit a person under the age of 21 from being the operator of a child care facility and a person under the age of 16 from being employed at such facility unless such person is under direct supervision and is not counted for the purposes of computing the personnel-to-child ratio. There are no minimum education requirements for personnel. However, pursuant to Chapter 65C-22, F.A.C., all child care personnel in licensed facilities must successfully complete DCF's 40-hour Introductory Child Care Training, which is divided into two parts. Part I is comprised of 30 hours of training and covers child care facility rules and regulations, health, safety and nutrition, identifying and reporting child abuse and neglect, child growth and development and behavioral observation and screening. Part II is comprised of 10 hours of training related to general developmentally appropriate practices and age-specific training courses. All licensed center child care personnel must also complete a single course of training in early literacy and language development of children ages birth through 5 years of age that is a minimum of five-clock-hours. All licensed center child care personnel must complete fire extinguisher training within their first 30 days of employment. Additional training requirements based on the services provided by the center include: safe sleep training if the program provides infant care services; and medication administration/storage training if the program administers medication to children in care. First Aid/CPR certification is required for a minimum of one personnel who is on the premises and available during the center's operating hours. By October 2019, all staff will be required to have First Aid/CPR training and certification. Annual in-service training requirements include a minimum of 10-clock-hours of training concentrating on one of 22 designated training topic areas set in s. 402.305\(2\)\(d\)\(4\), F.S. and 65C-22.001\(6\), F.A.C. All CCDF providers must complete preservice training requirements established in Rule 6M-4.620, F.A.C., within 90 days of employment and may not be unsupervised with children in care until preservice training requirements are complete. Effective October 25, 2018, in infant classrooms where there are 5 to 8 children present, one of the teachers needed to meet ratio requirements must have an active credential \(Child Development Associate or its equivalent\), as recognized by DCF. In infant classrooms where there are 9 to 12 children present, two of the three teachers needed to meet ratio requirements must have an active credential.](#)

2. Toddler

- How does the State/territory define toddler (age range): [Children from 1 to 3 years of age.](#)
- Ratio: [1:6 for children age 1 year to 2 years of age; 1:11 for children age 2 years to 3 years of age.](#)
- Group size: [maximum of 12 for children age 1 year to 2 years of age; maximum of 22 for children age 2 years to 3 years of age.](#)
- Teacher/caregiver qualifications: [Minimum child care personnel requirements are established in s. 402.305\(2\)\(c\), F.S. for licensed programs, and in Rule 6M-4.620, F.A.C., for all CCDF providers, prohibit a person under the age of 21 from being the operator of a child care facility and a person under the age of 16 from being employed at such facility unless such person is under direct supervision and is not counted for the purposes of computing the personnel-to-child ratio. There are no minimum education requirements for personnel. However, pursuant to Chapter 65C-22, F.A.C., all child care personnel in licensed facilities must successfully complete DCF's 40-hour Introductory Child Care Training, which is divided into two parts. Part I is comprised of 30 hours of training and covers child care facility rules and regulations, health, safety and nutrition, identifying and reporting child abuse and neglect, child growth and development and behavioral observation and screening. Part II is comprised of 10 hours of training related to general developmentally appropriate practices and age-specific training courses. All licensed center child care personnel must also complete a single course of training in early literacy and language development of children ages birth through 5 years of age that is a minimum of five-clock-hours. All licensed center child care personnel must complete fire extinguisher training within their first 30 days of employment. Additional training requirements based on the services provided by the center include: safe sleep training if the program provides infant care services; and medication administration/storage training if the program administers medication to children in care. First Aid/CPR certification is required for a minimum of one personnel who is on the premises and available during the center's operating hours. By October 2019, all staff will be required to have First Aid/CPR training and certification. Annual in-service training requirements include a minimum of 10-clock-hours of training concentrating on one of 22 designated training topic areas set in s. 402.305\(2\)\(d\)\(4\), F.S. and 65C-22.001\(6\), F.A.C. All CCDF providers must complete preservice training requirements established in Rule 6M-4.620, F.A.C., within 90 days of employment and may not be unsupervised with children in care until preservice training requirements are complete. Effective October 25, 2018, in classrooms where 7 to 12 toddler children aged 1 year old are present, one of the teachers needed to meet ratio requirements must have an active credential \(Child Development Associate or its equivalent\), as recognized by DCF. In classrooms where 12 to 22 toddler children aged 2 years old are present, one of the teachers needed to meet ratio requirements must have an active credential.](#)

### 3. Preschool

- How does the State/territory define preschool (age range): [Children age 3 years to 5 years old.](#)

- Ratio: [1:15 for children age 3 years to 4 years old; 1:20 for children age 4 years to 5 years old.](#)
- Group size: [maximum of 30 for children age 3 years to 4 years old; maximum of 40 for children age 4 years to 5 years old.](#)
- Teacher/caregiver qualifications: [Minimum child care personnel requirements are established in s. 402.305\(2\)\(c\), F.S. for licensed programs, and in Rule 6M-4.620, F.A.C., for all CCDF providers, prohibit a person under the age of 21 from being the operator of a child care facility and a person under the age of 16 from being employed at such facility unless such person is under direct supervision and is not counted for the purposes of computing the personnel-to-child ratio. There are no minimum education requirements for personnel. However, pursuant to Chapter 65C-22, F.A.C., all child care personnel in licensed facilities must successfully complete DCF's 40-hour Introductory Child Care Training, which is divided into two parts. Part I is comprised of 30 hours of training and covers child care facility rules and regulations, health, safety and nutrition, identifying and reporting child abuse and neglect, child growth and development and behavioral observation and screening. Part II is comprised of 10 hours of training related to general developmentally appropriate practices and age-specific training courses. All licensed center child care personnel must also complete a single course of training in early literacy and language development of children ages birth through 5 years of age that is a minimum of five-clock-hours. All licensed center child care personnel must complete fire extinguisher training within their first 30 days of employment. Additional training requirements based on the services provided by the center include: safe sleep training if the program provides infant care services; and medication administration/storage training if the program administers medication to children in care. First Aid/CPR certification is required for a minimum of one personnel who is on the premises and available during the center's operating hours. By October 2019, all staff will be required to have First Aid/CPR training and certification. Annual in-service training requirements include a minimum of 10-clock-hours of training concentrating on one of 22 designated training topic areas set in s. 402.305\(2\)\(d\)\(4\), F.S. and 65C-22.001\(6\), F.A.C. All CCDF providers must complete preservice training requirements established in Rule 6M-4.620, F.A.C., within 90 days of employment and may not be unsupervised with children in care until preservice training requirements are complete. Effective October 25, 2018, in classrooms where 16 to 30 preschool children aged 3 years old are present, one of the teachers needed to meet ratio requirements must have an active credential \(Child Development Associate or its equivalent\), as recognized by DCF. In classrooms where 21-40 preschool children ages 4 to 6 are present, one of the teachers needed to meet ratio requirements must have an active credential.](#)

#### 4. School-age

- How does the State/territory define school-age (age range): [Children age 5 years or older, and who are enrolled in and attending a kindergarten program or grades above.](#)
- Ratio: [1:25.](#)
- Group size: [maximum of 50.](#)

- Teacher/caregiver qualifications: Minimum child care personnel requirements are established in s. 402.305(2)(c), F.S. for licensed programs, and in Rule 6M-4.620, F.A.C., for all CCDF providers, prohibit a person under the age of 21 from being the operator of a child care facility and a person under the age of 16 from being employed at such facility unless such person is under direct supervision and is not counted for the purposes of computing the personnel-to-child ratio. There are no minimum education requirements for personnel. However, pursuant to Chapter 65C-22, F.A.C., all child care personnel in licensed facilities must successfully complete DCF's 40-hour Introductory Child Care Training, which is divided into two parts. Part I is comprised of 30 hours of training and covers child care facility rules and regulations, health, safety and nutrition, identifying and reporting child abuse and neglect, child growth and development and behavioral observation and screening. Part II is comprised of 10 hours of training related to general developmentally appropriate practices and age-specific training courses. All licensed center child care personnel must also complete a single course of training in early literacy and language development of children ages birth through 5 years of age that is a minimum of five-clock-hours. All licensed center child care personnel must complete fire extinguisher training within their first 30 days of employment. Additional training requirements based on the services provided by the center include: safe sleep training if the program provides infant care services; and medication administration/storage training if the program administers medication to children in care. First Aid/CPR certification is required for a minimum of one personnel who is on the premises and available during the center's operating hours. By October 2019, all staff will be required to have First Aid/CPR training and certification. Annual in-service training requirements include a minimum of 10-clock-hours of training concentrating on one of 22 designated training topic areas set in s. 402.305(2)(d)(4), F.S. and 65C-22.008(4), F.A.C. All CCDF providers must complete preservice training requirements established in Rule 6M-4.620, F.A.C., within 90 days of employment and may not be unsupervised with children in care until preservice training requirements are complete. Effective October 25, 2018, in classrooms where 26 to 50 school-age children ages 5 and older are present, one of the teachers needed to meet ratio requirements must have an active credential (Child Development Associate or its equivalent), as recognized by DCF.
5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers. The required standards for ratio and group size are uniform for both licensed and license-exempt CCDF providers.
  6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups. **Ratios, Mixed Age Groups:** When children 2 years of age and older are in care, the staff-to-children ratio is based on the age group with the largest number of children within the group (s. 402.305(4)(a)7., F.S.). Where children under one year of age are included, one staff member shall be responsible for no more than four children of any age group, at all times. Where children one year of age but under two years of age are included, one staff member shall be responsible for no more than six children of any age group, at all times (Rule 65C-

22.001(4)(b), F.A.C.). **Group Size, Mixed Age Groups:** In groups of mixed age ranges, where children under two years of age are included, the group size for the youngest population within the group applies. In groups of mixed age ranges where all children are two years of age or older, the group size for the majority population present within the group applies.

7. Describe the director qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care. Pursuant to s. 402.305(2), F.S., every licensed child care facility must have a credentialed director. The director credential core requirements include the following: active staff credential; accredited high school diploma or G.E.D.; 30-clock hour introductory course in child care, which covers state and local rules and regulations governing child care, health, safety and nutrition, identifying and reporting child abuse and neglect; child development; developmental behaviors; early literacy and language development of children from birth to 5 years of age; and 8 hours developmental disabilities.

b) Licensed CCDF family child care provider

1. Infant

- How does the State/territory define infant (age range): Children from birth to 1 year of age.
- Ratio: Family day care homes – 1:4; Large family child care homes – 2:8.
- Group size: Family day care homes – A maximum of four children birth through 12 months of age; Large family child care homes - A maximum of 8 children from birth to 24 months of age.
- Teacher/caregiver qualifications: Pursuant to Chapter 65C-20, F.A.C., for licensed child care homes, and Rule 6M-4.620, F.A.C., for all CCDF child care homes, the operator of a large family child care home must be at least 21 years of age and both the additional full-time employee and designated substitute must be at least 18 years of age. There are no minimum education requirements for family child care home personnel. However, a large family child care home must first have operated as a licensed family day care home for 2 years, with an operator who has had a child development associate credential or its equivalent for one year. Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF's 30-clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five-clock-hours of training in early literacy and language development of children ages birth through 5 years. Annual in-service training requirements include a minimum of 10-clock-hours of training concentrating on children ages birth through 12 and in one of 22 designated training topic areas set in ss. 402.313, 402.3131, F.S. & 65C-20.008(6), F.A.C. Additionally, within six months of licensure the operator of a large family child care home must complete 10-clock-hours of specialized training. All child care home operators, substitutes, and employees of large family child care homes must complete fire extinguisher training. Additional training requirements based on the services provided by the

home include: safe sleep training if the home provides infant care services; and medication administration/storage if the home administers medication to children in care. First Aid/CPR certification is required for the home operator and substitute. By October 2019, employees of large family child care homes will also be required to have First Aid/CPR training and certification. All CCDF providers must complete preservice training requirements established is Rule 6M-4.620, F.A.C., within 90 days of employment and may not be unsupervised with children in care until preservice training requirements are complete.

## 2. Toddler

- How does the State/territory define toddler (age range): Children from 1 to 3 years of age.
- Ratio: Family day care homes – 1:6; Large family child care homes - 2:8.
- Group size: Family day care homes – A maximum of six children, with no more than three children birth to 12 months of age; Large family child care homes - A maximum of 8 children from birth to 24 months of age.
- Teacher/caregiver qualifications: Pursuant to Chapter 65C-20, F.A.C., for licensed child care homes, and Rule 6M-4.620, F.A.C., for all CCDF child care homes, the operator of a large family child care home must be at least 21 years of age and both the additional full-time employee and designated substitute must be at least 18 years of age. There are no minimum education requirements for family child care home personnel. However, a large family child care home must first have operated as a licensed family day care home for 2 years, with an operator who has had a child development associate credential or its equivalent for one year. Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF's 30-clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five-clock-hours of training in early literacy and language development of children ages birth through 5 years. Annual in-service training requirements include a minimum of 10-clock-hours of training concentrating on children ages birth through 12 and in one of 22 designated training topic areas set in ss. 402.313, 402.3131, F.S. & 65C-20.008(6), F.A.C. Additionally, within six months of licensure the operator of a large family child care home must complete 10-clock-hours of specialized training. All child care home operators, substitutes, and employees of large family child care homes must complete fire extinguisher training. Additional training requirements based on the services provided by the home include: safe sleep training if the home provides infant care services; and medication administration/storage if the home administers medication to children in care. First Aid/CPR certification is required for the home operator and substitute. By October 2019, employees of large family child care homes will also be required to have First Aid/CPR training and certification. All CCDF providers must complete preservice training requirements established is Rule 6M-4.620, F.A.C., within 90 days of employment and may not be unsupervised with children in care until preservice training requirements are complete.

## 3. Preschool



- How does the State/territory define preschool (age range): Children age 3 years to 5 years old.
- Ratio: Family day care homes – 1:6; Large family child care homes – 2:12
- Group size: Family day care homes – A maximum of 6 preschool children if they are all older than 12 months of age; Large family child care homes – A maximum of 12 children, with no more than 4 children under 24 months of age.
- Teacher/caregiver qualifications: Pursuant to Chapter 65C-20, F.A.C., for licensed child care homes, and Rule 6M-4.620, F.A.C., for all CCDF child care homes, the operator of a large family child care home must be at least 21 years of age and both the additional full-time employee and designated substitute must be at least 18 years of age. There are no minimum education requirements for family child care home personnel. However, a large family child care home must first have operated as a licensed family day care home for 2 years, with an operator who has had a child development associate credential or its equivalent for one year. Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF's 30-clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; developmental behaviors. In addition, operators must complete a minimum of five-clock-hours of training in early literacy and language development of children ages birth through 5 years. Annual in-service training requirements include a minimum of 10-clock-hours of training concentrating on children ages birth through 12 and in one of 22 designated training topic areas set in s. 402.313, 402.3131, F.S. & 65C-20.008(6), F.A.C. Additionally, within six months of licensure the operator of a large family child care home must complete 10-clock-hours of specialized training. All child care home operators, substitutes, and employees of large family child care homes must complete fire extinguisher training. Additional training requirements based on the services provided by the home include: safe sleep training if the home provides infant care services; and medication administration/storage if the home administers medication to children in care. First Aid/CPR certification is required for the home operator and substitute. By October 2019, employees of large family child care homes will also be required to have First Aid/CPR training and certification. All CCDF providers must complete preservice training requirements established in Rule 6M-4.620, F.A.C., within 90 days of employment and may not be unsupervised with children in care until preservice training requirements are complete.

#### 4. School-age

- How does the State/territory define school-age (age range): Children age 5 years or older, and who are enrolled in and attending a kindergarten program or grades above.
- Ratio: Family day care homes – 1:10; Large family child care homes – 2:12.
- Group size: Family day care homes – A maximum of 10 children if no more than 5 are preschool age and of those 5, no more than 2 are under 12 months of age; Large family child care homes – A maximum of 12 children, with no more than 4 children under 24 months of age.

- Teacher/caregiver qualifications: Pursuant to Chapter 65C-20, F.A.C., for licensed child care homes, and Rule 6M-4.620, F.A.C., for all CCDF child care homes, the operator of a large family child care home must be at least 21 years of age and both the additional full-time employee and designated substitute must be at least 18 years of age. There are no minimum education requirements for family child care home personnel. However, a large family child care home must first have operated as a licensed family day care home for 2 years, with an operator who has had a child development associate credential or its equivalent for one year. Prior to licensure and prior to caring for children, the operator of a family child care home must show evidence of completion of DCF's 30-clock-hour Family Child Care Home training, covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; and developmental behaviors. In addition, operators must complete a minimum of five-clock-hours of training in early literacy and language development of children ages birth through 5 years. Annual in-service training requirements include a minimum of 10-clock-hours of training concentrating on children ages birth through 12 and in one of 22 designated training topic areas set in s. 402.313, 402.3131, F.S. & 65C-20.008(6), F.A.C. Additionally, within six months of licensure the operator of a large family child care home must complete 10-clock-hours of specialized training. All child care home operators, substitutes, and employees of large family child care homes must complete fire extinguisher training. Additional training requirements based on the services provided by the home include: safe sleep training if the home provides infant care services; and medication administration/storage if the home administers medication to children in care. First Aid/CPR certification is required for the home operator and substitute. By October 2019, employees of large family child care homes will also be required to have First Aid/CPR training and certification. All CCDF providers must complete preservice training requirements established in Rule 6M-4.620, F.A.C., within 90 days of employment and may not be unsupervised with children in care until preservice training requirements are complete.
5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes. The required standards for ratio and group size are uniform for both licensed and license-exempt CCDF providers. For license-exempt registered family day care providers, the operator must be at least 18 years of age and a resident of the family home. All designated substitutes for the family day care home must also be at least 18 years of age. There are no minimum education requirements for the operator or substitutes of a family day care home. However, prior to registration, all registered family day care home operators must successfully complete DCF's 30-clock-hour Family Child Care Home Training covering state and local rules and regulations governing child care; health, safety and nutrition; identifying and reporting child abuse and neglect; child growth and development; and developmental behaviors. In addition, operators must complete a minimum of five-clock- hours of training in early literacy and language development of children ages birth through 5 years. In-service training requirements include a minimum of 10-clock-hours of annual in- service training concentrating on children ages birth through 12 and in one of 22 designated training topic areas. Substitutes in registered family day care homes are not required to complete the 30-clock-hour training or the literacy training. Registered



family day care homes that provide CCDF services must ensure that the operator and all designated substitutes have completed preservice training requirements within 90 days and prior to caring for children unsupervised

c) In-home CCDF providers:

1. Describe the ratios. Same as ratios for licensed or registered family day care homes (above).
2. Describe the group size. Same as group sizes for licensed or registered family day care homes (above).
3. Describe the maximum number of children that are allowed in the home at any one time. Family day care homes are allowed a maximum of 10 children, depending on the ages of children in care.
4. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size. Yes, household children under 13 years of age, when on premises of the family day care home, shall be included in the overall capacity of the home.
5. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day. If caring for infants only, the maximum number of children allowed in care is four (4). If caring for school-aged children only, the maximum number of children in care can be 10.

5.2.2 Health and safety standards for CCDF programs.

States and territories must establish health and safety standards for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the topics listed below, as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care programs receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives because Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)).

- a) To certify, describe how the following health and safety standards for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(l)). Note – This question is different from the health and safety training requirements, which are addressed in question 5.2.3.
  1. Prevention and control of infectious diseases (including immunization)
    - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) Licensed child care

programs, as well as programs serving children receiving CCDF assistance, are required to observe children daily for signs of health and communicable disease. If any child, personnel or other person in the program facility is suspected of having a communicable disease, they must be removed from the program or placed in an isolation area that meets certain health and sanitation requirements. Program operators are required to immediately notify their local county health department of any suspected outbreak of a communicable disease. Programs must obtain documentation of current health exams and immunizations, or equivalent religious exemption, for all children within 30 days of enrollment.

- List all citations for these requirements, including those for licensed and license-exempt programs. Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Sections 12 and 13, pages 27-30; Section 19.2, pages 45-46. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; section 35, pages 21-22. Child Care Facility Handbook effective October 25, 2017; section 6, pages 51-52. School-Age Child Care Facility Handbook effective February 2017; section 5, pages 37-38. Rule 65C-20, F.A.C., FDCH Classification Summary; section 28, page 18. LFCCH Classification Summary; section 29, page 20-21, FDCH/LFCCH Handbook effective October 25, 2017; Section 7.23, pages 40-42.  
<https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620>  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C.;  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf>,  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>.
- Describe any variations based on the age of the children in care. Programs serving school-age children who attend public or non-public schools are not required to obtain documentation of current health exams and immunizations for these children, since these records are on file at the school where the child is enrolled.
- Describe if relatives are exempt from this requirement. No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.

## 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) [Nap and Sleep Spaces/Safe Sleep Practices: Programs must have designated areas, a minimum of 18 inches apart, where each child in care can sit quietly or lie down. Napping and sleeping spaces must not be under, behind or against furniture that may create a hazard, and must not interfere with exit areas. Children up to one year of age must nap and sleep in an individual crib, port-a-crib or play yard that meets federal construction regulations. No double or multi-deck cribs, cots or beds may be used. Additionally, when napping or sleeping, all infants in care must be positioned on their back and on a firm surface to reduce the risk of Sudden Infant Death Syndrome \(SIDS\), unless an alternative sleeping position is authorized in writing by a physician, documentation of which must be maintained in the child's file.](#)
- List all citations for these requirements, including those for licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Section 10.4, page 24. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; sections 18-20, pages 9-10. Child Care Facility Handbook effective October 25, 2017; section 3.6, pages 23-25. Rule 65C-20, F.A.C., FDCH Classification Summary; section 16, page 10. LFCCH Classification Summary; section 17, page 12, FDCH/LFCCH Handbook effective October 25, 2017; Section 7.8, pages 31-32.](#)  
[https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620,](https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620)  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). [In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C., which includes safe sleep training for all program personnel working at a program that offers infant care within 30 days of employment and specific standards for safe-sleep practices to prevent sudden infant death syndrome; Rule 65C-22, F.A.C., Child Care Facility Classification Summary; sections 33, page 20. Child Care Facility Handbook effective October 25, 2017; section 4.2.3, page 39. Rule 65C-20, F.A.C., FDCH Classification Summary; section 7, page 5. LFCCH Classification Summary; section 8, page 6, FDCH/LFCCH Handbook effective October 25, 2017; Section 5.2.1, page 21.](#)  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf> and  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>
- Describe any variations based on the age of the children in care. [Does not apply to school-age only programs.](#)

- Describe if relatives are exempt from this requirement. [No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.](#)
3. Administration of medication, consistent with standards for parental consent
- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) [Medication: Programs are not required to administer medication; however, if they choose to do so, they must follow certain procedures. Prior to administration of any prescription or nonprescription medication, the program must have written authorization, which includes certain information, from the parent or legal guardian of the child. All medication brought to the program by the parent or legal guardian must be in its original container with label and instructions. Additionally, all medication must be stored as to prevent access by children and must have child resistant caps. Medication that has either expired or is no longer being administered must be returned to the parent or legal guardian of the child, or properly disposed of if the child is no longer enrolled in the program. Lastly, the program must maintain proper documentation of all medication dispensed.](#)
  - List all citations for these requirements, including those for licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Section 16, page 35. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; sections 40, pages 24-25. Child Care Facility Handbook effective October 25, 2017; section 6.5, pages 54-55. School-Age Child Care Facility Handbook effective February 2017; section 5.6, pages 40-41. Rule 65C-20, F.A.C., FDCH Classification Summary; section 29, pages 18-19. LFCCH Classification Summary; section 30, pages 21-22, FDCH/LFCCH Handbook effective October 25, 2017; Section 7.24, pages 42-43.](#)  
[https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620,](https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620)  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). [In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C. which includes training on medication administration and storage for all program personnel that administer medication prior to administration; Rule 65C-22, F.A.C., Child Care Facility Classification Summary; section 40, pages 24-25. Child Care Facility Handbook effective October 25, 2017; section 6.5, pages 54-55. Rule 65C-20, F.A.C., FDCH Classification Summary; sections 29 & 30, pages 18-20. LFCCH Classification Summary; sections 30 & 31, pages 21-22. FDCH/LFCCH Handbook effective October 25, 2017; Section 7.24, pages 42-43.](#)  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf> and

<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>.

- Describe any variations based on the age of the children in care. [N/A](#)
- Describe if relatives are exempt from this requirement. [No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.](#)

4. Prevention of and response to emergencies due to food and allergic reactions

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) [Standards related to the prevention of emergencies specific to allergic reactions from medication include: documentation regarding any known allergies to medication or special restrictions must be maintained in the child's file, shared with staff and posted with the child's stored medication. Standards related to the prevention of emergencies specific to food and allergic reactions include: If a special diet, including a special diet related to food allergies, is required for any child, a copy of the diet and a sample meal plan for the diet must be maintained in the child's file and followed at all times. Written documentation of any food allergies must also be maintained in the child's file for as long as the child is in care. Special food restrictions must be shared with staff and must be posted in an easily seen location. Standards related to the response of emergencies, including those due to food and allergic reactions, are outlined in the Emergency Procedures and Notification section of the Health and Safety Handbook. Specifically, programs must notify the custodial parent or legal guardian in the event of any emergency and must follow their instructions regarding action to be taken, including when the child is having an allergic reaction.](#)
- List all citations for these requirements, including those for licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Section 15, numbers 2 and 3, page 34, Section 16, number 2, page 35 and Section 17.3, number 8., page 39; Rule 65C-22, F.A.C., Child Care Facility Classification Summary; sections 25 & 40, pages 15 & 24. Child Care Facility Handbook effective October 25, 2017; sections 3.9.3 & 6.5, pages 32 & 54. School-Age Child Care Facility Handbook effective February, 2017; sections 3.9.3 & 5.6, pages 27 & 40. Rule 65C-20, F.A.C., FDCH Classification Summary; sections 20 & 30, pages 12 & 19. LFCCH Classification Summary; sections 21 & 31, pages 14 & 22. FDCH/LFCCH Handbook effective October 25, 2017; Sections 7.14 & 7.24, pages 34 & 42.](#)  
<https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620>  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). [In addition to the minimum standards set for CCDF programs, licensed child care programs must meet](#)

[licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C.](#)

<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf>,

<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and

<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>

- Describe any variations based on the age of the children in care. [N/A](#)
  - Describe if relatives are exempt from this requirement. [No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.](#)
5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic
- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) [Physical Environment and Equipment and Furnishings: These standard sections set program procedures and requirements for general physical premises safety, as well as lighting, windows and screens, temperature and ventilation, nap and sleep spaces and safe sleep practices, exits areas, bathrooms and sinks, outdoor and indoor play areas, fencing, and all indoor/outdoor equipment, toys and furnishings. In general, the standards require that all program facilities must at all times be clean, in good repair, and free from vermin and all fire, health and safety hazards. No portion of the program facility can be used for any activity that endangers the health and safety of the children in care. The standards also set procedures and requirements for storage and use of potentially harmful or hazardous materials, cleaning, pest control, animals on premises including vaccination and notification, prohibition of smoking on premises and notification, and firearms and weapons.](#)
  - List all citations for these requirements, including those for licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Sections 10 and 11, pages 22-27. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; sections 12-21, pages 6-11. Child Care Facility Handbook effective October 25, 2017; section 3, pages 18-25. School-Age Child Care Facility Handbook effective February, 2017; section 3, pages 15-20. Rule 65C-20, F.A.C., FDCH Classification Summary; sections 9-20, pages 6-13. LFCCH Classification Summary; sections 10-21, pages 7-15. FDCH/LFCCH Handbook effective October 25, 2017; Section 7, pages 27-34. <https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620> <https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012> <https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>](#)



- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C.; Although the topic areas covered are the same, the standards for family child care homes and in-home care vary from those set for child care centers to address and accommodate the unique setting and environment of home care. <http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf>, <http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and <http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>
  - Describe any variations based on the age of the children in care. N/A
  - Describe if relatives are exempt from this requirement. No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.
6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) Child Discipline: Each School Readiness program must have written policies and procedures regarding discipline and expulsion of children in care. These policies must include standards that prohibit any form of discipline that is severe, humiliating, frightening, or associated with food, rest, or toileting. Spanking or other form of physical punishment is prohibited whether associated with discipline or not, including but not limited to, shaking, lifting or jerking by one or both arms, pushing, pulling, forcing or restricting movement, lifting or moving by grasping clothing, or covering a child's head. Additionally, active play must not be withheld from children as a form of discipline or as a consequence for misbehavior. These policies and procedures should also include positive behavioral intervention models to guide the behavior of children by setting appropriate limits, teaching missing or developing skills, and encouraging children to choose positive behaviors. Policies and procedures regarding discipline and expulsion of children in care must be provided to parents/guardians upon enrollment of the child, with receipt verified by the parent/guardian's signature. Documentation of receipt (parent/guardian signature) must be maintained in the child's folder. In addition to the standards above which work to prevent child abuse, shaken baby syndrome and abusive head trauma, program personnel are required to complete preservice training regarding the prevention of child abuse and supporting children in trauma. This training includes awareness and prevention of shaken baby syndrome and abusive head trauma. Additionally, all program personnel must annually sign a Child Abuse & Neglect Reporting Requirements acknowledgement.
  - List all citations for these requirements, including those for licensed and license-exempt providers. Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Section 9, page 21, Section 18.2, page 41 and Section 19.4, number 3, page 47. Rule 65C-22, F.A.C., Child Care Facility



[Classification Summary; section 11, pages 5-6. Child Care Facility Handbook effective October 25, 2017; section 2.8, pages 17-18. School-Age Child Care Facility Handbook effective February, 2017; section 2.8, page 15. \(Does not include the expulsion policy language at this time.\) Rule 65C-20, F.A.C., FDCH Classification Summary; section 2, page 1. LFCCH Classification Summary; section 2, page 1. FDCH/LFCCH Handbook effective October 25, 2017; Section 2.3, pages 10-11.](#)

<https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620>

<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>

<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). [In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C.;](#)  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf>,  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>
  - Describe any variations based on the age of the children in care. [N/A](#)
  - Describe if relatives are exempt from this requirement. [No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.](#)
7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.
- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) [Fire Safety and Emergency Preparedness and Response: Although emergency preparedness plans will differ for each program according to their location, services offered and children served, all programs must have a written emergency preparedness plan unique to their program that includes, at a minimum, the program's procedures for fire, evacuation, relocation, shelter-in-place, lockdown and inclement weather, such as hurricanes, tropical storms or tornadoes. The program's plan must address](#)

how the program will facilitate parent/guardian reunification both onsite and offsite and must also include accommodations for infants and toddlers (if applicable) and how the program will meet the needs of all children in their care (including children with special needs or chronic medical conditions) both during and following an emergency event. Special needs children include any child with an emotional, behavioral or learning disability or physical impairment that requires special services or accommodations. The emergency plan must address how the program will accommodate such children and their unique needs during an emergency event. Fire (evacuation) drills must be practiced monthly and each emergency drill must be practiced a minimum of one time per year, each while children are in care. A current attendance record must accompany staff during all drills or an actual emergency to account for all children and staff. These standards also outline requirements regarding documentation of drills and maintenance of such documentation

- List all citations for these requirements, including those for licensed and license-exempt providers. Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Sections 14 and 15, pages 32-34. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; section 23, pages 11-13. Child Care Facility Handbook effective October 25, 2017; section 3.8, pages 25-27. School-Age Child Care Facility Handbook effective February, 2017; section 3.8, pages 21-23. Rule 65C-20, F.A.C., FDCH Classification Summary; section 27, pages 16-17. LFCCH Classification Summary; section 28, pages 19-20. FDCH/LFCCH Handbook effective October 25, 2017; Section 7.21 & 7.22, pages 39-40.  
<https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620>  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C.; For family child care homes, fire drills must be conducted a minimum of 10 times each year.  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf>,  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>
- Describe any variations based on the age of the children in care. N/A
- Describe if relatives are exempt from this requirement. No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants
  - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) All potentially harmful or hazardous items and materials must be labeled and must be in a locked area or inaccessible and out of children's reach at all times. Regarding the storage of hazardous materials, all areas and surfaces accessible to children must be free from toxic substances, biocontaminants, and hazardous or harmful materials, equipment and tools at all times. The use of hazardous materials, such as during cleaning or pest control, is prohibited while rooms are occupied with children. Bio-contaminants such as soiled diapers, clothing and linens must be disposed of in plastic lined, securely covered containers and kept inaccessible to children in care. Additionally, health and sanitation standards ensure other bio-contaminants such as bacteria and fungi are properly disposed of and destroyed through sanitation procedures.
  - List all citations for these requirements, including those for licensed and license-exempt providers. Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Section 10, pages 22-25, Section 12, page 27-29. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; sections 13 & 14, pages 7 & 8. Child Care Facility Handbook effective October 25, 2017; sections 3.1 & 3.2, pages 19 & 20. School-Age Child Care Facility Handbook effective February, 2017; section 3.2 & 3.3, pages 16 & 17. Rule 65C-20, F.A.C., FDCH Classification Summary; sections 10, 12 & 17, pages 6,7 & 11. LFCCH Classification Summary; sections 11, 13 and 18, pages 8, 12 & 13. FDCH/LFCCH Handbook effective October 25, 2017; Sections 7.2, 7.4 & 7.9, pages 27, 28 & 32.  
<https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620>  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C.;  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf>,  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>
  - Describe any variations based on the age of the children in care. N/A

- Describe if relatives are exempt from this requirement. [No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.](#)

9. Precautions in transporting children (if applicable)

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) [Transportation and Field Trip Activity: These standard sections set program procedures and requirements for the transportation of children in care, including when on a field trip or other activity away from the program facility. The standards set specific requirements and qualifications for drivers \(license and training\) and vehicles \(insurance and mechanical inspections\), and also set specific requirements regarding child safety restraints, staff-to-child ratios during transportation, number of individuals transported at one time, field trip notification, and parental permission for transportation. The standards also set very specific and detailed requirements for documenting and maintaining documentation of all transportation activities to ensure all children are accounted for upon leaving the program facility, arriving at the destination, and returning to the program facility.](#)
- List all citations for these requirements, including those for licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Sections 6 and 8, pages 17-20. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; sections 5-8 & 10, pages 3-5. Child Care Facility Handbook effective October 25, 2017; sections 2.5 & 2.7, pages 14-17. School-Age Child Care Facility Handbook effective February, 2017; sections 2.5 & 2.7, pages 12 -15. Rule 65C-20, F.A.C., FDCH Classification Summary; section 3, pages 2-3. LFCCH Classification Summary; section 3, pages 2-3. FDCH/LFCCH Handbook effective October 25, 2017; Section 2.4, pages 11-13.](#)  
<https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620>  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). ). [In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C.;](#)  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf>,  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>

- Describe any variations based on the age of the children in care. [Child restraint standards are specific to the ages of children in care.](#)
- Describe if relatives are exempt from this requirement. [No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.](#)

10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) [First Aid and Cardiopulmonary Resuscitation: In addition to preservice and ongoing annual training requirements established for all program personnel, there must be at least one staff member certified in both first aid and CPR at the program at all times while children are in care, both onsite and while on field trips. In order to be valid, CPR certification must include an on-site instructor based skill assessment by a certified CPR instructor. The standards set requirements for documentation of first aid and CPR training/certification, as well as maintenance of such documentation. All drivers utilized by the program must also have current and valid certifications in first aid and CPR. This standard applies to all licensed child care programs, as well as all programs contracted to provide CCDF services.](#)
- List all citations for these requirements, including those for licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Section 13.4, page 31. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; sections 36 & 37, pages 22-23. Child Care Facility Handbook effective October 25, 2017; section 4.2.4, page 39. School-Age Child Care Facility Handbook effective February, 2017; section 5.2, pages 38-39. Rule 65C-20, F.A.C., FDCH Classification Summary; section 7, pages 4-5. LFCCH Classification Summary; section 8, pages 5-6. FDCH/LFCCH Handbook effective October 25, 2017; Section 5.1.1, page 19.](#)  
<https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620>  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). [Both the operator and the designated substitute for family child care homes must have current and valid certifications in first aid and CPR. In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C., which requires that one staff member with current and valid certification in First Aid/CPR is on premises at all times. By October 2019, all personnel employed by a licensed/Gold Seal designated child care facility or home must have First Aid/CPR training.](#)  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child>

[%20Care%20Home%20Licensing%20Handbook.pdf](#),  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>

- Describe any variations based on the age of the children in care. [N/A](#)
- Describe if relatives are exempt from this requirement. [No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.](#)

#### 11. Recognition and reporting of child abuse and neglect

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) [Child Safety: Program personnel must not have any inappropriate interactions with children, to include interactions that are aggressive, demeaning or intimidating in nature. All personnel must annually sign a statement of compliance with child abuse and neglect reporting requirements set in s. 39.201, F.S., regarding the duties of mandatory reporters for child abuse and neglect.](#)
- List all citations for these requirements, including those for licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Section 9, page 21 and Section 21, page 49. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; section 47, page 28. Child Care Facility Handbook effective October 25, 2017; section 8.2, page 60. School-Age Child Care Facility Handbook effective February, 2017; section 7.2, pages 46-47. Rule 65C-20, F.A.C., FDCH Classification Summary; section 35, page 22. LFCCH Classification Summary; section 36, pages 24-25. FDCH/LFCCH Handbook effective October 25, 2017; Section 9.2, pages 45-46.](#)  
<https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620>  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). [In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C.;](#)  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf>,  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>
- Describe any variations based on the age of the children in care. [N/A](#)



- Describe if relatives are exempt from this requirement. [No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.](#)

b) Does the Lead Agency include any of the following optional standards?

- ☐ No, if no, skip to 5.2.3.
- ☒ Yes, if yes provide the information related to the optional standards addressed.

1. Nutrition

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) [Food and Nutrition Services: Programs that choose not to prepare and provide food to children in care must make arrangements with parents/guardians to provide nutritional food for their children. In the event the parent does not provide nutritious meals/snacks for the child, the program must provide nutritious food items to complete the child's meal. Programs who choose to prepare and provide must adhere to specific minimum standards set for food preparation, food storage, food hygiene, food handling and nutrition. This standard section also sets program requirements and procedures for the preparation, storage and use of breastmilk, infant formula and infant food, and proper dishwashing and sanitization of all food equipment and surfaces.](#)
- List all citations for these requirements, including those for licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Section 17, pages 35-41. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; sections 24-28, pages 13-17. Child Care Facility Handbook effective October 25, 2017; section 3.9, pages 28-35. School-Age Child Care Facility Handbook effective February, 2017; section 3.9, pages 23-29. Rule 65C-20, F.A.C., FDCH Classification Summary; section 20, pages 12-13. LFCCH Classification Summary; section 21, pages 14-15. FDCH/LFCCH Handbook effective October 25, 2017; Sections 7.13 - 7.14, pages 33-36.](#)  
<https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620>  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). [Although the topic areas covered are the same, the standards for family child care homes and in-home care related to food and nutrition vary from those set for child care centers to address and accommodate the unique setting and environment of home care. In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C.;](#)  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child>



[%20Care%20Home%20Licensing%20Handbook.pdf](#),  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf> Florida Department of Health, Chapter 64E-11, F.A.C. – Food Hygiene standards; <https://www.flrules.org/gateway/ChpaterHome.asp?Chapter=64e-11>

- Describe any variations based on the ages of the children in care. [Foods associated with young children’s choking incidents must not be fed to children under 4 years of age; foods must be cut in age appropriate sized pieces for infants and toddlers.](#)
- Describe if relatives are exempt from this requirement. [No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.](#)

## 2. Access to physical activity

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) [Planned Activities: All programs must have a written, comprehensive and coordinated plan of daily activities that meets the needs of and is appropriate to the age and development of children in care. The plan must include activities that promote the emotional, social and intellectual growth of children; limit/prohibit electronic media time according to the age of children in care; include quiet and active play, both indoors and outdoors; and include meals, snack and nap times \(as appropriate for the age and times children are in care\). In addition, programs must ensure infants in care are provided opportunities for active play outside of cribs, as well as outdoor time each day that weather permits. Programs are not permitted to withhold active play as a form of discipline or consequence for misbehavior.](#)
- List all citations for these requirements, including those for licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Section 7, pages 19-20. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; section 9, pages 4-5. Child Care Facility Handbook effective October 25, 2017; section 2.6, pages 16-17. School-Age Child Care Facility Handbook effective February, 2017; section 2.6, page 14. Rule 65C-20, F.A.C., FDCH Classification Summary; section 14, page 8. LFCCH Classification Summary; section 4, page 3. FDCH/LFCCH Handbook effective October 25, 2017; Section 2.5, page 13.](#)  
<https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620>  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). [In addition to the minimum](#)

standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapters 65C-22 and 65C-20, F.A.C.;

<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf>,

<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and

<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>

- Describe any variations based on the ages of the children in care. The plan of activities must be developmentally appropriate to the ages and needs of children in care.
- Describe if relatives are exempt from this requirement. No, there are no exemptions from this requirement. Relative caregivers accepting CCDF must meet the same standards as family day care homes.

### 3. Caring for children with special needs

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) CCDF providers must include in their emergency preparedness plans how they will care for children with special needs during times of emergencies.
- List all citations for these requirements, including those for licensed and license-exempt providers. Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections, effective 10/24/2016; Section 14.1, page 32. Rule 65C-22, F.A.C., Child Care Facility Classification Summary; section 23, pages 12. Child Care Facility Handbook effective October 25, 2017; section 3.8.5, pages 26-27. School-Age Child Care Facility Handbook effective February, 2017; section 3.8.5, page 22. Rule 65C-20, F.A.C., FDCH Classification Summary; section 27, page 17. LFCCH Classification Summary; section 28, page 19. FDCH/LFCCH Handbook effective October 25, 2017; Section 7.22, page 40.  
<https://www.flrules.org/gateway/RuleNo.asp?title=Office%20of%20Early%20Learning%20-%20School%20Readiness%20Program&ID=6M-4.620>  
<https://www.flrules.org/gateway/RuleNo.asp?title=FAMILY%20DAY%20CARE%20STANDARDS%20AND%20LARGE%20FAMILY%20CHILD%20CARE%20HOMES&ID=65C-20.012>  
<https://www.flrules.org/gateway/RuleNo.asp?title=CHILD%20CARE%20STANDARDS&ID=65C-22.010>
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). In addition to the minimum standards set for CCDF programs, licensed child care programs must meet licensing standards and criteria established in Chapter 65C-22, F.A.C., which specify that all licensed providers must make reasonable accommodations to the program environment so children with special needs can participate and also require child care personnel to complete special needs training. – Chapter 65C-22.001(6), F.A.C.  
<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Family%20Child%20Care%20Home%20Licensing%20Handbook.pdf>,

<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/School%20Age%20Handbook%20docx.pdf> and <http://www.dcf.state.fl.us/programs/childcare/docs/handbook/facility%20handbook.pdf>

- Describe any variations based on the ages of the children in care. [N/A](#)
  - Describe if relatives are exempt from this requirement. [N/A](#)
4. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)). Describe: [N/A](#)
- Provide a brief summary of how the standard(s) is defined (i.e., what is the standard, content covered, practices required, etc.) [N/A](#)
  - List all citations for these requirements, including those for licensed and license-exempt providers. [N/A](#)
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). [N/A](#)
  - Describe any variations based on the ages of the children in care. [N/A](#)
  - Describe if relatives are exempt from this requirement. [N/A](#)

#### 5.2.3 Health and safety training for CCDF providers on required topics.

Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served, that address the health and safety topics described in 5.2.2, and child development. Lead Agencies must also have ongoing training requirements on the health and safety topics for caregivers, teachers, and directors of children receiving CCDF funds (658E(c)(2)(I)(i); 98.44(b)(1)(iii)). The state/territory must describe its requirements for pre-service or orientation training and ongoing training. These trainings should be part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory. Lead Agencies have flexibility in determining the number of training hours to require, but they may consult with *Caring for our Children Basics* for best practices and the recommended time needed to address these training requirements.

#### Pre-Service or Orientation Training Requirements

- a) Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:
1. Licensed child care centers: [12 hours or 24 hours, depending on option chosen. Additionally, licensed child care programs must complete fire extinguisher training, medication administration/storage training \(if medication is administered to children in care\), and safe sleep training \(if infant care is provided\). Each of these additional required trainings for licensed providers range from 1 to 4 hours, depending on the specific training selected by the provider.](#)
  2. Licensed FCC homes: [30 hours for owners/operators; 12 or 24 hours for substitutes/employees, depending on the option chosen. Additionally, licensed child care programs must complete fire extinguisher training, medication administration/storage training \(if medication is administered to children in care\), and safe sleep training \(if infant care is provided\). Each of these additional required](#)

[trainings for licensed providers range from 1 to 4 hours, depending on the specific training selected by the provider.](#)

3. In-home care: [12 or 24 hours, depending on the option chosen; however, Safe Sleep preservice training is not required for in-home providers providing care to only school-age children and Transportation preservice training is only applicable to those providers that provide transportation services to children in care.](#)
  4. Variations for exempt provider settings: [12 or 24 hours, depending on the option chosen; however, Safe Sleep preservice training is not required for school-age only program settings and Transportation preservice training is only applicable to those providers that provide transportation services to children in care.](#)
- b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer). [All CCDF providers and their personnel must complete preservice training requirements within 90 days of employment and prior to having unsupervised access to children in care. Licensed child care providers and their personnel must complete safe sleep training \(if infant care is provided\), medication administration/storage training \(if medication is administered to children in care\), and fire extinguisher training within 30 days of employment. All operators/owners of licensed and registered family child care homes must have trainings complete prior to licensure/registration.](#)
- c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served. [School-age only license-exempt programs are not required to complete Safe Sleep preservice training, as they do not care for children ages birth – five.](#)
- d) Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered. [Trainings offered by the Department of Children and Families are offered both online and in-person. The Health and Safety Modules offered by Early Learning Florida are offered online.](#)
- e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).
1. Prevention and control of infectious diseases (including immunizations)
    - Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. . [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\).](#)
    - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?  
☒ Yes  
☐ No
    - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?  
☒ Yes

☐ No

- Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\). For additional training requirements for licensed programs: Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook,   
http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf.](#)
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?  
☒ Yes  
☐ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?  
☒ Yes  
☐ No
- Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)

3. Administration of medication, consistent with standards for parental consent

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\). For additional training requirements for licensed programs: Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook,   
http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf.](#)
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?  
☒ Yes  
☐ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?  
☒ Yes

☐ No

- Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)

4. Prevention and response to emergencies due to food and allergic reactions

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\). For additional training requirements for licensed programs: Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook, <http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf>.](#)
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?  
☒ Yes  
☐ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?  
☒ Yes  
☐ No
- Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)

5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\). For additional training requirements for licensed programs: Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook, <http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf>.](#)
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?  
☒ Yes  
☐ No

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
    - ☒ Yes
    - ☐ No
  - Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)
6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\). For additional training requirements for licensed programs: Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook,   
http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf.](#)
  - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
    - ☒ Yes
    - ☐ No
  - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
    - ☒ Yes
    - ☐ No
  - Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)
7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event
- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\). For additional training requirements for licensed programs: Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook,   
http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf.](#)
  - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
    - ☒ Yes
    - ☐ No



- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
    - ☒ Yes
    - ☐ No
  - Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)
8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\). For additional training requirements for licensed programs: Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook,   
http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf.](#)
  - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
    - ☒ Yes
    - ☐ No
  - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
    - ☒ Yes
    - ☐ No
  - Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)
9. Appropriate precautions in transporting children (if applicable)
- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\). For additional training requirements for licensed programs: Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook,   
http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf.](#)
  - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
    - ☒ Yes

- ☐ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  - ☒ Yes
  - ☐ No
- Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)

#### 10. Pediatric first aid and CPR certification

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\). For additional training requirements for licensed programs: Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook,   
http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf.](#)
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  - ☒ Yes
  - ☐ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  - ☒ Yes
  - ☐ No
- Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)

#### 11. Recognition and reporting of child abuse and neglect

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\). For additional training requirements for licensed programs: Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook,   
http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf.](#)
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  - ☒ Yes

- ☐ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  - ☒ Yes
  - ☐ No
- Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)

12. Child development (98.44(b)(1)(iii))

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18 for center-based programs and Section 17 for homes and informal care\). For additional training requirements for licensed programs: Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook,   
http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf.](#)
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  - ☒ Yes
  - ☐ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  - ☒ Yes
  - ☐ No
- Describe if relatives are exempt from this requirement. [No, relatives are not exempt from meeting any of the preservice training requirements.](#)

13. Describe other training requirements, such as nutrition, physical activities, caring for children with special needs, etc. [All personnel must also complete training regarding proper use of a fire extinguisher within 30 days of employment with a CCDF provider. Additionally, licensed child care programs must complete fire extinguisher training, medication administration/storage training \(if medication is administered to children in care\), and safe sleep training \(if infant care is provided\), each within 30 days.](#)

- Provide the citation(s) for other training requirements, including citations for both licensed and license-exempt providers. [Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type – Section 14.2 for center-based programs and Section 13.2 for homes and informal care\) and Rule 65C-22.001\(6\), F.A.C., Child Care Facility Handbook,](#)

<http://www.dcf.state.fl.us/programs/childcare/docs/handbook/Facility%20Handbook.pdf>.

- Does the state/territory require that this training topic(s) be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?  
☐ Yes  
☒ No
- Does the state/territory require that this training topic(s) be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?  
☐ Yes  
☐ No
- Describe if relatives are exempt from this requirement.

### Ongoing Training Requirements

5.2.4 Provide the minimum number of annual training hours on health and safety topics for caregivers, teachers, and directors required for the following.

- a) Licensed child care centers: [10 hours](#)
- b) Licensed FCC homes: [10 hours](#)
- c) In-home care: [10 hours](#)
- d) Variations for exempt provider settings: [10 hours for license exempt CCDF providers and registered family day care homes](#)

5.2.5 Describe the ongoing health and safety training for CCDF providers by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

#### 1. Prevention and control of infectious diseases (including immunizations)

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care\). For licensed CCDF providers: Chapters 65C-22.001\(6\) and 65C-20.008\(6\), F.A.C., incorporate standards in the Child Care Facility Handbook and Family Day Care Home/Large Family Child Care Home Handbook.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?  
☐ Annually.  
☒ Other. Describe [All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually.](#)

Child care personnel may choose to complete training in any of the following areas:

- Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;
  - Infant and/or Child CPR;
  - First Aid (may only be taken to meet the in-service requirement once every two years);
  - Nutrition, including age-appropriate feeding;
  - Child development – typical and atypical;
  - Child transportation and safety;
  - Social and emotional behavioral and mental health;
  - Family and community engagement;
  - Design and use of child-oriented space;
  - Community, health and social service resources;
  - Child abuse and neglect;
  - Child care for multilingual children;
  - Caring for children with exceptionalities;
  - Access to physical activity, including safety in outdoor play;
  - Early and/or Emergent Literacy;
  - Guidance and discipline, including positive behavior supports and interventions;
  - Leadership development/program management and staff supervision;
  - Age-appropriate lesson planning;
  - Homework assistance for school-age care;
  - Food safety training; or
  - Developing special interest centers/spaces and environments.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
    - ☐ Annually.
    - ☒ Other. Describe All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the 21 listed topic areas.

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook (by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care). For licensed CCDF

providers: Chapters 65C-22.001(6) and 65C-20.008(6), F.A.C., incorporate standards in the *Child Care Facility Handbook* and *Family Day Care Home/Large Family Child Care Home Handbook*.

- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually. Child care personnel may choose to complete training in any of the following areas:
    - Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;
    - Infant and/or Child CPR;
    - First Aid (may only be taken to meet the in-service requirement once every two years);
    - Nutrition, including age-appropriate feeding;
    - Child development – typical and atypical;
    - Child transportation and safety;
    - Social and emotional behavioral and mental health;
    - Family and community engagement;
    - Design and use of child-oriented space;
    - Community, health and social service resources;
    - Child abuse and neglect;
    - Child care for multilingual children;
    - Caring for children with exceptionalities;
    - Access to physical activity, including safety in outdoor play;
    - Early and/or Emergent Literacy;
    - Guidance and discipline, including positive behavior supports and interventions;
    - Leadership development/program management and staff supervision;
    - Age-appropriate lesson planning;
    - Homework assistance for school-age care;
    - Food safety training; or
    - Developing special interest centers/spaces and environments.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the 21 listed topic areas.

3. Administration of medication, consistent with standards for parental consent

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care\). For licensed CCDF providers: Chapters 65C-22.001\(6\) and 65C-20.008\(6\), F.A.C., which incorporate standards in the Child Care Facility Handbook and Family Day Care Home/Large Family Child Care Home Handbook.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe [All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually. Child care personnel may choose to complete training in any of the following areas:](#)
    - [Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;](#)
    - [Infant and/or Child CPR;](#)
    - [First Aid \(may only be taken to meet the in-service requirement once every two years\);](#)
    - [Nutrition, including age-appropriate feeding;](#)
    - [Child development – typical and atypical;](#)
    - [Child transportation and safety;](#)
    - [Social and emotional behavioral and mental health;](#)
    - [Family and community engagement;](#)
    - [Design and use of child-oriented space;](#)
    - [Community, health and social service resources;](#)
    - [Child abuse and neglect;](#)
    - [Child care for multilingual children;](#)
    - [Caring for children with exceptionalities;](#)
    - [Access to physical activity, including safety in outdoor play;](#)
    - [Early and/or Emergent Literacy;](#)
    - [Guidance and discipline, including positive behavior supports and interventions;](#)
    - [Leadership development/program management and staff supervision;](#)
    - [Age-appropriate lesson planning;](#)
    - [Homework assistance for school-age care;](#)
    - [Food safety training; or](#)



- [Developing special interest centers/spaces and environments.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe [All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the Child care personnel may choose to complete training in any of the 21 listed topic areas.](#)

4. Prevention and response to emergencies due to food and allergic reactions

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care\). For licensed CCDF providers: Chapters 65C-22.001\(6\) and 65C-20.008\(6\), F.A.C., which incorporate standards in the Child Care Facility Handbook and Family Day Care Home/Large Family Child Care Home Handbook.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe [All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually. Child care personnel may choose to complete training in any of the following areas:](#)
    - [Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;](#)
    - [Infant and/or Child CPR;](#)
    - [First Aid \(may only be taken to meet the in-service requirement once every two years\);](#)
    - [Nutrition, including age-appropriate feeding;](#)
    - [Child development – typical and atypical;](#)
    - [Child transportation and safety;](#)
    - [Social and emotional behavioral and mental health;](#)
    - [Family and community engagement;](#)
    - [Design and use of child-oriented space;](#)
    - [Community, health and social service resources;](#)
    - [Child abuse and neglect;](#)
    - [Child care for multilingual children;](#)

- [Caring for children with exceptionalities;](#)
  - [Access to physical activity, including safety in outdoor play;](#)
  - [Early and/or Emergent Literacy;](#)
  - [Guidance and discipline, including positive behavior supports and interventions;](#)
  - [Leadership development/program management and staff supervision;](#)
  - [Age-appropriate lesson planning;](#)
  - [Homework assistance for school-age care;](#)
  - [Food safety training; or](#)
  - [Developing special interest centers/spaces and environments.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
    - ☐ Annually.
    - ☒ Other. Describe [All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the Child care personnel may choose to complete training in any of the 21 listed topic areas.](#)
5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic
- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care\). For licensed CCDF providers: Chapters 65C-22.001\(6\) and 65C-20.008\(6\), F.A.C., which incorporate standards in the Child Care Facility Handbook and Family Day Care Home/Large Family Child Care Home Handbook.](#)
  - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
    - ☐ Annually.
    - ☒ Other. Describe [All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually. Child care personnel may choose to complete training in any of the following areas:](#)
      - [Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;](#)
      - [Infant and/or Child CPR;](#)

- [First Aid \(may only be taken to meet the in-service requirement once every two years\);](#)
  - [Nutrition, including age-appropriate feeding;](#)
  - [Child development – typical and atypical;](#)
  - [Child transportation and safety;](#)
  - [Social and emotional behavioral and mental health;](#)
  - [Family and community engagement;](#)
  - [Design and use of child-oriented space;](#)
  - [Community, health and social service resources;](#)
  - [Child abuse and neglect;](#)
  - [Child care for multilingual children;](#)
  - [Caring for children with exceptionalities;](#)
  - [Access to physical activity, including safety in outdoor play;](#)
  - [Early and/or Emergent Literacy;](#)
  - [Guidance and discipline, including positive behavior supports and interventions;](#)
  - [Leadership development/program management and staff supervision;](#)
  - [Age-appropriate lesson planning;](#)
  - [Homework assistance for school-age care;](#)
  - [Food safety training; or](#)
  - [Developing special interest centers/spaces and environments.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
    - ☐ Annually.
    - ☒ Other. Describe [All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the Child care personnel may choose to complete training in any of the 21 listed topic areas.](#)

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care\).](#) For licensed CCDF providers: Chapters 65C-22.001(6) and 65C-20.008(6), F.A.C., which incorporate standards in the [Child Care Facility Handbook](#) and [Family Day Care Home/Large Family Child Care Home Handbook](#).
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.

☒ Other. Describe All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually. Child care personnel may choose to complete training in any of the following areas:

- Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;
- Infant and/or Child CPR;
- First Aid (may only be taken to meet the in-service requirement once every two years);
- Nutrition, including age-appropriate feeding;
- Child development – typical and atypical;
- Child transportation and safety;
- Social and emotional behavioral and mental health;
- Family and community engagement;
- Design and use of child-oriented space;
- Community, health and social service resources;
- Child abuse and neglect;
- Child care for multilingual children;
- Caring for children with exceptionalities;
- Access to physical activity, including safety in outdoor play;
- Early and/or Emergent Literacy;
- Guidance and discipline, including positive behavior supports and interventions;
- Leadership development/program management and staff supervision;
- Age-appropriate lesson planning;
- Homework assistance for school-age care;
- Food safety training; or
- Developing special interest centers/spaces and environments.

- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?

☐ Annually.

☒ Other. Describe All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the Child care personnel may choose to complete training in any of the 21 listed topic areas.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care\). For licensed CCDF providers: Chapters 65C-22.001\(6\) and 65C-20.008\(6\), F.A.C., which incorporate standards in the Child Care Facility Handbook and Family Day Care Home/Large Family Child Care Home Handbook.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe [All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually. Child care personnel may choose to complete training in any of the following areas:](#)
    - [Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;](#)
    - [Infant and/or Child CPR;](#)
    - [First Aid \(may only be taken to meet the in-service requirement once every two years\);](#)
    - [Nutrition, including age-appropriate feeding;](#)
    - [Child development – typical and atypical;](#)
    - [Child transportation and safety;](#)
    - [Social and emotional behavioral and mental health;](#)
    - [Family and community engagement;](#)
    - [Design and use of child-oriented space;](#)
    - [Community, health and social service resources;](#)
    - [Child abuse and neglect;](#)
    - [Child care for multilingual children;](#)
    - [Caring for children with exceptionalities;](#)
    - [Access to physical activity, including safety in outdoor play;](#)
    - [Early and/or Emergent Literacy;](#)
    - [Guidance and discipline, including positive behavior supports and interventions;](#)
    - [Leadership development/program management and staff supervision;](#)
    - [Age-appropriate lesson planning;](#)
    - [Homework assistance for school-age care;](#)
    - [Food safety training; or](#)
    - [Developing special interest centers/spaces and environments.](#)

- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
    - ☐ Annually.
    - ☒ Other. Describe [All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the Child care personnel may choose to complete training in any of the 21 listed topic areas.](#)
8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants
- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care\). For licensed CCDF providers: Chapters 65C-22.001\(6\) and 65C-20.008\(6\), F.A.C., which incorporate standards in the Child Care Facility Handbook and Family Day Care Home/Large Family Child Care Home Handbook.](#)
  - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
    - ☐ Annually.
    - ☒ Other. Describe [All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually. Child care personnel may choose to complete training in any of the following areas:](#)
      - [Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;](#)
      - [Infant and/or Child CPR;](#)
      - [First Aid \(may only be taken to meet the in-service requirement once every two years\);](#)
      - [Nutrition, including age-appropriate feeding;](#)
      - [Child development – typical and atypical;](#)
      - [Child transportation and safety;](#)
      - [Social and emotional behavioral and mental health;](#)
      - [Family and community engagement;](#)
      - [Design and use of child-oriented space;](#)
      - [Community, health and social service resources;](#)
      - [Child abuse and neglect;](#)
      - [Child care for multilingual children;](#)
      - [Caring for children with exceptionalities;](#)

- [Access to physical activity, including safety in outdoor play;](#)
  - [Early and/or Emergent Literacy;](#)
  - [Guidance and discipline, including positive behavior supports and interventions;](#)
  - [Leadership development/program management and staff supervision;](#)
  - [Age-appropriate lesson planning;](#)
  - [Homework assistance for school-age care;](#)
  - [Food safety training; or](#)
  - [Developing special interest centers/spaces and environments.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
    - ☐ Annually.
    - ☒ Other. Describe [All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the Child care personnel may choose to complete training in any of the 21 listed topic areas.](#)

9. Appropriate precautions in transporting children (if applicable)

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care\). For licensed CCDF providers: Chapters 65C-22.001\(6\) and 65C-20.008\(6\), F.A.C., which incorporate standards in the Child Care Facility Handbook and Family Day Care Home/Large Family Child Care Home Handbook.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe [All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually. Child care personnel may choose to complete training in any of the following areas:](#)
    - [Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;](#)
    - [Infant and/or Child CPR;](#)
    - [First Aid \(may only be taken to meet the in-service requirement once every two years\);](#)
    - [Nutrition, including age-appropriate feeding;](#)



- [Child development – typical and atypical;](#)
  - [Child transportation and safety;](#)
  - [Social and emotional behavioral and mental health;](#)
  - [Family and community engagement;](#)
  - [Design and use of child-oriented space;](#)
  - [Community, health and social service resources;](#)
  - [Child abuse and neglect;](#)
  - [Child care for multilingual children;](#)
  - [Caring for children with exceptionalities;](#)
  - [Access to physical activity, including safety in outdoor play;](#)
  - [Early and/or Emergent Literacy;](#)
  - [Guidance and discipline, including positive behavior supports and interventions;](#)
  - [Leadership development/program management and staff supervision;](#)
  - [Age-appropriate lesson planning;](#)
  - [Homework assistance for school-age care;](#)
  - [Food safety training; or](#)
  - [Developing special interest centers/spaces and environments.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
    - ☐ Annually.
    - ☒ Other. Describe [All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the Child care personnel may choose to complete training in any of the 21 listed topic areas.](#)

#### 10. Pediatric first aid and CPR certification

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care\). For licensed CCDF providers: Chapters 65C-22.001\(6\) and 65C-20.008\(6\), F.A.C., which incorporate standards in the Child Care Facility Handbook and Family Day Care Home/Large Family Child Care Home Handbook.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe [All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually.](#)

Child care personnel may choose to complete training in any of the following areas:

- Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;
  - Infant and/or Child CPR;
  - First Aid (may only be taken to meet the in-service requirement once every two years);
  - Nutrition, including age-appropriate feeding;
  - Child development – typical and atypical;
  - Child transportation and safety;
  - Social and emotional behavioral and mental health;
  - Family and community engagement;
  - Design and use of child-oriented space;
  - Community, health and social service resources;
  - Child abuse and neglect;
  - Child care for multilingual children;
  - Caring for children with exceptionalities;
  - Access to physical activity, including safety in outdoor play;
  - Early and/or Emergent Literacy;
  - Guidance and discipline, including positive behavior supports and interventions;
  - Leadership development/program management and staff supervision;
  - Age-appropriate lesson planning;
  - Homework assistance for school-age care;
  - Food safety training; or
  - Developing special interest centers/spaces and environments.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
    - ☐ Annually.
    - ☒ Other. Describe All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the Child care personnel may choose to complete training in any of the 21 listed topic areas.

#### 11. Recognition and reporting of child abuse and neglect

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness

Health and Safety Handbook (by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care). For licensed CCDF providers: Chapters 65C-22.001(6) and 65C-20.008(6), F.A.C., which incorporate standards in the *Child Care Facility Handbook* and *Family Day Care Home/Large Family Child Care Home Handbook*.

- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☐ Annually.

☒ Other. Describe All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually.

Child care personnel may choose to complete training in any of the following areas:

- Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;
  - Infant and/or Child CPR;
  - First Aid (may only be taken to meet the in-service requirement once every two years);
  - Nutrition, including age-appropriate feeding;
  - Child development – typical and atypical;
  - Child transportation and safety;
  - Social and emotional behavioral and mental health;
  - Family and community engagement;
  - Design and use of child-oriented space;
  - Community, health and social service resources;
  - Child abuse and neglect;
  - Child care for multilingual children;
  - Caring for children with exceptionalities;
  - Access to physical activity, including safety in outdoor play;
  - Early and/or Emergent Literacy;
  - Guidance and discipline, including positive behavior supports and interventions;
  - Leadership development/program management and staff supervision;
  - Age-appropriate lesson planning;
  - Homework assistance for school-age care;
  - Food safety training; or
  - Developing special interest centers/spaces and environments.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
- ☐ Annually.

☒ Other. Describe [All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the Child care personnel may choose to complete training in any of the 21 listed topic areas.](#)

12. Child development (98.44(b)(1)(iii))

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. [For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care\). For licensed CCDF providers: Chapters 65C-22.001\(6\) and 65C-20.008\(6\), F.A.C., which incorporate standards in the Child Care Facility Handbook and Family Day Care Home/Large Family Child Care Home Handbook.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe [All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually. Child care personnel may choose to complete training in any of the following areas:](#)
    - [Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials;](#)
    - [Infant and/or Child CPR;](#)
    - [First Aid \(may only be taken to meet the in-service requirement once every two years\);](#)
    - [Nutrition, including age-appropriate feeding;](#)
    - [Child development – typical and atypical;](#)
    - [Child transportation and safety;](#)
    - [Social and emotional behavioral and mental health;](#)
    - [Family and community engagement;](#)
    - [Design and use of child-oriented space;](#)
    - [Community, health and social service resources;](#)
    - [Child abuse and neglect;](#)
    - [Child care for multilingual children;](#)
    - [Caring for children with exceptionalities;](#)
    - [Access to physical activity, including safety in outdoor play;](#)
    - [Early and/or Emergent Literacy;](#)
    - [Guidance and discipline, including positive behavior supports and interventions;](#)

- [Leadership development/program management and staff supervision;](#)
  - [Age-appropriate lesson planning;](#)
  - [Homework assistance for school-age care;](#)
  - [Food safety training; or](#)
  - [Developing special interest centers/spaces and environments.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
    - ☐ Annually.
    - ☒ Other. Describe [All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the Child care personnel may choose to complete training in any of the 21 listed topic areas.](#)

13. Describe other requirements, such as nutrition, physical activities, caring for children with special needs, etc. [Although not explicitly required, these topic areas are included in the list of 21 topics areas from which providers and their personnel may choose to complete their annual in-service training from.](#)

- Provide the citation(s) for other training requirements, including citations for both licensed and license-exempt providers. [For license-exempt CCDF providers: Rule 6M-4.620, F.A.C., Health and Safety Checklists and Inspections; School Readiness Health and Safety Handbook \(by provider type - Section 18.6 for center-based programs and Section 17.6 for homes and informal care\). For licensed CCDF providers: Chapters 65C-22.001\(6\) and 65C-20.008\(6\), F.A.C., which incorporate standards in the Child Care Facility Handbook and Family Day Care Home/Large Family Child Care Home Handbook.](#)
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe [All licensed CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually. Child care personnel may choose to complete training in any of the following areas: Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, or handling of hazardous materials; Infant and/or Child CPR; First Aid \(may only be taken to meet the in-service requirement once every two years, Nutrition including age-appropriate feeding; Child development – typical and atypical; Child transportation and safety; Social and emotional behavioral and mental health; Family and community engagement; Design and use of child-oriented space; Community, health and social service resources; Child abuse and neglect; Child care for multilingual children; Caring for children with exceptionalities; Access to physical activity, including safety in outdoor play; Early and/or Emergent](#)

[Literacy; Guidance and discipline, including positive behavior supports and interventions; Leadership development/program management and staff supervision; Age-appropriate lesson planning; Homework assistance for school-age care; Food safety training; or Developing special interest centers/spaces and environments.](#)

- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe [All license-exempt CCDF child care providers and their personnel must complete a minimum of 10 clock hours of in-service training annually, in any of the Child care personnel may choose to complete training in any of the 21 listed topic areas.](#)

### 5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

#### 5.3.1 Enforcement of licensing and health and safety requirements

Lead agencies must certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with all applicable State and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.3.2.

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements. [Pursuant to s. 1002.82\(2\)\(i\), F.S. and Chapter 6M-4.620, F.A.C., CCDF providers must meet minimum standards for health, safety and sanitation, as well as preservice training for health and safety. To ensure compliance with minimum health and safety standards and preservice training requirements, all CCDF providers are inspected a minimum of once annually by the Department of Children and Families, the state agency responsible for child care licensing and regulation. Providers are required to maintain documentation that preservice training has been completed for all personnel employed by the program, and this documentation must be available for review by DCF licensing inspectors at the time of inspection. Providers who are found not to be in compliance with any of the minimum standards for health, safety or training, are issued a violation with terms for corrective action, or notice of probation or termination, if applicable.](#)

#### 5.3.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections—with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards—of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire

standards; inspectors may inspect for compliance with all three standards—health, safety, and fire—at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by responding to the questions below to describe your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

a) Licensed CCDF center-based child care

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed child care center providers for compliance with health, safety, and fire standards. [CCDF health and safety standards are aligned to minimum health and safety standards for licensed child care providers. Prior to the issuance of a license, an initial inspection is conducted and is an announced visit. In some circumstances, multiple visits occur to correct violations observed. The provider must be 100 percent compliant with standards before the license is issued. The local fire inspector completes an inspection prior to licensure to ensure the building meets fire regulations. A copy of this report is required as part of the program's initial licensure packet and for annual renewal of the license thereafter that is submitted to the Department of Children and Families.](#)
2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers. [DCF-Pamphlet 175-2, Child Care Desk Reference Guide, Frequency of Inspections is outlined. Licensed Child Care Facilities are required to be inspected a minimum of three times during the licensure year. Licensing counselors will conduct a renewal \(or initial\) inspection and two routine inspections. All three unannounced inspections must be full on-site inspections unless the provider qualifies for an abbreviated inspection, is inactive, or the program operates for less than 12 months of the year. During the renewal inspections conducted for licensed facilities, of the facility is monitored for compliance with CCDF standards for health and safety.](#)
3. Identify the frequency of unannounced inspections:
  - ☐ Once a year
  - ☒ More than once a year. Describe [Licensed child care providers receive a minimum of 3 unannounced inspections each year.](#)
4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards. [Inspection visits include a review of each classroom\(s\)/outdoor area\(s\) used by the children to ensure compliance with minimum health and safety standards adopted by the Department of Children and Families and the Office of Early Learning for CCDF providers. These standards also include standards for fire safety. All inspections conducted use these standards to determine compliance with health, safety and fire requirements. If violations of the standards are observed, the violation is notated on the inspection report and a corrective action due date is set. Some standards regarding food service, transportation, diapering, crib safety and administration of medication are services that may be non-applicable to certain providers. In these instances, a notation is made within the inspection report that](#)



reflects non-applicable. (i.e. for a provider that does not offer transportation services). All standards related to this service will be marked "NA" on the inspection report. The Department of Children and Families has differential monitoring, known as abbreviated inspections. This differential monitoring is for any child care provider whose inspection history meets the criteria for eligibility as outlined in s. 402.3115, F.S. Providers who qualify are afforded abbreviated inspections in lieu of two routine inspections. The standards monitored during abbreviated inspections have been identified as key indicators of whether the child care facility continues to provide quality care and programming

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers Sections 402.311, 402.3115, 1002.82(2)(i), F.S. and Chapter 65C-22, F.A.C.

b) Licensed CCDF family child care home

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed family child care providers for compliance with health, safety, and fire standards. Prior to the issuance of a license, an initial announced inspection is conducted to ensure compliance with minimum standards for health and safety and fire safety. In some circumstances, multiple site visits occur to correct violations observed during the initial inspection. A provider must be 100 percent compliant with health, safety, and fire standards before the license is issued.
2. Describe your state/territory's requirements for at least annual, unannounced inspections of licensed CCDF family child care providers. DCF-Pamphlet 175-2. Child Care Desk Reference Guide, Frequency of Inspections is outlined. Licensed family day care homes and large family child care homes are required to be inspected a minimum of twice during the licensure year. The licensing counselor will conduct an unannounced renewal inspection and one routine inspection. Both inspections must be full on-site inspections unless the provider is inactive or the program operates for less than 12 months of the year
3. Identify the frequency of unannounced inspections:
  - ☐ Once a year
  - ☒ More than once a year. Describe For licensed family child care homes, including large family child care homes, all inspections, with the exception of the initial inspection, are unannounced. Homes receive a minimum of 2 unannounced inspections each year.
4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards. Inspection visits are unannounced and include a review of the home and outdoor areas used by children to ensure compliance with minimum health and safety and fire standards adopted by the Department of Children and Families, and Office of Early Learning for CCDF providers. If violations of the standards are observed the violation is notated on the inspection report and a corrective action due date is set. Some standards regarding food service, transportation, diapering, crib safety and administration of medication are services that may be non-applicable to certain providers. In these instances, a notation is made within the inspection report that reflects that the criterion or criteria are not applicable (such as for a provider that

[does not offer transportation services\). All standards related to this service will be marked “NA” on the inspection report.](#)

5. List the citation(s) for your state/territory’s policies regarding inspections for licensed CCDF family child care providers [Sections 402.311, 402.3115, 1002.82\(2\)\(i\), F.S. and Chapter 65C-20, F.A.C](#)

c) Licensed in-home CCDF child care

- ☒ N/A. In-home CCDF child care (care in the child’s own home) is not licensed in the state/territory. Skip to 5.3.2 (d).
- 1. Describe your state/territory’s requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards. [\[redacted\]](#)
- 2. Describe your state/territory’s requirements for at least annual, unannounced inspections of licensed CCDF in-home child care providers. [\[redacted\]](#)
- 3. Identify the frequency of unannounced inspections:
  - ☐ Once a year
  - ☐ More than once a year. Describe [\[redacted\]](#)
- 4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards. [\[redacted\]](#)
- 5. List the citation(s) for your state/territory’s policies regarding inspections for licensed in-home CCDF providers [\[redacted\]](#)

d) List the entity(ies) in your state/territory that is responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers. [The Department of Children and Families \(DCF\) conducts inspections of licensed providers in 62 out of 67 counties in the state.](#)

- o [Broward County, Child Care Licensing and Enforcement, conducts inspections of licensed providers in Broward County.](#)
- o [Hillsborough County, Child Care Licensing Department, conducts inspections of licensed providers in Hillsborough County.](#)
- o [Sarasota County Health Department, Child Care Licensing, conducts inspections of licensed providers in Sarasota County.](#)
- o [Palm Beach County Health Department, Child Care Licensing, conducts inspections of licensed providers in Palm Beach County.](#)
- o [Pinellas County Health Department, Child Care Licensing Program, conducts inspections of licensed providers in Pinellas County.](#)

5.3.3 Inspections for license-exempt CCDF providers

The Lead Agency must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety, and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). The state/territory may determine if exempt relative providers (as described in section (658P(6)(B)) do not need to meet this requirement. At a

minimum, the health and safety requirements to be inspected must address the standards listed in 5.1.4 (98.41(a)). To certify, describe the policies and practices for the annual monitoring of:

- a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. A minimum of one annual unannounced inspection is conducted to ensure compliance with health, safety and fire standards set by the Office of Early Learning for CCDF providers. Some standards regarding food service, transportation, diapering, crib safety and administration of medication are services that may be non-applicable to certain providers. In these instances, a notation is made within the inspection report that reflects non-applicable, such as for a provider that does not offer transportation services. All standards related to this service will be marked "NA" on the inspection report.

Provide the citation(s) for this policy or procedure. Rule 6M-4.620, F.A.C.

- b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. A minimum of one annual, unannounced inspection is conducted to ensure compliance with health, safety and fire standards set by the Office of Early Learning for CCDF providers. Some standards regarding food service, transportation, diapering, crib safety and administration of medication are services that may be non-applicable to certain providers. In these instances, a notation is made within the inspection report that reflects non-applicable, i.e. for a provider that does not offer transportation services. All standards related to this service will be marked "NA" on the inspection report.

Provide the citation(s) for this policy or procedure. Rule 6M-4.620, F.A.C.

- c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used. A minimum of one annual, unannounced inspection is conducted. There are no exemptions to inspection requirements for these providers. In-home relative caregivers must meet the same standards for health and safety inspections and license-exempt family day care homes. Some standards regarding food service, transportation, diapering, crib safety and administration of medication are services that may be non-applicable to certain providers. In these instances, a notation is made within the inspection report that reflects non-applicable (i.e. for a provider that does not offer transportation services). All standards related to this service will be marked "NA" on the inspection report.

Provide the citation(s) for this policy or procedure. Rule 6M-4.620, F.A.C.

- d) Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home (98.42(b)(2)(iv)(B)). Does your state use alternate monitoring procedures for monitoring in-home care?

☒ No

☐ Yes. If yes, describe: \_\_\_\_\_

- e) List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers: The Department of Children and Families (DCF) conducts inspections of licensed providers in 62 out of 67 counties in the state. Broward County, Child Care Licensing and Enforcement, conducts inspections of licensed providers in

[Broward County. Hillsborough County, Child Care Licensing Department, conducts inspections of licensed providers in Hillsborough County. Sarasota County Health Department, Child Care Licensing, conducts inspections of licensed providers in Sarasota County. Palm Beach County Health Department, Child Care Licensing, conducts inspections of licensed providers in Palm Beach County. Pinellas County Health Department, Child Care Licensing Program, conducts inspections of licensed providers in Pinellas County](#)

#### 5.3.4 Licensing inspectors.

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the State's licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1-2)).

- a) To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers and that those inspectors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)). [All personnel assigned responsibility for the inspection and licensing of child care facilities and family day care homes are classified as "Family Services Counselors" \(Class Code: 5990\) within the Florida Department of Management Services' job classification system. Minimum qualifications for this position category include a bachelor's degree from an accredited college or university. All Family Services Counselors are required to complete: - Introduction to Child Care Licensing, Desk Reference Guide \(Part 1 and 2\), Guide to the Inspection; - Systems Training. Along with online Department training that includes the following:](#)

- [Child Care Pre-Service Training](#)
- [Family Day Care Homes Licensing course](#)
- [Guidance and Discipline](#)
- [4 hours - Child Abuse and Neglect](#)
- [6 hours - Child Growth and Development](#)
- [3 hours - Guide to Record Keeping](#)
- [4 hours - Fire Safety & Emergency Preparedness](#)
- [4 hours - Playground Safety](#)
- [2 hours - Transportation Safety](#)
- [5 hours - Supporting Children with Developmental Disabilities](#)
- [4 hours - Serving Safe Food in Child Care](#)
- [FDA Food Inspector training](#)

[Along with instructor-led and online training, licensing staff must complete 14 additional supplemental activities, which are documented as completed by the supervisor within 12 months of hire.](#)

[DCF's current standard practice for hiring of inspectors is requiring a minimum educational level of a bachelor degree, in addition to completing preservice training for all newly-hired licensing counselors.](#)

[Training requirements for the 5 local licensing counties meet or exceed DCF's training requirements for licensing counselors.](#)

- b) Provide the citation(s) for this policy or procedure. [Staffing Allocation, Educational & Training Qualifications/Requirements for Family Service Counselors \(Child Care Licensing Inspectors\), dated January 14, 2018.](#)

5.3.5 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).

- a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis. [In 2011, the National Association for Regulatory Administration \(NARA\) issued a policy paper entitled "Strong Licensing: The Foundation for a Quality Early Care and Education System." It included the following workload recommendation, which has also been disseminated by the U.S. Department of Health and Human Services, Administration for Children and Families, as an appropriate national standard. Florida's Child Care Program Office utilizes the NARA recommended maximum workload standard of 60:1 for all types of providers. At current staffing levels, the caseload average is between 50 and 60.](#)
- b) Provide the policy citation and state/territory ratio of licensing inspectors. [Staffing Allocation, Educational & Training Qualifications/Requirements for Family Service Counselors \(Child Care Licensing Inspectors\), dated January 14, 2018.](#)

5.3.6 States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from inspection requirements. *Note:* This exception only applies if the individual cares *only* for relative children. Does the state/territory exempt relatives from the inspection requirements listed in 5.3.3?

- ☐ Yes, relatives are exempt from all inspection requirements. If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care.
- ☐ Yes, relatives are exempt from some inspection requirements. If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.
- ☒ No, relatives are not exempt from inspection requirements.

## 5.4 Criminal Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct criminal background checks for all child care staff members (including

prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For FCC homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)).

A criminal background check must include 8 specific components (98.43(2)(b)), which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks:

Components	In-State	National	Inter-State
1. Criminal registry or repository using fingerprints in the current state of residency	x		
2. Sex offender registry or repository check in the current state of residency	x		
3. Child abuse and neglect registry and database check in the current state of residency	x		
4. FBI fingerprint check		x	
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)		x	
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional			x
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years			x
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years			x

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met by responding to questions 5.4.1 through 5.4.4 and then apply for the time-limited waiver by completing the questions in Appendix A: Background Check Waiver Request Form. By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 98.43 and 98.16(o):

- The national FBI fingerprint check; and,
- The three in-state background check provisions for the current state of residency:
  - state criminal registry or repository using fingerprints;
  - state sex offender registry or repository check; and
  - state-based child abuse and neglect registry and database.

All four components are required in order for the milestone to be considered met.

Components	New (Prospective) Staff	Existing Staff
1. Criminal registry or repository using fingerprints in the current state of residency	Milestone/prerequisite for waiver	Possible time limited waiver for current (existing) staff
2. Sex offender registry or repository check in the current state of residency	Milestone/prerequisite for waiver	Possible time limited waiver for current (existing) staff
3. Child abuse and neglect registry and database check in the current state of residency	Milestone/prerequisite for waiver	Possible time limited waiver for current (existing) staff
4. FBI fingerprint check	Milestone/prerequisite for waiver	Possible time limited waiver for current (existing) staff
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)	Possible time limited waiver for: <ul style="list-style-type: none"> <li>• establishing requirements and procedures; and/or</li> <li>• conducting checks on all new (prospective) staff; and/or</li> <li>• conducting checks on current (existing) staff</li> </ul>	
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional	Possible time limited waiver for: <ul style="list-style-type: none"> <li>• establishing requirements and procedures; and/or</li> <li>• conducting checks on all new (prospective) staff; and/or</li> <li>• conducting checks on current (existing) staff</li> </ul>	
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years	Possible time limited waiver for: <ul style="list-style-type: none"> <li>• establishing requirements and procedures; and/or</li> <li>• conducting checks on all new (prospective) staff; and/or</li> <li>• Conducting checks on current (existing) staff</li> </ul>	
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years	Possible time limited waiver for: <ul style="list-style-type: none"> <li>• establishing requirements and procedures; and/or</li> <li>• conducting checks on all new (prospective) staff; and/or</li> <li>• conducting checks on current (existing) staff</li> </ul>	

Use the questions below to describe the status of the requirements, policies, and procedures for background check requirements. These descriptions must provide sufficient information to demonstrate how the milestone prerequisites are being met and the status of the other components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form for components not



included in the milestones. Approval of these waiver requests will be subject to verification that the milestone components have been met as part of the CCDF Plan review and approval process.

## In-state Background Check Requirements

### 5.4.1 In-State Criminal Registry or Repository Checks with Fingerprints Requirements (98.43(b)(3)(i)).

Note: A search of a general public facing judicial website does not satisfy this requirement. This check is required in addition to the national FBI criminal history check (5.4.4 below) to mitigate any gaps that may exist between the two sources.

- a) Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.
  - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations [Level 2 background screening must be conducted via the Background Screening Clearinghouse, which requires an electronic fingerprint submission for processing. Screening results generated via this system include a search of the Florida Department of Law Enforcement \(FDLE\), the state's criminal history law enforcement database. Sections 402.302, 402.305, and 402.3055, F.S. and Chapters 65C-20 and 65C-22, F.A.C., establish screening requirements that apply to all child care personnel in licensed, registered and exempt child care settings.](#)
  - ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations [Pursuant to s. 1002.88\(1\)\(e\), F.S., CCDF providers may only employ program personnel who have satisfied and meet the child care background screening requirements outlined in Chapter 402, F.S. Background screening requirements are applicable to all child care personnel throughout the state in both licensed and license-exempt child care programs. Chapter 402, F.S. was revised effective in July 2016, to require that all elements of the CCDBG background screening requirements apply to all child care personnel throughout the state, not just those working for a provider delivering CCDF program services.](#)
- b) Has the search of the in-state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?
  - ☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations. [Yes, all new and existing child care personnel must complete, as part of the Level 2 screening requirement,](#)

[an in-state criminal history record check using electronic fingerprints pursuant to s. 435.04, Florida Statutes. The in-state criminal history check is not a challenge for the Department, as this step of the Level 2 background screening has been completed for any child care personnel screened since 2010.](#)

- ☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
  - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers).
  - Key challenges to fully implementing this requirements
  - Strategies used to address these challenges
- Describe:

#### 5.4.2 In-State Sex Offender Registry Requirements (98.43(b)(3)(B)(ii)).

Note: This check must be completed in addition to the national NCIC sex offender registry check (5.4.5 below) to mitigate any gaps that may exist between the two sources. Use of fingerprints is optional to conduct this check.

- a) Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies, and procedures for the search of the in-state sex offender registry.
- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. [All background screening results received from the state's criminal history law enforcement agency, FDLE, include a search of the state's sexual predator and offender database. Sections 402.302, 402.305, 402.3055, and Chapter 435, F.S., as well as Chapters 65C-20 and 65C-22, F.A.C., establish the background screening and Good Moral Character requirements that apply to all child care personnel in licensed, registered, and exempt child care settings.](#)
  - ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citation: [Pursuant to s. 1002.88\(1\)\(e\), F.S., CCDF providers may only employ program personnel who have satisfied and meet the child care background screening requirements outlined in Chapter 402, F.S. Chapter 402, F.S. was revised effective in July 2016, to require that all elements of the CCDBG background screening requirements apply to all child care personnel throughout the state, not just those working for a provider delivering CCDF program services.](#)

b) Has the search of the in-state sex offender registry been conducted for all current (existing) child care staff?

☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations. [Yes, all new and existing child care personnel, as part of the Level 2 screening conducted by FDLE, must undergo an in-state criminal history record check that includes a search of the in-state sex offender registry. The in-state sex offender registry search requirement is not a challenge for the Department, as this step of the Level 2 background screening has been completed for any child care personnel screened since 2010.](#)

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state sex offender registry for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe:

#### 5.4.3 In-State Child Abuse and Neglect Registry Requirements (98.43(b)(3)(B)(iii)).

Note: This is a name-based search.

a) Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies, and procedures for the search of the in-state child abuse and neglect registry.

- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. [Screening requests are handled and processed by the Department of Children and Families, which includes a search of the state's child abuse and neglect registry. Sections 402.302\(15\), 402.305, and 402.3055, F.S., as well as Chapters 65C-20 and 65C-22, F.A.C., establish screening requirements that apply to all child care personnel in licensed, registered and exempt child care settings. As of July 1, 2016, all new child care personnel screening requests include a search of Florida's Statewide Automated Child Welfare Information System \(SACWIS\) for allegations of child abuse and neglect. The results of this search are documented within the Agency for Health Care Administration \(AHCA\) Clearinghouse pursuant to ss. \(15\), 402.305\(2\)\(a\) and \(b\), and 435.12, Florida Statutes, and is viewable by the provider on child care personnel's profile page. The search result is indicated with one of the following statements:](#)

"There is no record of the applicant being listed as the caregiver responsible for a verified finding of abuse, abandonment, or neglect of a child." OR "The individual may request additional information pursuant to s. 39.202, Florida Statutes." Note: For screenings conducted between July 1, 2016 through December 15, 2016, child care personnel were issued a letter from the Department notating the search results. Beginning December 16, 2016, the results were added to the Clearinghouse as notated above.

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. Pursuant to s. 1002.88(1)(e), F.S., CCDF providers may only employ program personnel who have satisfied and meet the child care background screening requirements outlined in Chapter 402, F.S. Sections 402.302, 402.305, 402.3055, and Chapter 435, F.S. establish the background screening and Good Moral Character requirements that apply to all child care personnel in licensed, registered and exempt child care settings. Section 1002.88(1)(e), Florida Statutes, requires all child care personnel to comply with the screening requirements of s. 402, Florida Statutes, for participation as a school readiness provider.

- b) Has the search of the in-state child abuse and neglect registry been conducted for all current (existing) child care staff?

- ☐ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations. [REDACTED]
- ☒ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the search of the state child abuse and neglect registry for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
  - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
  - Key challenges to fully implementing this requirement
  - Strategies used to address these challenges

Describe: Policies and procedures are in place for these requirements, effective July 1, 2016. In July 2016, child care providers were advised that all existing child care personnel were required to be rescreened, to include a search of Florida's Statewide Automated Child Welfare Information System (SACWIS) for allegations of child abuse and neglect. The results of this search are documented within the Agency for Health Care Administration (AHCA) Clearinghouse pursuant to ss. 402.302 (15), 402.305(2)(a) and (b), and 435.12, Florida Statutes, and is viewable by the provider on the child care personnel's profile page. As of this date, there are still approximately 35,000 existing staff that have not completed a rescreen. However, the state continues to work with existing providers to complete the

[necessary rescreening of existing child care personnel, hence the need for the waiver. The cost of rescreening existing staff poses a challenge for many providers and program personnel, and providing them additional time to rescreen staff via the waiver will help to address this challenge. Note: For re-screenings conducted between July 1, 2016 through December 15, 2016, child care personnel were issued a letter from the Department notating the search results. Beginning December 16, 2016, the results were added to the Clearinghouse as notated above.](#)

## National Background Check Requirements

### 5.4.4 National FBI Criminal Fingerprint Search Requirements (98.43(b)(1)).

Note: The in-state (5.4.1 above) and the inter-state (5.4.6 below) criminal history check must be completed in addition to the FBI fingerprint check because there could be state crimes that do not appear in the national repository. Also note that an FBI fingerprint check satisfies the requirement to perform an interstate check of another state's criminal history records repository if the responding state (where the child care staff member has resided within the past five years) participates in the National Fingerprint File program (CCDF-ACF-PIQ-2017-01).

- a) Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies, and procedures for the search of the national FBI fingerprint check.
  - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. [All background screening results received from the state's criminal history law enforcement agency, FDLE, include a search of the national FBI fingerprint check. Sections 402.302, 402.305, 402.3055 and Chapter 435, F.S., establish the background screening and Good Moral Character requirements that apply to all child care personnel in licensed, registered and exempt child care settings. Sections 402.302\(15\), 402.305\(2\)\(a\) and \(b\), 402.3025\(2\), 402.3055, 402.313, 402.3131, 402.316, and 1002.88\(1\)\(e\), Florida Statutes, require all child care personnel to comply with screening requirements for working in a child care facility or home, and for participation as a school readiness provider. As part of the Level 2 screening requirement, an applicant must undergo a national criminal history record check through the Federal Bureau of Investigation using fingerprints pursuant to s. 435.04\(1\)\(a\), Florida Statutes. A national criminal fingerprint search through the Federal Bureau of Investigation has been part of the Level 2 screening requirement in Florida since prior to 1997.](#)
  - ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. [Pursuant to s. 1002.88\(1\)\(e\), F.S., CCDF providers may only employ program personnel who have satisfied and meet the child care background screening requirements outlined in Chapter 402, F.S. Sections](#)

[402.302, 402.305, 402.3055 and Chapter 435, F.S., establish the background screening and Good Moral Character requirements that apply to all child care personnel in licensed, registered and exempt child care settings.](#)

b) For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?

- ☐ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.
- ☒ No (Waiver request allowed. See Appendix A.) Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
  - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF
  - Key challenges to fully implementing this requirement
  - Strategies used to address these challenges

Describe: [Effective July 2016 existing staff were required to be rescreened to include the new disqualifying offenses in accordance with the federal requirements. As of this date there are still approximately 35,000 existing staff that have not completed a rescreen under the new disqualifying offenses. Florida's screening process already included a check of the national criminal record. Therefore, this component was previously reviewed for existing staff that were screened prior to July 2016. This is still part of the screening process and is accomplished via the FBI. However, additional time is needed to ensure all existing childcare personnel have submitted fingerprints via the background screening clearinghouse and the data can be monitored and collected by licensing into the database system.](#)

5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).

Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the in-state (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

a) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff?

- ☒ Yes. If yes,
- Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. [The state's criminal history agency, FDLE, conducts the search as part of the screening process required pursuant to sections 402.302\(15\), 402.305, 402.3055 and Chapter 435, F.S. Sections 402.302\(15\), 402.305\(2\)\(a\) and \(b\), 402.3025\(2\), 402.3055,](#)

[402.313, 402.3131, 402.316, and 1002.88\(1\)\(e\), Florida Statutes, require all child care personnel to comply with screening requirements for working in a child care facility or home, and for participation as a school readiness provider. All new child care personnel, as part of the Level 2 screening requirement pursuant to s. 435.04, Florida Statutes, undergo the National Crime Information Center \(NCIC\) search of 21 records, which includes a search of the National Sex Offender Registry. The Florida Department of Law Enforcement conducts this search as part of the Level 2 screening process.](#)

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. [Pursuant to s. 1002.88\(1\)\(e\), F.S., CCDF providers may only employ program personnel who have satisfied and meet the child care background screening requirements outlined in Chapter 402, F.S. Sections 402.302, 402.305, 402.3055 and 435, F.S., establish the background screening and Good Moral Character requirements that apply to all child care personnel in licensed, registered and exempt child care settings. All new child care personnel have, as part of the Level 2 screening requirement pursuant to s. 435.04, Florida Statutes, the National Crime Information Center \(NCIC\) search of 21 records which includes a search of the National Sex Offender Registry. The Florida Department of Law Enforcement conducts this search as part of the Level 2 screening process.](#)

- ☐ No (Waiver request allowed. See Appendix A). Describe the status of conducting the the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:
- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs
  - Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
  - Key challenges to fully implementing this requirement
  - Strategies used to address these challenges

Describe:  

- b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?

- ☐ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.
- ☒ No (Waiver request allowed. See Appendix A.) Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs



- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers).
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe: [Sections 402.302\(15\), 402.305\(2\)\(a\) and \(b\), 402.3025\(2\), 402.3055, 402.313, 402.3131, 402.316, and 1002.88\(1\)\(e\), Florida Statutes, require all child care personnel to comply with screening requirements for working in a child care facility or home, and for participation as a school readiness provider.](#)

[All new child care personnel have, as part of the Level 2 screening requirement pursuant to s. 435.04, Florida Statutes, the National Crime Information Center \(NCIC\) search of 21 records which includes a search of the National Sex Offender Registry. This search is conducted by the Florida Department of Law Enforcement as part the Level 2 screening process.](#)

[In July 2016, child care providers were advised that all existing child care personnel were required to be rescreened under the new federal and state laws, to include the new disqualifying offenses in accordance with the federal requirements. As of this date there are still approximately 35,000 existing staff that have not completed a rescreen. However, Florida's screening process already included a check of the national sex offender registry, therefore, this component was previously reviewed for existing staff that were screened prior to July 2016. This is still part of the screening process and is accomplished via the NCIC program. The state continues to work with existing providers to complete the necessary rescreening of existing child care personnel to include the NCIC check, hence the need for the waiver.](#)

## Inter-state Background Check Requirements

Checking a potential employee's history in any state other than that in which the provider's services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43(b)(3). For example, an inter-state check would include situations when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resides and each state where the staff member resided during the previous 5 years. Background checks in the state where the staff member is employed may be advisable, but are not strictly required.

### 5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check (5.4.4 above) to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

- a) Has the interstate criminal registry or repository check been put in place for all new (prospective) child care staff?

☒ Yes. If yes,

- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Sections 402.302, 402.305, 402.3055 and Chapter 435, F.S., establish the background background screening and Good Moral Character requirements that apply to all child care personnel in licensed, registered and exempt child care settings. At the time of initiating a screening, the applicant is prompted to identify any state for which they have resided in the last 5 years. Initially, the screening unit reviews the FBI, FDLE, Florida Sexual Offender, and Florida Child Abuse and Neglect database for compliance with statutes. In the second phase, if another state other than Florida has been selected on an applicant's profile, the provider who initiated the screening is notified that the additional out of state criminal records are needed from the applicant to complete the screening process, and are provided the following resource page, <http://www.dcf.state.fl.us/programs/backgroundscreening/docs/BackgroundScreening-CHR-AHContact-List.pdf>, regarding how to obtain these records. Once the applicant obtains the out-of-state criminal record, they must submit them to the Department's background screening unit at [http://bgs.outofstate.admin@myflfamilies.com](mailto:bgs.outofstate.admin@myflfamilies.com). For the 19 states that participate in the National Fingerprint File program, this step is not required and the screening can be processed without the additional documentation from the provider.

The receipt of the interstate criminal history check results is reviewed for eligibility by the Department's background screening unit pursuant to s. 435.04, Florida Statutes, and upon review, the applicant's status is updated to "eligible" or "not eligible" in the AHCA Clearinghouse for providers to view. No interstate criminal history information is shared with the potential employer by the Department.

Note: The state utilizes the 19 NFF states for completing the interstate criminal history checks. For the remaining non-participating states, the interstate record is obtained by either the applicant using the available method in which the non-participating state offers.

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Pursuant to section 1002.88(1)(e), F.S., CCDF providers may only employ program personnel who have satisfied and meet the child care background screening requirements outlined in Chapter 402, F.S. Sections 402.302, 402.305, 402.3055 and Chapter

[435, F.S., establish the background screening and Good Moral Character requirements that apply to all child care personnel in licensed, registered and exempt child care settings. Pursuant to s. 435, Florida Statutes, the Department notifies the applicant of the disqualifying offenses and provides instructions on how to apply for an exemption from disqualification, if applicable.](#)

- ☐ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the the interstate criminal registry or repository check for new (prospective) child care staff including:
- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs
  - Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
  - Key challenges to fully implementing this requirement
  - Strategies used to address these challenges

Describe:

- b) Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?

- ☐ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.
- ☒ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate criminal registry or repository check for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
  - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
  - Key challenges to fully implementing this requirement
  - Strategies used to address these challenges

Describe: [Effective July 2016 existing staff were required to be rescreened to include the new disqualifying offenses in accordance with the federal requirements. However, the state continues to work with providers to complete the necessary rescreening of child care personnel, to include inter-state background checks. As of this date there are still approximately 35,000 existing staff that have not completed a rescreen. The department has implemented a process for collecting criminal records from other states, during which time the individual is eligible for provisional hire. In some cases, the response from other states may be delayed or becomes a cost factor for providers. This is not an issue if the other state participates in the NFF program. Additional time is needed to ensure all existing childcare personnel have submitted fingerprints via the](#)

background screening clearinghouse and the data can be monitored and collected by licensing into the database system.

5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

a) Has the interstate sex offender registry or repository check been put in place for all new (prospective) child care staff?

☒ Yes. If yes,

- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Sections 402.302(15), 402.305(2)(a) and (b), 402.3025(2), 402.3055, 402.313, 402.3131, 402.316, and 1002.88(1)(e), F.S. require all child care personnel to comply with screening requirements for working in a child care facility or home, and for participation in as a school readiness provider. The statutory references in ss. 402.302(15) and 402.305(2), F.S., list the elements for the screening required for all child care personnel. Upon receipt of the 45-day provisional hire notification (after the state and national criminal checks, and the in-state SACWIS check are completed), the provider is notified via email that additional elements are required to fulfill the screening requirements for working in child care pursuant to section s402.302(15), 402.305(2)(a) and (b), and 435.06, F.S. The additional requirements include the results of searches of the interstate criminal history records, sex offender registry/repository, and child abuse and neglect registry. Providers must conduct a search of the sexual offender/predator registry of any state the individual has lived in outside the state of Florida in the preceding five years. Visit [www.myflfamilies.com/backgroundscreening](http://www.myflfamilies.com/backgroundscreening), click on the “National Records Request” link to obtain the instructions and forms to complete to submit the request for a search. Documentation of the search date and findings from each state must be documented in the employer’s file for review by the licensing authority.
- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Pursuant to s. 1002.88(1)(e), F.S., CCDF providers may only employ program personnel who have satisfied and meet the child care background screening requirements outlined in Chapter 402, F.S. Sections 402.302, 402.305, 402.3055 and Chapter 435, F.S., establish the background screening and Good Moral Character

requirements that apply to all child care personnel in licensed, registered and exempt child care settings. Sections 402.302(15), 402.305(2)(a) and (b), 402.3025(2), 402.3055, 402.313, 402.3131, 402.316, and 1002.88(1)(e), Florida Statutes, require all child care personnel to comply with screening requirements for working in a child care facility or home, and for participation as a school readiness provider. The statutory references in ss. 402.302(15) and 402.305(2), Florida Statutes, lists the element for the screening required for all child care personnel.

- ☐ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:
- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs
  - Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
  - Key challenges to fully implementing this requirement
  - Strategies used to address these challenges

Describe:

- b) Has the interstate sex offender registry or repository check been put in place for all current (existing) child care staff?

- ☐ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.
- ☒ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate sex offender registry or repository check for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
  - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
  - Key challenges to fully implementing this requirement
  - Strategies used to address these challenges

Describe: Yes, the process for interstate sex offender registry checks is in place for prospective and current child care staff, effective July 2016. In July 2016, child care providers were advised that all existing child care staff were required to be rescreened, to include this element. As of this date there are still approximately 35,000 existing staff that have not completed a rescreen. However, the state continues to work with providers to complete the necessary rescreening of existing child care personnel, hence the need for the waiver. Many states have an online search, which assists in expediting this process. Some providers do not have internet access and/or are not versed in completing this process. Therefore, additional time

may be needed to ensure all existing childcare personnel have this completed and documented to their personnel file for monitoring by licensing.

5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).

Note: This is a name-based search.

a) Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

☒ Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Yes, the process for conducting interstate child abuse and neglect checks is in place for all new and existing child care staff. Providers/Applicants must send a request for a search of each state's child abuse and neglect registry if the individual has lived outside the state of Florida in the preceding five years. Upon receipt of the 45-day provisional hire notification (after the state and national criminal history checks and in-state SACWIS check are completed), the provider is notified via email that additional elements are needed to complete the screening pursuant to sections 402.302(15), 402.305(2)(a) and (b), and 435.06, F.S. Visit [www.myflfamilies.com/backgroundscreening](http://www.myflfamilies.com/backgroundscreening), click on the "National Records Request" link to obtain the instructions and forms to complete to submit a request for a search. Documentation of the date the search was requested, and the date the results were received, must be maintained in the employee's file for review by the licensing authority. Sections 402.302(15), 402.305(2)(a) and (b), 402.3025(2), 402.3055, 402.313, 402.3131, 402.316, and 1002.88(1)(e), F.S., require all child care personnel to comply with screening requirements for working in a child care facility or home, and for participation as a school readiness provider.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Sections 402.302(15), 402.305(2)(a) and (b), 402.3025(2), 402.3055, 402.313, 402.3131, 402.316, and 1002.88(1)(e), F.S., require all child care personnel to comply with screening requirements for working in a child care facility or home, and for participation as a school readiness provider.

☐ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:

- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs

- Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe:

b) Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

- ☐ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.
- ☒ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe: Yes, the process for conducting interstate child abuse and neglect checks is in place for all new and existing child care staff, and effective July 2016, existing staff were required to be rescreened to include this element.. However, the state continues to work with existing providers to complete the necessary rescreening of existing child care personnel, hence the need for the waiver. As of this date there are still approximately 35,000 existing staff that have not completed a rescreen. Providers are responsible for completing a search of the out-of-state registries. Many states do not have a process in place and/or do not allow providers to request the information directly. The department requests the information on behalf of the providers when needed. Therefore, additional time may be needed to ensure all existing childcare personnel have this completed and documented to their personnel file for monitoring by licensing.

## Provisional Employment

The CCDF Final Rule states a child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2). A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF Final Rule, OCC will allow states and territories to request time-limited



waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

1. the state requires the provider to submit the background check requests before the staff person begins working; and
2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below (Waiver request allowed. See Appendix A). Check all that apply.

- ☒ The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Describe and include a citation: [Provisional Hire status is granted upon email notification from the department allowing the individual to be hired for a 45-day period while pending out-of-state records are being requested and awaiting clearance. The provisional hire status is only granted after receipt and review of FBI, FDLE \(state criminal history results\) and an in-state child abuse and neglect registry search have been completed. During those 45 days, the individual must be under supervision of a screened and trained staff member at all times when in contact with the children. www.myflfamilies/service-programs/child-care/announcements](#)
- ☐ The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but before receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A). Describe and include a citation:
- ☐ Other. Describe

5.4.10 The state/territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The state/territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the state/territory will provide information about each disqualifying crime to the staff member.

Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)). [The Department issues determinations of eligibility based on criminal history results within 5-7 business days with complete disposition information for criminal charges. The performance of fingerprinting by a third party does not](#)

include the viewing of criminal history records. The 3<sup>rd</sup> party is only responsible for taking fingerprints and submitting electronically to the Florida Department of Law Enforcement (FDLE) for processing. The FDLE transmits fingerprints to the FBI and receives results. The FBI and the state criminal history check conducted by FDLE is then shared with the DCF for review. Responses to other states vary depending on the element requested in the background screening process. For state criminal history checks, the Florida Department of Law Enforcement is the responsible entity. The point of contact will be shared with the state requesting information via the Department's background screening webpage. For the sexual predator/offender registry search, the requesting state may use the link: <http://offender.fdle.state.fl.us/offender/search.jsp>, which can be accessed on the Department's background screening web page or on the FDLE's webpage. For the child abuse and neglect registry checks, the requesting state is directed to the Department's background screening unit. The information on how other states can request these checks are located on the Department's background screening webpage.

- 5.4.11 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry. Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or—subject to an individual review (at the state/territory's option)—a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes—child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)).

*Note:* The Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable information (98.43(e)(2)(iii)).

Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(c)(i)?

- ☐ No
- ☒ Yes. Describe other disqualifying crimes and provide citation: [Section 435.04, Florida Statutes, outlines a list of offenses that if a person has been arrested for, plead nolo contendere, or plead guilty to regardless of adjudication that disqualifies the individual for eligibility to work in child care. The link to the Affidavit of Good Moral Character contains the listings of disqualifying offenses. Citation: <http://ccrain.fl-dcf.org/documents/6/78.pdf>](#)

- 5.4.12 The state/territory has a process for a child care staff member to appeal the the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3). Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2–4)). [Exemptions from disqualification are outlined in s. 435.07, F.S.](#)

Individuals must meet eligibility requirements to qualify for an exemption review, and if eligible, must provide clear and convincing evidence to support a reasonable belief that they are of good moral character and pose no danger to the health and safety of children, persons with disabilities or vulnerable adults. The decision made by DCF may be contested through a hearing under the provisions of Ch. 120, F.S. After eligibility to request an exemption from disqualification is determined, the Department considers the following information: the circumstances surrounding the disqualifying criminal incident for which exemption is sought; the time period that has elapsed since the incident; the nature of the harm caused to the victim; the criminal history of the employee; a history of the employee since the incident; employment history; educational history; any treatment or rehabilitation; and any other evidence of circumstances indicating that the individual is leading a positive lifestyle. Applicants may appeal a decision of disqualification from employment based upon proof of mistaken identity.

5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)). Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. Lead Agencies can report that no fees are charged if applicable (98.43(f)). The state does not charge fees for processing background screening. The fee associated with background screening includes the FBI costs, in-state criminal history costs, out-of-state record search costs and an administrative fee charged by third party live-scan vendors. The department's use of the Statewide Clearinghouse provides numerous benefits to providers including reduced costs and more up to date information. It also allows for the result of criminal history results to be shared among specified state agencies, reducing duplicative screenings. No fees are charged by the OEL or the Department for completing background screening. Fingerprinting and the submission of the fingerprints to FDLE and the FBI are submitted by a private live scan service provider. The OEL nor the Department can regulate the administrative costs charged by the live scan provider. If an individual has been previously screened through the Clearinghouse database and requires a new screening due to a break in service or 5 year rescreening, the individual does not have to be re-fingerprinted requiring paying of any administrative costs, as the previous submission is retained and the provider (employer) just has to submit for review of the federal criminal history. The Clearinghouse database provides retention of fingerprints and notification of new arrests in the state of Florida nightly database scan.

5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider. Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

- ☒ No, relatives are not exempt from background check requirements.
- ☐ Yes, relatives are exempt from all background check requirements.
- ☐ Yes, relatives are exempt from some background check requirements. If the state/territory exempts relatives from some background check requirements, describe which background check requirements do not apply to relative providers.

## 6 Recruit and Retain a Qualified and Effective Child Care Workforce

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

### 6.1 Professional Development Framework

6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.

- a) Describe how the state/territory's framework for training and professional development addresses the following required elements:
  - State/territory professional standards and competencies. Describe: [The OEL has identified and adopted core competencies for early care and education professionals. This foundation of professional development identifies what every practitioner should know and be able to do. These research-based standards are grouped into specific content areas with further delineation of knowledge and skill competencies. Core knowledge aligns with Florida's Early Learning and Developmental Standards: Birth to K, descriptors of what children should know and be able to do. Florida has the following sets of competencies and associated trainings:](#)
    - [Core Competencies for Practitioners.](#)
    - [Core Competencies for Directors.](#)
    - [Core Competencies for ECE Career Advisors.](#)
    - [Core Competencies for Technical Assistance Specialists.](#)
    - [Core Competencies for School-Age Practitioners.](#)

- Targeted Competencies for Specialists Supporting Inclusion.

- Career pathways. Describe:
  - Tier 1: Complete one of four options - Child Care Facility, Family Child Care Home, School- Age, OR Introductory Child Care Training
  - Tier 2: Complete one of four options - Florida Staff Credential, National Early Childhood Credential, Formal Educational Qualification, Birth through Five Child Care Credential, OR School-Age Child Care Credential
  - Tier 3: All Tier 2 Certification criteria and Florida Advanced Early Care and Education Credential
  - Tier 4: Associate degree from an accredited and U.S. Department of Education- recognized institution, with at least 21 Early Childhood/Child Development, Elementary Education or Youth Development credits
  - Tier 5: Bachelor's Degree or higher from an accredited and U.S. Department of Education-recognized institution, with at least 36 Early Childhood Education/Child Development, Family and Child Sciences, Elementary Education or Youth Development credits

Foundational training is also required for tier placement, including the Florida Early Learning and Developmental Standards: Birth to K Training, the Overview of the Florida Core Competencies for Early Care and Education Practitioners Training and Trauma Informed Care for Child Care Professionals training.
- Advisory structure. Describe: Florida established its Professional Development Initiative (PDI) Steering Committee in 2007. Professional Development Initiative members include professionals from provider associations, higher education institutions, early learning coalitions, training organizations, Head Start, state departments that invest in and work on professional development issues, and non-profit organizations. The PDI is identified as a key stakeholder group to support the professional development work in Florida, and represents the full diversity of early childhood professional development interests in the state. Particularly, it includes providers from a variety of settings and informs the development of an early childhood professional development system.
- Articulation. Describe: The Florida Children's Forum, in conjunction with the OEL and other stakeholders, has been meeting for the past five years as a committee to work on issues of articulation. The goal is to create a seamless pathway from high school diplomas to credentials and ultimately degrees in the field of early childhood education. Honoring credits between institutions of higher education and transferability are important considerations for the field. Progress has been made. However we continue to work on the transferring of Associate degree(s)/credit(s) to Bachelor's degrees between institutions. This goal is particularly important as we work with practitioners who are also T.E.A.C.H. participants to ensure that resources are maximized.
- Workforce information. Describe: Development continues on an Early Care and Education Professional Development Workforce Registry that allows early learning professionals to track completed training and record achieved certificates, credentials and degrees. The statewide registry is central to attracting, retaining and developing a well-qualified early care and education

[workforce. The system will assist practitioners in assessing current qualifications, identifying education resources and supports, and planning their career pathways. Once fully implemented, the registry will allow policymakers to analyze barriers to access, supports for continued career advancement, and program wide improvements for early learning programs.](#)

- Financing. Describe: [Scholarships](#) - The T.E.A.C.H. Early Childhood® Scholarship Program is a successful three-way partnership between the employer, the teacher and the T.E.A.C.H. program addressing the problems of teacher education, turnover, and compensation in the child care and early learning field. The T.E.A.C.H. program first received statewide funding in 1998 to assist child care and early learning practitioners and has provided scholarships for over 24,000 scholars in Florida since that time for early childhood credentials and degrees. The Program consistently produces data-driven, measurable outcomes that address the challenges of the field and provides access to a well-trained and qualified counselor through the T.E.A.C.H. office to help recipients navigate the often-confusing landscape of professional development and higher education options. [Compensation](#) - Child Care WAGE\$® was designed to provide preschool children more stable relationships with better-educated teachers by rewarding teacher education and continuity of care. WAGE\$ awards education-based salary supplements to early educators to address the key issues of under-education, poor compensation and high turnover within the early childhood workforce. Supplement awards are based on education achieved and the continuity of care provided. Florida WAGE\$ has been locally funded in a number of counties since 2004 and has provided salary supplements to over 6,000 child care providers. Some early learning coalitions also offer financial incentives linked to education attainment. Additionally, OEL offers stipends for the completion of trainings in identified early childhood topic areas through the statewide training initiative. These trainings are offered online and are able to be blended into a technical assistance or community of practice approach. The stipends are provided to providers who achieve mastery for each course, as well as funding for technical assistance coaches and community of practice facilitators.

b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

- ☒ Continuing education unit trainings and credit-bearing professional development to the extent practicable. Describe: [All OEL and DCF state-approved trainings included in the Registry receive continuing education units upon successful completion. All coursework and/or degrees recognized are from institutions \(public and non-public\) that are accredited by a regional or national accrediting agency recognized by the United States Department of Education. If degrees or course work are completed in another country, participants must submit their transcripts to a third-party evaluator to determine equity. Registry-Approved/-Recorded Training is approved training that meets in-service training requirements and provides Continuing Education Units \(CEUs\). CEUs are a standard unit of measure of coursework used for](#)



[training and credentialing purposes. The Registry accepts CEUs for training offered by the Department of Children and Families, Office of Early Learning, from regionally accredited educational institutions recognized by the U.S. Department of Education, organizations accredited by the International Association of Continuing Education and Training \(IACET\), or from national professional organizations. CEUs awarded for training and credentialing purposes will be calculated at a rate of 1 continuing education unit for every 10 hours of contact training.](#)

[Career Pathway Training is approved training and coursework that leads to credentials and degrees. Career Pathway training supports success in college credit coursework.](#)

- ☒ Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework. Describe: [The PDI Steering members include professionals from provider associations, higher education institutions, early learning coalitions, training organizations, Head Start, state departments that invest in and work on professional development issues, and non-profit organizations. The PDI is identified as a key stakeholder group to support the professional development work in Florida, and represents the full diversity of early childhood professional development interests in the state. Particularly, it includes providers from a variety of settings and informs the development of the early childhood professional development system to include aligning training and ECE coursework.](#)
- ☐ Other. Describe:

- 6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff. [Professional Development Initiative Steering Committee members as described in 6.1.1 met multiple times, worked through subcommittees, reviewed best practices and revised state policies and practices.](#)
- 6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)). [The Career Pathway is set up to offer many different paths for progress. There are informal and formal options for training and credentialing. This allows access to those who may not have the ability to obtain formal education. The framework's financial incentives also gives financial support to those seeking to gain a degree or credential through the TEACH Early Childhood Scholarship Program. TEACH helps with addressing the problems of teacher education, turnover, and compensation in this field. It requires a commitment of recipients which addresses retention as well.](#)

## 6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements—as



described in Section 5 for caregivers, teachers, and directors in CCDF programs —align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

- 6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development framework (98.44(b)). [The OEL’s Early Care and Education Pathway sets the early learning and developmental guidelines training as a core requirement. This requirement must be met before a practitioner can be tiered on the pathway. Additionally, each regulated provider is required to take introductory training which includes: child growth and development; health, safety and nutrition; rules and regulations; identifying and reporting child abuse and neglect behavioral observation and screening; developmentally appropriate practices; and early and/or emergent literacy. These trainings align to all of the state early learning and developmental guidelines and offer supports for the implementation of those guidelines. OEL requires all providers receiving CCDF funds to complete the above training as preservice training, as well as additional training in the areas of safe sleep practices, early learning developmental standards, social/emotional development of young children, emergency preparedness, transportation safety \(if applicable\) and first aid/CPR. All of these additional trainings must be completed to be tiered on the Early Care and Education Professional Development Pathway, as well.](#)
- 6.2.2 Describe how the state/territory’s training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)). [The OEL is in contact with the Miccosukee Tribe in our state. We have created information about access to all of the quality initiatives currently existing within the state. Through this connection, we hope to create a stronger partnership with this community.](#)
- 6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers:
- a) with limited English proficiency. [The Office is planning to translate the required pre-service training so that it can be accessed by practitioners with limited English proficiency. Additionally, the website hosting the Florida Early Care and Education Developmental Standards is in the process of being translated. The supporting trainings for these standards are available in Spanish as well. The OEL’s website can toggle between an English and Spanish version.](#)
  - b) who have disabilities. [The OEL ensures ADA compliance with all public facing documents. The supports offered to practitioners are modified to meet the needs of practitioners with](#)

disabilities. For example, communities of practice are held after trainings if needed to ensure that practitioners have had time to process the information and ask questions.

- 6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii–iv)). Introductory training for regulated/registered providers includes topic areas that cover diversity in areas such as age group, exceptionalities, and culture. These courses can be differentiated by age group served or provider type. College credit certificate programs are clusters of credit courses focused on a specific content area. Many of the Florida community or state colleges that offer early childhood associate degrees also offer 12-credit certificates in content areas such as infant-toddler development, preschool development, inclusion and child care center management. Achieving a college credit certificate can be an option for practitioners who are interested in improving knowledge and skills through college coursework, but cannot commit to a degree program. These credits are transferable to an associate degree if the practitioner chooses to continue their college education. There are other professional development opportunities available in Florida that do not contribute to placement on the Florida Early Care and Education Career Pathway, but award specializations which will provide sequenced, incremental content that builds specific skills in early childhood professionals. Specializations are available in the following areas: Infant-Toddler Development; Preschool Development, Inclusion, Dual Language Learners; Trauma Informed Care; and Child Care Center Management.
- 6.2.5 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).
- a) Describe the state/territory's training and TA efforts for providers in identifying and serving children and their families experiencing homelessness (relates to question 3.2.2). The Early Care and Education Career Pathway has included a course in the core requirements training addressing trauma in young children. This course covers the emotional trauma that may come for children in housing transition. The OEL is procuring additional training to cover this topic area during the 18-19 fiscal year.
  - b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.2.2). The OEL's Sharepoint site for early learning coalitions contains resources and links to training and technical assistance to be shared with providers regarding serving homeless children and families. The OEL program staff are currently researching and taking courses in trauma and serving children experiencing homelessness. The program staff audits the trauma courses approved to meet the core requirement on the career pathway.
- 6.2.6 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply.

- ☒ Issue policy change notices
- ☐ Issue new policy manual
- ☐ Staff training
- ☐ Orientations
- ☐ Onsite training
- ☒ Online training
- ☐ Regular check-ins to monitor the implementation of CCDF policies. Describe the type of check-ins, including the frequency. \_\_\_\_\_
- ☐ Other. Describe:

6.2.7 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen providers' business practices, which can include training and/or TA efforts.

- a) Describe the strategies that the state/territory is developing and implementing for training and TA. [Florida requires directors of licensed child care facilities to have a director credential. The DCF developed a comprehensive, renewable director credential based on education and experience. Every child care facility is required to have a credentialed director, except during evening hours. A director may only supervise one child care facility, except i a director may supervise multiple before and after- school sites for a single organization \(Rule 65C-22.008\(4\)\(i\), FAC\). The director is the on-site administrator/supervisor and must be present in the facility a majority of the time that the facility is in operation, except during evening hours of operation. Every applicant for a license to operate a child care facility or for a change of ownership of a child care facility must document that the facility director has a Director Credential prior to issuance of the license. In order to receive a Director Credential, the "Overview of Child Care Management" course must be completed. The "Overview of Child Care Management" course provides instruction on such practices related to fiscal management, budgeting, record- keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications.](#)

[Some coalitions are currently implementing the Early Childhood Program Administrators Institute, a three-course program offered for college credit or CEUs, which results in an advanced Director Credential. The coursework addresses enhancing management and leadership skills, fiscal administration of an early childhood program, recruiting, selecting, and orienting staff, implementing shared decision making and participative management and understanding, conducting, and evaluating effectiveness of meetings.](#)

[The OEL also has standardized training modules for early care and education directors. This training provides an overview of the Florida Core Competencies for Early Care and Education Directors. These competencies address business practices to promote effective administration of early care and education program.](#)

- b) Check the topics addressed in the state/territory's strategies. Check all that apply.

- ☒ Fiscal management
- ☒ Budgeting
- ☒ Recordkeeping
- ☒ Hiring, developing, and retaining qualified staff
- ☒ Risk management
- ☒ Community relationships
- ☒ Marketing and public relations
- ☒ Parent-provider communications, including who delivers the training, education, and/or technical assistance
- ☐ Other. Describe:

### 6.3 Early Learning and Developmental Guidelines

6.3.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. *Note:* States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.

- a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry. [Florida's Early Learning and Developmental Standards: Birth to Kindergarten are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten. The Standards were revised in 2017 to reflect current research and to ensure that children are prepared for future success in kindergarten. A panel of national and state experts in domain-related fields collaborated to ensure that the Standards are developmentally appropriate and linguistically appropriate while designed to show the progression of skills from birth to kindergarten. The Standards were crosswalked with the Florida Kindergarten Standards to ensure aligned children preparation for kindergarten entry.](#)
- b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry. [Each domain's introduction includes domain-specific strategies to support inclusive learning environments. Additionally, the inclusive tools offered by the OEL were written to support the standards.](#)
- c) Verify by checking the domains included in the state/territory's early learning and developmental guidelines. Responses for "other" are optional.
  - ☒ Cognition, including language arts and mathematics

- ☒ Social development
- ☒ Emotional development
- ☒ Physical development
- ☒ Approaches toward learning
- ☒ Other. Describe: [The Arts, Social Studies, Scientific Inquiry](#)

- d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body. [The Florida Department of Education Office of Early Learning ensures Florida's Early Learning and Developmental Standards: Birth to Kindergarten are implemented in School Readiness programs through Florida Administrative Code, 6M-4.700, FAC, Child Performance Standards. These standards were developed in collaboration with a panel of early learning experts to ensure guidelines are research-based and aligned with kindergarten standards.](#)
- e) Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates. [Florida's Early Learning and Developmental Standards: Birth to Kindergarten are updated every 5-6 years to ensure alignment with current research. A panel of national and state experts with expertise in domain-related fields as well as diversity are selected to collaborate to revise the Standards. The Standards are written, reviewed by a panel of experts review team, posted for public feedback, and ultimately adopted by the State Board of Education.](#)
- f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards [The OEL sits on the governing board for the Florida Afterschool Network. The network is working on revising the school-age out-of-school time standards. This project should be complete by the end of the current fiscal year.](#)
- g) Provide the Web link to the state/territory's early learning and developmental guidelines. [6M-4.700, FAC, Child Performance Standards, <http://www.floel.org/standardsresource>](#)

6.3.2 CCDF funds cannot be used to develop or implement an assessment for children that:

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,
- Will be used as the primary or sole method for assessing program effectiveness,
- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used. [Florida's Early Learning and Developmental Standards: Birth to Kindergarten were designed to reflect the knowledge and skills that a child on a developmental trajectory \(progression\) should know and be able to do at the end of an age-related timeframe. School Readiness educators follow the Standards in lesson planning and selecting curriculum that is aligned with the Standards.](#)

## 7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care.

States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a separate annual Quality Progress Report that will include a description of activities to be funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce
- Improving on the development or implementation of early learning and developmental guidelines
- Developing, implementing, or enhancing a tiered quality rating and improvement system for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)
- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)). These activities can benefit infants and toddlers through school-age populations.

This section covers the quality activities needs assessment, quality improvement activities and indicators of progress for each of the activities undertaken in the state or territory.

## **7.1 Quality Activities Needs Assessment for Child Care Services**

7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)). [The OEL facilitates multiple assessments to identify needs for quality improvement. The first, is the Child Care Access Index. This is a collaborative project with the University of Florida to identify if there is access to care, access to quality care, and whether parents are choosing quality care. This, in turn, allows the OEL to design the specific types of technical assistance or quality support needed for each area of the state. This assessment is in process. Additionally, the OEL evaluates current quality improvement investments such as the Early Learning Performance Funding Project. Through a collaboration with the University of Florida, this project has been evaluated annually to address gaps in quality improvement. Finally, the OEL does annual focus groups to identify strengths and gaps in the quality of early care and education in the State \(see 7.1.2\). The gaps are shaped into priorities for quality improvement in the upcoming fiscal year.](#)

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified. [The Office conducts annual needs assessment focus group with specific content areas such as infant/toddler education, school-age care, early childhood inclusion, and equity. The following gaps were identified in each.](#)

[The following are the gaps identified in the past two years of focus groups. Most of these gaps have been addressed or are in a plan to be addressed. The corresponding project to address gaps follows each.](#)

### **Infant/Toddler:**

#### **Access/Supply**

1. [Lack of articulation for an Infant-Toddler Pathway to Credentials](#)
2. [Need more professional development, certification, AA degree for infant-toddler care teachers or directors](#)
3. [Lack of Infant Mental Health consultants/ELC specialists](#)
4. [No plan for training and implementation of ASQ-SE 2 for all infants and toddlers](#)
5. [No capacity/endorsements for specialized needs such as child welfare, trauma](#)
6. [Lack of slots for infants and toddlers](#)
7. [Low salaries for 0-3 care teachers](#)
8. [Data about numbers of infants and toddlers on wait lists, supply and demand are not always accurate](#)
9. [Lack of coordination with EHS data and slots](#)
10. [Need a plan to decrease infants and toddlers on wait lists](#)
11. [Centers discontinuing/closing infant-toddler rooms](#)
12. [High cost of care for infants and toddlers](#)
13. [Ratios and group sizes are high for infants and toddlers](#)



14. [Current funding does not incentivize smaller ratios and group sizes](#)
15. [No capacity for continuity of care, adults following children 0-3](#)
16. [Need more specific core competencies for 0-3 caregivers such as ZTT](#)
17. [Lack of public awareness of importance of 0-3 developmental, social/emotional needs](#)
18. [Differences between state and local infant-toddler initiatives, local service models](#)
19. [Need more infant-toddler training protocols or supports](#)
20. [Minimal health and safety standards not based on quality](#)
21. [Cost as a barrier to higher quality, no business plan for funding it](#)
22. [Lack of understanding of the role of licensing in quality initiatives](#)
23. [Lack of shared understanding among providers about quality measures](#)
24. [Lack of shared understanding between providers and families about quality](#)
25. [Lack of programmatic family engagement to support medical and mental health needs](#)
26. [Lack of process to track expulsions, no early warning system](#)

#### Partnerships

1. [Lack of partnerships with EHS-CCH](#)
2. [Lack of partnerships with healthcare providers](#)
3. [Lack of partnerships, endorsements with FAIMH](#)
4. [Need more coordination with Early Steps](#)
5. [Not sure how all programs serving infants and toddlers align](#)
6. [Lack of shared understanding of the role of home visiting with all infants and toddlers](#)
7. [Need a unique child identifier number to follow children](#)

#### Plan to Address Gaps

1. [Implement specific training to address infant/toddler quality education.](#)
2. [Increase partnership with Head Start Collaboration Office to share resources.](#)
3. [Connect with FAIMH to increase mental health practices of coaches.](#)
4. [Enhance Infant/Toddler website to share resources.](#)
5. [Increase access to the infant/toddler specialization by creating an informal training option.](#)

#### **School Age Care:**

##### Access/Supply

1. [Limited quality professional development and technical assistance for after school providers, including family child care providers](#)
2. [Lack of utilization of core competencies](#)
3. [Need to align core competencies with updated standards \(still to be updated by FAN\)](#)
4. [Lack of a leadership credential specific to afterschool](#)
5. [Pathway needs more opportunities for school-age providers](#)
6. [Registry needs to include more afterschool professional development](#)
7. [Complete data that tells the story \(We have the number of school-age children served in each setting, but we do not know the working hours, the staff ratios, the kind of professional development provided, the quality of instruction, choice of curriculum, kind of program \[academic, free play, etc.\]\) Further, we have no map of where afterschool programs are, they kinds of programs, and if there are any deserts within the State.](#)
8. [Lack of understanding of recruitment/retention among staff for these programs](#)

9. [Potential duplication of services between SR and 21<sup>st</sup> Century Community Learning Centers](#)
10. [Need professional development alignment with license and license-exempt programs](#)
11. [Professional development is not fully shared among partners](#)

#### [Plan to Address Gaps](#)

1. [Work with Florida Afterschool to align standards for afterschool programs.](#)
2. [Research and gather specific professional development options and link to the statewide registry.](#)
3. [Create inventory for initiatives with all programs/agencies supporting this age group.](#)
4. [Increase targeted trainings for the Afterschool Network.](#)

#### [Early Childhood Inclusion:](#)

##### [Family Engagement/Consumer Education](#)

1. [Distribute more information about the benefits of screenings](#)
2. [Distribute more information about the process of referrals](#)
3. [Distribute more information about expulsion/suspension and the role of the inclusion coordinator](#)

##### [Website Development](#)

1. [Design an informational page](#)
2. [Social Media: Use social media for the dissemination of the family engagement and consumer education objectives](#)

##### [Data Capturing System](#)

1. [WELS only captures the inclusion coordinator activities at the class room level](#)
2. [We need a system that would track the following data:](#)
  - a. [Child's name](#)
  - b. [Child ID number, if available](#)
  - c. [DOB/age](#)
  - d. [Parent name;](#)
  - e. [Parent contact information, to include: mailing address, email, phone](#)
  - f. [Center's name/phone #](#)
  - g. [Inclusion Specialist name](#)
  - h. [Teacher's Name](#)
  - i. [Teacher's Ratio](#)
  - j. [Date of enrollment in the School Readiness program](#)
  - k. [Date\(s\) of screening\(s\), if screened](#)
  - l. [Parent Initiated Concerns](#)
  - m. [Warm-Line Initiated Concerns](#)
  - n. [Reason for not being screened, if applicable, which may include](#)
  - o. [Parental objection to the screening; or](#)
  - p. [Exceptions to being screened in the School Readiness program as described in subsection \(4\)](#)
  - q. [Parent Declined Services](#)
  - r. [No Screening - Services](#)
  - s. [No Screening - Withdrew Enrollment](#)

t.	<a href="#"><u>Provider Expulsion</u></a>
u.	<a href="#"><u>Provider Family Dismissal</u></a>
v.	<a href="#"><u>Transfer Due to Location</u></a>
w.	<a href="#"><u>Transfer Due to Schedule</u></a>
x.	<a href="#"><u>Transfer Due to Cost</u></a>
y.	<a href="#"><u>Transfer Due to Quality</u></a>
z.	<a href="#"><u>Developmental screening results</u></a>
aa.	<a href="#"><u>ASQ No Concern</u></a>
bb.	<a href="#"><u>ASQ Follow-up</u></a>
cc.	<a href="#"><u>ASQ Growth</u></a>
dd.	<a href="#"><u>ASQ No Growth</u></a>
ee.	<a href="#"><u>Rescreen ASQ3 due</u></a>
ff.	<a href="#"><u>Socio-emotional screening</u></a>
gg.	<a href="#"><u>SE-2 No Concern</u></a>
hh.	<a href="#"><u>SE-2 Follow-up</u></a>
ii.	<a href="#"><u>SE-2 Growth</u></a>
jj.	<a href="#"><u>SE-2 No Growth</u></a>
kk.	<a href="#"><u>Communication Disorders screening</u></a>
ll.	<a href="#"><u>Autism Navigator No Concern</u></a>
mm.	<a href="#"><u>Autism Navigator Follow-up</u></a>
nn.	<a href="#"><u>Autism Navigator Growth</u></a>
oo.	<a href="#"><u>Autism Navigator No Growth</u></a>
pp.	<a href="#"><u>Tracking of concerns</u></a>
qq.	<a href="#"><u>Vision Pass</u></a>
rr.	<a href="#"><u>Vision Refer</u></a>
ss.	<a href="#"><u>Hearing Pass</u></a>
tt.	<a href="#"><u>Hearing Refer</u></a>
uu.	<a href="#"><u>ASQ Communication Domain</u></a>
vv.	<a href="#"><u>ASQ Gross Motor Domain</u></a>
ww.	<a href="#"><u>ASQ Fine Motor Domain</u></a>
xx.	<a href="#"><u>ASQ Problem Solving Domain</u></a>
yy.	<a href="#"><u>ASQ Personal-Social Domain</u></a>
zz.	<a href="#"><u>ASQ SE Self-Regulation Domain</u></a>
aaa.	<a href="#"><u>ASQ SE Compliance Domain</u></a>
bbb.	<a href="#"><u>ASQ SE Adaptive Functioning Domain</u></a>
ccc.	<a href="#"><u>ASQ SE Autonomy Domain</u></a>
ddd.	<a href="#"><u>ASQ SE Affect Domain</u></a>
eee.	<a href="#"><u>ASQ SE Social Communication Domain</u></a>
fff.	<a href="#"><u>ASQ SE Interaction Domain</u></a>
ggg.	<a href="#"><u>Date of observation</u></a>
hhh.	<a href="#"><u>Date individualized supports were initiated</u></a>
iii.	<a href="#"><u>Type of individualized supports initiated; (i.e. including private therapy) addressing concerns</u></a>
jjj.	<a href="#"><u>Follow-up Screening</u></a>
kkk.	<a href="#"><u>Follow-up Assessment</u></a>
lll.	<a href="#"><u>Individualized learning plans</u></a>
mmm.	<a href="#"><u>Suggested developmental activities for parents or providers</u></a>
nnn.	<a href="#"><u>Observations and accommodations in the early learning program</u></a>

ooo.	<a href="#">Parent education</a>
ppp.	<a href="#">Referrals to early intervention services or specialized care.</a>
qqq.	<a href="#">Referral to Part C</a>
rrr.	<a href="#">Referral to Part B</a>
sss.	<a href="#">Referral to Other</a>
ttt.	<a href="#">Referral for Hearing</a>
uuu.	<a href="#">Referral for Vision</a>
vvv.	<a href="#">Referral for Social Emotional</a>
www.	<a href="#">Referred - Did Not Qualify</a>
xxx.	<a href="#">Referral - Qualified</a>
yyy.	<a href="#">Behavior intervention services to site</a>
zzz.	<a href="#">Provide behavior intervention services to child</a>
aaaa.	<a href="#">Teacher TA/Coaching</a>
bbbb.	<a href="#">Date of referral, if applicable under sub-subparagraph (5)(b)6.; and,</a>
cccc.	<a href="#">Whether the parent elected to receive additional help from the coalition under sub-subparagraph</a>
dddd.	<a href="#">Tracking of follow up of children as they move to other agencies for services</a>
eeee.	<a href="#">Tracking of children with IEPs and IFSPs</a>

#### Plan to Address Gaps

1. [Explore options to build early intervention tracking system in the statewide information system.](#)
2. [Implement an affiliate trainer training on CSEFL modules.](#)
3. [Increase access to the inclusion specialization by creating an informal training option.](#)

#### **Equity:**

##### Rural and Migrant Families/Programs

1. [Lack of early childhood services in rural areas](#)
2. [Lack of resources for rural and/or high poverty areas](#)
3. [Barriers for migrant families to access resources](#)
4. [Programs do not have access to same level of resources as others e.g. mental health, pay, training and professional development](#)
5. [Programs in rural communities are detached from services, resources and opportunities available in larger communities](#)

##### Transportation

1. [Lack of access](#)
2. [If transportation is broken, the families cannot afford the repair costs](#)
3. [Lack or reliable/adequate transportation services](#)

##### Access to Early Education and Care

1. [All children do not have access to early education and care programs](#)
2. [Need more parent education in early learning](#)
3. [Cost of quality early childhood programs is too expensive](#)
4. [Low access to affordable high quality childcare](#)
5. [Low access to high quality early education and care](#)

#### Early Childhood System-Institutional and Structural

1. Inequity in defining “quality” of early childhood programs
2. Unequal access to the same level of resources and services
3. Need higher compensation for early education professionals
4. Grant programs are not provided long enough for deep sustainability of implementation
5. Lack of clarity on how federal/state/local systems and funding are structured
6. Inequitable priorities for access to school readiness

#### Lack of resources

1. Staff not fully understanding multiple programs and resources available therefore not communicating with families effectively

#### Healthy Food and Health Care

1. Health food is not available and/or affordable
2. Need consistent education regarding making healthy food choices
3. Lack of affordable health care – lack of access doctors, medication and treatment

#### Language Barriers

1. Language barriers (families, childcare staff, environment)
2. Language barriers (families, providers)
3. Recent immigrants have barriers to understanding services and processing paperwork.

#### Economic

1. Lack of economic resources
2. Living wages are too low to afford childcare
3. Many employment issues such as unemployment, lack of a living wage and benefits
4. Few job opportunities
5. Families living just above the poverty line

#### Inclusion

1. Children with special needs are not always viewed as a priority nor are all School Readiness providers committed to inclusion
2. There are limited programs for children with disabilities.

#### Family and Resources

1. Lack of family supports to assist financially and emotionally
2. Families do not understand how state systems are structured and are not always able to help themselves

#### Data and Bias

1. Lack of data on the impact of implicit bias
2. Teacher administration bias

#### Plan to Address Gaps

1. Conduct statewide equity trainings.
2. Research tools to create plans to address identified systemic gaps.
3. Explore ways to track expulsions/dismissals in the statewide information system.

## 7.2 Use of Quality Funds

### 7.2.1 Check the quality improvement activities in which the state/territory is investing.

- ☒ Supporting the training and professional development of the child care workforce  
If checked, respond to section 7.3 and indicate which funds will be used for this activity.  
Check all that apply.
  - ☒ CCDF funds
  - ☐ Other funds. Describe:
- ☒ Developing, maintaining, or implementing early learning and developmental guidelines.  
If checked, respond to section 6.3 and indicate which funds will be used for this activity.  
Check all that apply.
  - ☒ CCDF funds
  - ☐ Other funds. Describe:
- ☒ Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity.  
Check all that apply.
  - ☒ CCDF funds
  - ☐ Other funds. Describe:
- ☒ Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply.
  - ☒ CCDF funds
  - ☐ Other funds. Describe:
- ☒ Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.
  - ☒ CCDF funds
  - ☐ Other funds. Describe:
- ☒ Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.
  - ☒ CCDF funds
  - ☐ Other funds. Describe:

- ☒ Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.

☒ CCDF funds

☐ Other funds. Describe:

- ☒ Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.

☒ CCDF funds

☐ Other funds. Describe:

- ☒ Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.

☒ CCDF funds

☐ Other funds. Describe:

- ☒ Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply.

☒ CCDF funds

☐ Other funds. Describe:

### **7.3 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds**

Lead Agencies can invest in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 in addition to the following (98.53(a)(1)).

#### **7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce.**

- a) Check and describe which content is included in training and professional development activities and describe who or how an entity is funded to address this topic. Check all that apply.

☒ Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies. Describe: [The](#)



OEL offers stipends for the completion of trainings social, emotional, physical, and cognitive development of children, including nutrition and physical activity through our state quality improvement system. (CCDF funding)

- The OEL conducts an annual statewide training effort on expulsion and suspension prevention, which supports educators' knowledge of social and emotional development of children. (CCDF funding)
- TEACH scholarships are offered to support formal degrees covering social, emotional, physical and cognitive development. (CCDF funding)
- The OEL has developed a three-hour instructor-led training, a five-hour online training related to infant and toddlers, a five-hour online training related to preschoolers and a five-hour online birth to kindergarten training that addresses the different elements and developmental domains of the Florida Early Learning and Developmental Standards: Birth to Kindergarten. The training provides a brief overview of how the Standards can be used to support implementing developmentally appropriate practices for practitioners and directors. The Standards account for social, emotional, physical, cognitive development of children, and physical activity. (CCDF and state funding)
- The OEL sponsors a training initiative that allows providers access to training on many early childhood topics including social, emotional, physical, and cognitive development as well as nutrition and physical activity. These trainings are offered online and are able to be blended into a technical assistance or community of practice approach. (CCDF funding)
- The OEL conducts affiliate training sessions for coaches on the CSEFL modules, which address social, emotional, physical and cognitive development of children. (CCDF funding)

☒ Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.5.) Describe: The OEL offers stipends for the completion of trainings in behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behavior through our state quality improvement system. (CCDF funding)

- The OEL conducts an annual statewide training effort on expulsion and suspension prevention. This training has a primary focus on mental health, positive behavior interventions, and addressing challenging behaviors. (CCDF funding)
- TEACH scholarships are offered to support formal degrees covering behavior management strategies, including positive behavior interventions and

- [support models that promote positive social-emotional development and early childhood mental health. \(CCDF funding\)](#)
- [The OEL is currently developing a Trauma-Informed Care specialization for practitioners. \(CCDF funding\)](#)
  - [The OEL network of lead trainers within the coalitions provide 38 hours of training developed by the Center on the Social and Emotional Foundation for Early Learning \(CSEFEL\) to practitioners free of charge.](#)
  - [The OEL training initiative allows providers access to training on many early childhood topics to include Social-Emotional Development. These trainings are offered online and are able to be blended into a technical assistance or community of practice approach. \(CCDF funding\)](#)
  - [The OEL has also developed two online courses, 1.\) Developing the Socially and Emotionally Competent Child, and 2.\) Working to Create Positive Learning Environments: Preventative Strategies. Both courses are intended for preschool educators and highlight the importance of supporting children's developing social and emotional competence. Both of these courses are available through the Early Care and Education Professional Development Registry and cost \\$10 each. \(State funding\)](#)
- ☒ Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. Describe: [The OEL requires training of CCR&R staff on engaging parents and families in a culturally and linguistically appropriate way. This training is meant to help CCR&R staff engage families to become meaningful partners in supporting their children's positive development.](#)
- [The OEL statewide training initiative allows providers access to training on many early childhood topics such as engaging parents and families in a culturally and linguistically appropriate way. These trainings are offered online and are able to be blended into a technical assistance or community of practice approach. These courses include extensive content on engaging families to become meaningful partners in supporting their children's positive development. \(CCDF funding\)](#)
- ☒ Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards. Describe: [The OEL offers stipends for the completion of trainings in developmentally appropriate, culturally and linguistically responsive instruction through our state quality improvement system. \(CCDF funding\)](#)
- [The OEL has developed training to support the implementation of the Florida Early Learning and Developmental Standards \(Birth to Kindergarten\) which addresses addresses developmentally appropriate, culturally and](#)

[linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards. \(CCDF funding\)](#)

- [The OEL sponsors a training initiative that allows providers access to training on many early childhood topics such as developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards. These trainings are offered online and are able to be blended into a technical assistance or community of practice approach. \(CCDF funding\)](#)
- [The OEL conducts an annual statewide training effort on expulsion and suspension prevention that addresses developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards. \(CCDF funding\)](#)
- [TEACH scholarships are offered to support formal degrees and credentials covering these content areas. \(CCDF funding\)](#)
- [Introductory training for regulated/registered providers includes topic areas that cover diversity in areas such as age group, exceptionalities, and culture. These courses can be differentiated by age group served or provider type.](#)

- ☐ Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development. Describe: \_\_\_\_\_
- ☒ Using data to guide program evaluation to ensure continuous improvement.  
Describe: [As described in 7.1.1, the Lead Agency facilitates multiple assessments to identify needs for quality improvement. The first, is the Child Care Access Index. This is a collaborative project with the University of Florida to identify if there is access to care, access to quality care, and whether parents are choosing quality care. This, in turn, allows the Lead Agency to design the specific types of technical assistance or quality support needed for each area of the state. This assessment is in process. Additionally, the Lead Agency evaluates current quality improvement investments such as the Early Learning Performance Funding Project. Through a collaboration with the University of Florida, this project has been evaluated annually to address gaps in quality improvement. Finally, the Lead Agency does annual focus groups to identify strengths and gaps in the quality of early care and education in the State \(see 7.1.2\). The gaps are shaped into priorities for quality improvement in the upcoming fiscal year.](#)
- ☐ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe: \_\_\_\_\_
- ☒ Caring for and supporting the development of children with disabilities and developmental delays. Describe: [The OEL developed a tool for self-assessment](#)

which can be used to develop professional goals for supporting children with special needs (Best Practices for Inclusive Early Childhood Education). The OEL offers trainings on the use of this tool to create more inclusive settings for young children. (CCDF Funding)

- The OEL offers stipends for the completion of trainings on caring for and supporting the development of children with disabilities and developmental delays through our state quality improvement system. (CCDF Funding)
- The OEL has developed training to support the implementation of the Florida Early Learning and Developmental Standards (Birth to Kindergarten) that includes modifications for children with disabilities or developmental delays. (CCDF and state Funding)
- The OEL conducts an annual statewide training effort on expulsion and suspension prevention which discusses strategies for supporting children with special needs. (CCDF Funding)
- TEACH scholarships are offered to support formal degrees and credentials covering these content areas. (CCDF Funding)
- The OEL is currently developing an Inclusion Specialization that will be available to practitioners in FY 19-20. (CCDF Funding)
- Introductory training for regulated/registered providers includes topic areas that cover diversity in areas such as age group, exceptionalities, and culture. These courses can be differentiated by age group served or provider type. (CCDF Funding)
- Early Learning Florida is an initiative that allows providers access to training on many early childhood topics. These trainings are offered online and are able to be blended into a technical assistance or community of practice approach and includes extensive content on meeting the needs of dual language learners and supporting the needs of children with special needs. (CCDF funding)

- ☒ Supporting the positive development of school-age children. Describe: The Department of Children and Families offers a School Age Credential. (CCDF Funding)
- TEACH scholarships are offered to support formal degrees and informal credentials covering these content areas. (CCDF Funding)

☐ Other. Describe:

- b) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply.
- ☒ Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling
  - ☒ Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities

- ☒ Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education
- ☐ Other. Describe:

7.3.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. [The OEL, in partnership with the Department of Children and Families operates a statewide early care and education workforce registry. While the scope for system development is substantially complete, the OEL and DCF are working to enhance the system to add reporting functions and functionality as needed to transition to the national professional development pathway. Once the system development is completed in December 2019, OEL will use this data to analyze the following indicators:](#)

- [Number of Practitioners with degrees](#)
- [Number of Practitioners with staff credentials](#)
- [Number of Practitioners with advanced staff credentials](#)
- [Number of Practitioners with content specializations](#)
- [Increase in these numbers from year to year](#)

[The OEL analyzes data collected by the TEACH contractor to monitor the amount of degrees/credentials/specializations that have been obtained.](#)

#### 7.4 Quality Rating and Improvement System (QRIS)

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving, and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education

7.4.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?

- ☐ No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.
- ☐ No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.
- ☒ Yes, the state/territory has a QRIS operating statewide or territory-wide. Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available. [The OEL operates a statewide system of quality improvement which offers tiered differentials in addition to their regular subsidy payment, based on their level of quality. Some early learning coalitions use local or](#)

CCDF funds to incentive additional quality improvement requirements. The funding of the state quality improvement system will serve as additional incentive for any local QRIS. The OEL is currently working with the coalitions to align local quality indicators with the state's system.

The link to the OEL's quality improvement system is

[http://www.floridaearlylearning.com/school\\_readiness/early\\_learning\\_performance\\_funding\\_project.aspx](http://www.floridaearlylearning.com/school_readiness/early_learning_performance_funding_project.aspx)

The links to the local systems are:

1. ELC of Duval County, Guiding Stars of Duval: <http://www.elcduval.org/guiding-stars-ofduval/>
2. ELC of Escambia County, Quality Rating Improvement System: <http://www.elcescambia.org/ImportantUpdates.aspx>
3. ELC of Flagler and Volusia Counties, Quality Rating Improvement System: <https://www.elcfv.org/providers/qrisc/>
4. ELC of Florida's Gateway, Pathways to Quality: [https://www.elcgateway.org/index.php?option=com\\_content&view=article&id=119:pathways-to-quality&catid=81&Itemid=207](https://www.elcgateway.org/index.php?option=com_content&view=article&id=119:pathways-to-quality&catid=81&Itemid=207)
5. ELC of Hillsborough County, Quality Counts: [http://www.elchc.org/quality\\_counts.html](http://www.elchc.org/quality_counts.html)
6. ELC of Lake County, Colorful S.T.E.P.S to School Readiness: <http://elclc.org/serviceproviders/#tab2>
7. ELC of Manatee County, Quality Rating Systems: <http://www.elcmanatee.org/providers/detail/quality-rating-improvement-system-qrisc/>
8. ELC of Miami-Dade/Monroe, Quality Counts <http://www.elcmdm.org/QualityCounts/index.htm>
9. ELC of Orange County, Quality Stars: <http://elcoforangecounty.org/quality-stars/>
10. ELC of Palm Beach County, Strong Minds: <http://providers.cscpbcc.org/bequality>
11. ELC of Pasco Hernando, Sunshine Stars: <http://www.phelc.org/QRIS.php>
12. ELC of Pinellas Early Learning Coalition, Levels of Excellence and Accreditation for Pinellas (LEAP): <http://www.elcpinellas.net/qrisc.php>
13. ELC of Polk Quality Counts: <http://www.elcpolk.org/parents/choosing-a-child-careprovider/quality-counts/>
14. ELC of Sarasota County, Look for the Stars: [http://www.earlylearningcoalitionsarasota.org/look\\_for\\_the\\_stars.htm](http://www.earlylearningcoalitionsarasota.org/look_for_the_stars.htm)
15. ELC of Southwest Florida Stars: <http://www.elcofswfl.org/provider-qrisc.php>

- ☐ Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis. Provide a link, if available.

- ☐ Yes, the state/territory has another system of quality improvement.

If the response is yes to any of the above, describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the

state/territory and the data on the extent to which the state or territory has met these measures.  

#### 7.4.2 QRIS participation.

a) Are providers required to participate in the QRIS?

- ☒ Participation is voluntary.
- ☒ Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level). For FY 18-19 there is a voluntary quality improvement system available to all qualified School Readiness providers based on funding availability. This project offers tiered differentials to providers based on levels of quality as well as stipends for educators who complete specific interventions. For FY 19-20, it is statutorily mandatory for all School Readiness providers to participate in a tiered differential program which will adjust rates based upon levels of quality. A provider must be above a certain level of quality to participate in the subsidy program. These levels of quality will be based on program assessment scores (CLASS) and are currently being defined in rule development. Over 20% of SR providers are participating in the voluntary project. The OEL is currently working with early learning coalitions to assess the remaining providers to meet the statutory deadline of July 1, 2019.
- ☐ Participation is required for all providers.

b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS? Check all that apply.

- ☒ Licensed child care centers
- ☒ Licensed family child care homes
- ☒ License-exempt providers
- ☒ Early Head Start programs
- ☒ Head Start programs
- ☒ State prekindergarten or preschool programs
- ☒ Local district-supported prekindergarten programs
- ☒ Programs serving infants and toddlers
- ☒ Programs serving school-age children
- ☒ Faith-based settings
- ☐ Tribally operated programs
- ☐ Other. Describe: \_\_\_\_\_

#### 7.4.3 Support and assess the quality of child care providers.



The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. *Note:* If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

- ☒ No
- ☐ Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
  - ☐ Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system).
  - ☐ Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
  - ☐ Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
  - ☐ Programs that meet all or part of state/territory school-age quality standards.
  - ☐ Other. Describe:
  - ☐ None.

7.4.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?

- ☐ No
- ☒ Yes. If yes, check any links between the state/territory's quality standards and licensing requirements.
  - ☐ Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
  - ☐ Embeds licensing into the QRIS.
  - ☐ State/territory license is a "rated" license.
  - ☒ Other. Describe: [Effective 2019-2020, the OEL quality improvement system is required for providers receiving subsidy. Currently all School Readiness providers must have at least one annual health and safety inspection to receive a contract for subsidy payments.](#)
  - ☐ Not linked.

7.4.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS.

- ☐ No
- ☒ Yes. If yes, check all that apply.
- ☒ One time grants, awards, or bonuses
  - ☐ Ongoing or periodic quality stipends
  - ☒ Higher subsidy payments
  - ☒ Training or technical assistance related to QRIS
  - ☒ Coaching/mentoring
  - ☒ Scholarships, bonuses, or increased compensation for degrees/certificates
  - ☐ Materials and supplies
  - ☐ Priority access for other grants or programs
  - ☐ Tax credits (providers or parents)
  - ☐ Payment of fees (e.g., licensing, accreditation)
  - ☐ Other:
  - ☐ None

7.4.6 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. [For the last four years OEL invested in an evaluation of these efforts with the University of Florida \(FY 2017-2018 is the last year\). The overall measures are:](#)

Quantitative:

- [CLASS score growth](#)
- [Child outcome growth](#)
- [Teacher knowledge increase](#)
- [Accreditation impact on quality improvement](#)

Qualitative:

- [Teacher skill implementation](#)
- [Teacher awareness](#)
- [Overall teacher experience](#)

[OEL will continue to use these indicators to guide the system structures and supports.](#)

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

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

7.5.1 What activities are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe.

- ☒ Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low-income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families.

Describe: [The OEL includes infant and toddler quality improvement interventions in the state quality improvement system for all provider types. These interventions include:](#)

- [Infant/Toddler specific training](#)
- [CLASS observations with the infant and toddler tools](#)
- [Making the Most of CLASSroom Interactions training on the CLASS infant and toddler tools](#)
- [Incentives for completing child assessments for infants and toddlers](#)

[Additional Supports Include:](#)

- [Scholarships for Infant/Toddler Professional Development Specializations](#)
- [Coaching for Infant/Toddler teachers](#)

- ☒ Establishing or expanding the operation of community- or neighborhood-based family child care networks. Describe: [The early learning coalitions support the expansion of community or neighborhood-based family child care networks with a variety of initiatives, such as:](#)

- [Participating in the state family child care home professional organization's events.](#)
- [Offering scholarships for professional development to family child care providers](#)
- [Hosting family child care network group meetings](#)
- [Offering free technical assistance and training to family child care providers](#)

[Additionally, OEL is currently working with the Florida Family Child Care Home Association and its local chapters to develop a framework for community network support and to identify peer mentor leaders to offer support \(financial, personal, educational\) to other local family child care home providers.](#)

- ☒ Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe:

[Framework:](#)

[The voluntary implementation of a framework that identified 10 research-based components that are essential to high quality child care will be a priority for the next three years. Using these 10 components as a guide, the Infant and Toddler specialists will be helping child care programs improve the quality of care for infants, toddlers and their](#)

families. Programs will start with tangible changes to the environment and the structure of the program and then advance towards changing practices that promote relationship-based care between children, caregivers and families. Additionally, these domains will become the framework for the information Infant/Toddler Specialization.

#### Network

The Infant and toddler network supports early learning providers and specialists from the early learning coalitions. These supports include sharing of information about developmentally appropriate and emotionally safe learning environments for infants and toddlers.

#### Training/Professional Development Opportunities

- The early learning coalitions and OEL program staff offer training to providers serving infants and toddlers on topics such as preventing biting, developmentally appropriate practices, safe sleep practices and sensory play.
- Early learning coalitions host conferences targeted at meeting the training needs of those providers serving infants and toddlers.
- Parent trainings are hosted by early learning coalitions with specific training towards infant/toddler development.
- Blended models of training are offered through the OEL training initiative, which offers online training modules using technical assistance and/or communities of practice.
- Required pre-service training includes a course on safe sleep.
- The OEL honors a formal certificate program as an infant/toddler specialization for the early childhood workforce. An informal specialization is currently under development.

#### Program Assessment

- Program assessment is available using the infant and toddler CLASS tools. This data is used for targeted training and technical assistance.
- Specific training is given statewide to promote the quality of teacher/child interactions (Making the Most of CLASSroom Interactions –Infant and Toddler Version).

#### Financial Incentives

- Scholarships are given for professional development progression to teachers of infant and toddler classrooms, including the completion of an Infant/Toddler Specialization or degree in this content area.

- ☒ Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant-toddler specialists. Describe: Each early learning coalition is staffed with an Infant/Toddler Specialist who

[serves as a coach, mentor and technical assistance specialist for providers serving infants and toddlers.](#)

- [Blended models of training are offered through the OEL training initiative which offers online training modules using technical assistance and/or communities of practice.](#)
  - [Some early learning coalitions offer quality mentors who provide technical assistance to the teachers involved in the Early Head Start - Child Care Partnership grant on a bi-weekly basis.](#)
- ☒ Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.). Describe: [Initial developmental screening is required for all children in the School Readiness Program within the first 45 days of receiving services. Screening is required at least annually after the initial screening. The OEL provides the screening data capture system at no cost to providers or coalitions. The results of these screenings will determine if a referral to an early interventionist is required.](#)
- [The OEL provides funding for ASQ-SE2 screening as follow-up to provide additional information for referrals.](#)
  - [Each early learning coalition, as well as the OEL, has an Inclusion Specialist on staff who provides Inclusion Warm Line services including parent phone and in-person consultation, onsite observation, and technical assistance. The Inclusion Specialists also provide training and technical assistance to the providers as requested. These specialists connect parents with the necessary resources to meet the needs of the family.](#)
  - [The OEL works with the Department of Health, the Department of Education, the Developmental Disabilities Council, and the Florida Inclusion Network to ensure any infant/toddler initiatives have considered inclusive practices for infants and toddlers with disabilities or developmental delays.](#)
  - [The OEL, in collaboration with other agencies, developed a self-assessment tool to measure inclusive practices, which can be used by teachers and directors of all age groups.](#)
  - [The early learning coalitions collaborate with various agencies, such as Early Steps local affiliates, to facilitate quick and appropriate referrals, to meet the needs of children and families.](#)
  - [Early learning coalitions participate on local committees, councils and boards to collaboratively facilitate the process for referrals and transitions.](#)
  - [The OEL hosts a website which connects parents, providers and teachers to Part C websites, free screenings for communication disorders \(Autism Navigator\), and additional resources for understanding best practices for supporting infants and toddlers with special needs or exceptionalities.](#)
- ☒ Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments. Describe: [The state quality improvement](#)

system includes infant and toddler quality improvement interventions in the state quality improvement system for all provider types. These interventions include:

- Infant/Toddler specific training, including the infant/toddler specialization
- CLASS observations with the infant and toddler tools
- Making the Most of CLASSroom Interactions training on the CLASS infant and toddler tools
- Incentives for completing child assessments for infants and toddlers
- Coaching for Infant/Toddler teachers

Note: These trainings will be used to support quality improvement to maintain required scores in the new tiered reimbursement system.

- Local QRI systems include these same components as well as additional targeted training and coaching requirements.

Gold Seal Quality Care Program Rate Differential for Infants/Toddlers is offered as a rate differential or stipend, which may not exceed more than 20 percent of an early learning coalition's reimbursement rate, to School Readiness providers who have achieved a Florida "Gold Seal Quality Care" designation through accreditation. Therefore increasing the availability of high quality infant/toddler providers.

- ☒ Developing infant and toddler components within the state/territory's child care licensing regulations. Describe: Infant and toddler specific health and safety requirements are integrated into the licensing standards. These standards include but are not limited to:
  - Safe Sleep Training requirements
  - Sleeping standards
  - Prohibition of screen time for infants/toddlers
  - Feeding Practices
  - Ratios
- ☒ Developing infant and toddler components within the early learning and developmental guidelines. Describe: Florida's Early Learning Developmental Standards: Birth to Five include all components of infant and toddler development.
- ☒ Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development. Describe: The OEL creates and distributes informational pamphlets which discuss all of the developmental domains of the Early Learning and Developmental Standards Birth-Kindergarten and how to best implement them.
- ☐ Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being. Describe: \_\_\_\_\_
- ☐ Coordinating with child care health consultants. Describe: \_\_\_\_\_

- ☒ Coordinating with mental health consultants. Describe: [The OEL coordinates initiatives with the Florida Association for Infant Mental Health. This partnership is currently developing a plan for the early learning coalitions' coaches to work toward infant mental health specialist endorsement.](#)
- ☐ Other. Describe: \_\_\_\_\_

7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures. [In 2018, the state legislature passed HB 1091 which directs the OEL to have a system that gathers all available child assessment data into one warehouse. The OEL will use this aggregate data to evaluate the quality of providers/teachers that correlate with each child. In FY 18-19, the OEL will gather CLASS assessment data for School Readiness Program providers to measure the quality of teacher-child interactions. The statewide data growth indicates success in quality improvement efforts. This data will be used to drive decisions on targeted support plans for this age group.](#)

## 7.6 Child Care Resource and Referral

A Lead Agency may expend funds to establish or expand a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

7.6.1 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. [See 7.1.1 and 7.4.6. Additionally, the CCR&R State Network serves two fundamental purposes: \(1\) to help parents identify and select quality early learning programs that best meet their children's needs, and \(2\) to provide technical assistance that addresses and improves the quality, availability and affordability of child care. Another way this is accomplished is through the provision of information and resources about quality early learning options and work/family solutions to families, child care professionals, and government entities. Each CCR&R program maintains a database of all legally operating child care providers within its service area. The CCR&R database contains licensed, license-exempt, faith-based, registered family child care homes, Head Start, Early Head Start and Migrant and Seasonal Head Start, and other non- traditional child care providers, which includes summer camps, afterschool programs and membership organizations, such as Boys and Girls Clubs. This database is the primary data source for families searching for child care arrangements and provides parents with information about providers that participate in a quality improvement program. The data also supports local businesses by serving as advertisement for child care service providers. Each family who contacts CCR&R for information is offered a listing of child care providers that meet that family's individual needs, suggestions on how the family can proceed with their search for a child care provider, access to state child care licensing information, as well as inspection reports, and an invitation to call back if further assistance is needed. Families are also provided with access to](#)



[electronic or printed consumer education to assist in their search for quality care. The CCR&R State Network tracks the number of referrals/provider listings provided to families, which include specific information regarding providers that participate in state or local quality improvement systems. Additionally, the OEL supports the quality improvement of providers through our state quality improvement system and initiatives \(see section 7.8 for a detailed description of each\).](#)

## **7.7 Facilitating Compliance with State Standards**

- 7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards? Describe: [The OEL funds child care health and safety inspection activities that ensure the health and safety of children in School Readiness child care settings through a set of minimum health and safety standards, to include training for child care personnel in licensed or license-exempt child care settings. The Department of Children and Families, by policy, conducts a minimum of three licensing inspections per year for facilities and two licensing inspections per year for homes. The licensing inspection template for facilities has a checklist, which corresponds with the minimum standards established in s. 402.302-402.319, Florida Statutes and Chapter 65C-22, Florida Administrative Code \(F.A.C.\) and for homes there is a checklist, which corresponds with the minimum standards established in s. 402.302-402.319, Florida Statutes and Chapter 65C-20, F.A.C. During each inspection visit, licensing staff have one-on-one time with the provider and can answer questions, offer technical assistance, provide updates regarding rule or policy changes, identify violations and make suggestions on how to come back into compliance. Licensing staff are required to document all violations observed at the time of inspection on the report \(even those items that are corrected at the time of the inspection visit\). Each noncompliance item cited requires a "due date" to be entered and a follow-up re-inspection must be completed at another date when the violation has been corrected. If a provider corrects a violation at the time of the inspection, this is notated on the inspection report "corrected at time of inspection" in place of the "due date" and does not require a re-inspection. These violations of licensing standards are still documented in the inspection report as being noncompliant. The Department's database system captures violations from inspection reports and generates a matrix for each provider. The Department's progressive enforcement system dictates administrative action procedures for three classification levels of violation occurrences. This system is a gradual approach to disciplinary action -- beginning with Technical assistance and Administrative Warning Notices and leading up to Administrative Fines and/or Suspension/Revocation of the provider's license. The system is ideal for ensuring consistent consequences and for encouraging providers to comply with minimum standard requirements. The above described inspection process is not applicable to license exempt facilities or registered family day care homes. The state is seeking legislative authority to establish and implement health and safety standards for license exempt providers and the ability to ensure compliance for protection of children in all child care arrangements that receive CCDF funding. License exempt facilities or registered family day care homes that receive CCDF funding are inspected a minimum of one time per year. A checklist is used for inspection of license exempt facilities and registered family day care homes, which correspond with the minimum standards established in s. 1002.81 – 1002.97, F.S. and Chapter 6M-4.620, F.A.C.](#)

7.7.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?

☒ No

☐ Yes. If yes, which types of providers can access this financial assistance?

☐ Licensed CCDF providers

☐ Licensed non-CCDF providers

☐ License-exempt CCDF providers

☐ Other. Describe: \_\_\_\_\_

7.7.3 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. [The process for health and safety monitoring and inspections allows the OEL, the Department of Children and Families and the ELCs to consistently monitor compliance with health and safety and ensure that providers who are not meeting minimum health and safety standards are not eligible to serve children in the program. Additionally, the inspection and monitoring process targets technical assistance to providers as they work to improve the overall health and safety of children. Additionally, this process helps inform parents on levels of health and safety by making violation and compliance records available through the public-facing provider profile.](#)

## 7.8 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services in both child care centers and family child care homes currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children. [School Readiness Curriculum Approval - Legislation requires the Office of Early Learning to adopt a list of approved curricula that meet Florida's Early Learning and Developmental Standards: Birth - Kindergarten and to establish a process for reviewing and approving curriculum to assess whether it meets the standards. School Readiness programs are required to implement an approved curriculum from this list. They are monitored for this requirement. Voluntary Pre and Post Child Assessments – The OEL has created an approved list of pre- and post-assessment tools that early learning providers can select from to implement in their programs. The list includes TS Gold, ATI's Galileo and HighScope COR. These tools are valid, reliable, and developmentally appropriate, are designed to measure progress in the domains of the Florida Early Learning Performance Standards, provide appropriate accommodations for children with disabilities and English language learners, and are user friendly. The assessments also aid in communication with families, provide stakeholders with a way to measure children's developmental gains, and document growth and development information about children in the School Readiness Program. Approximately 73% of early learning providers in Florida use standardized child assessment instruments. Program Assessment – Since July of 2012, the Office of Early Learning has been providing a voluntary statewide capacity-building Classroom Assessment Scoring System™ \(CLASS™\) Initiative offering CLASS trainings to early learning coalition staff, Head Start/Early Head Start staff, OEL staff, training partners and early education provider association representatives. Due to overwhelming positive feedback from Florida's](#)

[early learning professionals and providers, OEL continues to provide additional CLASS™ training and support services to our thirty Early Learning Coalitions.](#)

- 7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures. [The overall measures of the quality improvement system evaluation are: quantitative CLASS score growth; child outcome growth; teacher knowledge increase; accreditation impacts on quality improvement; and qualitative: teacher skill implementation; teacher awareness; and overall teacher experience. FY 2017-18 will be the last of four years of evaluation. In the upcoming years, the OEL will continue to use these indicators to guide the system structures and supports. Program Assessment - In 2018 the state legislature passed HB 1091, which directs the OEL to have a system that gathers all available child assessment data into one warehouse. Additionally, the state monitors providers to ensure they are meeting quality standards such as curriculum implementation. In FY 18-19, the OEL will gather CLASS assessment data for School Readiness Program providers to measure the quality of teacher-child interactions. The statewide data growth indicates success in quality improvement efforts.](#)

## 7.9 Accreditation Support

- 7.9.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?
- ☒ Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation. [Early learning coalitions provide grants for providers working towards accreditation. The OEL uses the availability of Gold Seal Accreditation funding to incentivize providers' completion of this process.](#)
  - ☐ Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers. Describe:
  - ☐ Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care. Describe:
  - ☐ Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide.
    - ☐ Focused on child care centers. Describe:
    - ☐ Focused on family child care homes. Describe:
  - ☐ No, but the state/territory is in the accreditation development phase.
    - ☐ Focused on child care centers. Describe:
    - ☐ Focused on family child care homes. Describe:
  - ☐ No, the state/territory has no plans for accreditation development.

- 7.9.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. [The OEL evaluates the amount of providers receiving the Gold Seal funding to assess the growth in accreditation numbers. Accreditation is assessed in the quality improvement system evaluation to determine the impacts of accreditation on quality improvement.](#)

## **7.10 Program Standards**

- 7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children. [Providers are required to implement an approved, developmentally appropriate curriculum, which covers best practices for supporting the child's development in the domains of health, mental health, physical activity and physical development. In 2018 the state legislature passed HB 1091 which directs the OEL to have a system that gathers all available child assessment data into one warehouse. In FY 18-19, the OEL will gather CLASS assessment data for School Readiness Program providers to measure the quality of teacher-child interactions. The statewide data growth indicates success in quality improvement efforts. This data is used to drive decisions on targeted support plans for this age group.](#)
- 7.10.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. [Monitoring efforts are done to ensure that providers are implementing an approved, developmentally appropriate curriculum which supports these domains. CLASS assessment data.](#)

## **7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities**

- 7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)). [Providers are required to implement an approved, developmentally appropriate curriculum, which covers best practices for supporting the child's development in the domains of health, mental health, physical activity and physical development. Additionally, health and safety standards address program standards to cover each of these content areas. In 2018 the state legislature passed HB 1091 which directs the OEL to have a system that gathers all available child assessment data into one warehouse. The OEL will use this aggregate data to evaluate the quality of provider's/teachers that correlate with each child. This data will be used to monitor the child outcomes achieved in alignment with the early learning guidelines.](#)
- 7.11.2 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities, and also describe the measureable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or

kindergarten entry and the data on the extent to which the state or territory has met these measures. Describe: [Equity Taskforce - The task force was created in November 2016 and has approximately 40 members from the OEL and the ELCs. On May 24th, professionals from the Erickson Institute and Build Initiative conducted a training on equity for the task force and OEL executive and extended leadership. The task force will combine input from each member of the task force for the identification of goals and tools to create a set of best practices and policies that support and promote equitable change in how we serve children, families, providers and communities.](#)

## 8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity, and accountability apply to:

- Memorandums of understanding (MOUs) within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF
- MOUs, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF
- Grants or contracts to other organizations that administer or carry out various aspects of CCDF, such as professional development and family engagement activities
- Internal processes for conducting child care provider subsidy

### 8.1 Internal Controls and Accountability Measures to Help Ensure Program Integrity

8.1.1 Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity. Check all that apply:

- ☒ Train on policy manual. Describe: [The OEL has created an implementation team for all policy and procedure changes reflecting the new CCDF requirements. The implementation team meets internally and with DCF on a bi-weekly basis. Updates and progress on meeting the new requirements are provided at internal staff meetings and quarterly meetings with the coalitions and RCMA. Through supervision, management oversight and meetings, OEL will ensure all staff and subrecipients are informed of any updated policy and procedure. As existing monitoring protocols are revised to reflect the policy and procedure changes, OEL accountability stakeholders \(OEL policy and monitoring staff; and coalition staff\) are trained and oriented to provide assurance of a](#)

successful implementation. OEL CCDF policy staff also conduct periodic trainings with coalitions and RCMA on CCDF requirements.

- ☐ Train on policy change notices. Describe: \_\_\_\_\_
- ☒ Ongoing monitoring and assessment of policy implementation. Describe: Each year OEL has a process in place to review all program guidance each year and update as required. This process extends to existing rules when any state or federal legislation is passed. Additionally, the grant agreement (between OEL and coalitions and contractors) are reviewed each year and updates are made as needed. OEL also coordinates routinely each program year with DCF to ensure staff is aware of updates/revisions to federal/state grant program definitions. Both agencies also comply with rule workshop requirements, which encourage public participation and input from local providers. OEL staff routinely review CCDF-related correspondence from USDHHS/ACF. OEL revise processes to reflect any new CCDF requirements. Program Integrity Activities include, on an as needed basis, (1) revision of standardized statewide provider contracts for informal, licensed and licensed-exempt providers, (2) revision of the standardized provider contract monitoring tool, and (3) revision of the rule for standardized coalition School Readiness plan requirements. These documents all work together to provide consistent and timely information to local early learning coalitions and program providers about definitions, mandatory annual monitoring processes and instructions for responding to parental complaints. The program guidance standards provided in these documents allow/require reporting of intentional and unintentional program violations. Finally, the Accountability and Fiscal monitoring sections of the Program Integrity unit conduct biennial monitoring engagements of all coalitions and OEL contractors.
- ☐ Other. Describe:

8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:

- ☒ Verifying and processing billing records to ensure timely payments to providers. Describe: 45 CFR § 75.305(b) requires that payment methods minimize the time elapsing between the transfer of funds from the U.S. Treasury and the disbursement of payments by OEL, a coalition, or other subrecipient. OEL enters into grant agreements with Early Learning Coalitions and a contract with RCMA that require these entities to fully implement the EFT system for efficient and timely payment processing. Under the terms and conditions of the grant agreements/contract, Coalitions and RCMA are required to make payments to School Readiness (CCDF) Child Care Providers within twenty-one (21) calendar days of the close of each month for services rendered during the prior month except as provided under law or contract. In order to ensure Coalitions and RCMA have sufficient School Readiness (SR) funds to make timely payments to providers, the Coalitions and RCMA may request approval for release of advanced funds

based on the projected cash needs. A cash advance of SR funds to a coalition or RCMA must be limited to the minimum amount needed and must be timed in accordance with the actual, immediate cash requirements of the coalition in carrying out the purpose of the SR program 45 CFR § 75.305(b)(1); 45 CFR § 98.60(f). The timing and amount of a cash advance must be as close as administratively feasible to the actual disbursements by the coalition for direct program or project costs and the proportionate share of any allowable indirect costs per 45 CFR § 75.305(b)(1).

☒ **Fiscal oversight of grants and contracts. Describe:**

**Use of uniform chart of accounts.** Coalitions are required to use a uniform chart of accounts for reporting budget, revenue, and expenditure. OEL staff review annual budget, revenue, and expenditure reporting to ensure reporting of costs in accordance with the uniform chart of accounts, and in compliance with targeted funds and restrictions.

**Prior approval of selected cost items.** OEL has established a prior approval process that requires Coalitions and other direct subrecipients to obtain prior approval from OEL for applicable administrative requirements and cost items identified in 2 CFR §200 and 45 CFR §75. Coalitions and other direct subrecipients maintain supporting documentation evidencing prior approval when obtained to avoid future disallowance of costs.

**Completion of monthly invoice workbooks.** Coalitions are required to submit monthly reimbursement requests to OEL using a standardized electronic-based invoice workbook. OEL checks submitted invoice details against each entity's detailed general ledger transactions. OEL staff also verifies spending levels for administrative, non-direct, quality, direct childcare payments, and advance reconciliations for each program year to ensure each entity meets spending minimums from program guidance and related spending caps are not exceeded.

**Analytics for internal controls.** OEL requires each subrecipient complete and submit for review an annual internal control questionnaire (ICQ). This self-assessment tool helps evaluate/document the system of sound processes and procedures that exist within their organizations. Written policies and procedures are required for each necessary function (operations, IT, etc.), and each non-federal entity must -

- Correlate expenditures detail with specific program activities. <sup>1</sup>
- Complete self-assessment of grants management systems, of policies and procedures and proper recordkeeping requirements. <sup>2</sup>
- Establish and maintain effective control over the federal award(s).
- Evaluate and monitor its own compliance with federal/state statutes, regulations and the terms/conditions of the federal awards).
- Take prompt action when instances of noncompliance are identified, including noncompliance identified in audit findings.
- Take reasonable measures to safeguard personally identifiable information (PII) and protected personal identifiable information (PPII).

<sup>1</sup>Federal requirement is addressed and documented by the state's current OCA-based accounting system.



<sup>2</sup>Partial documentation of federal requirements is provided by OEL's annual ICQ process. **Fiscal monitoring procedures for OEL subrecipients.** OEL is responsible for ensuring that all federal, state and private funds used for Florida's early learning programs comply with federal and state laws and regulations. One of many tasks performed by OEL to meet its oversight and monitoring responsibilities includes onsite fiscal monitoring visits for the ELCs and other OEL subrecipients. OEL identifies key fiscal operating areas and scoped tests to inspect and sample detailed transactions for each subrecipient entity. The monitoring team performs the scoped tests and shares draft results with each entity's management staff while onsite. A monitoring report is prepared to describe the findings, observations and related corrective actions from OEL. Each entity submits a preventive/corrective action plan reply to OEL, and OEL staff perform follow-up tasks to ensure the intended corrections are made. OEL staff also offers additional technical assistance efforts on an as-needed basis.

- ☒ Tracking systems to ensure reasonable and allowable costs. Describe:

**Use of other cost accumulator codes (OCAs) for reporting costs.** To properly classify expenditures for federal reporting purposes under 45 CFR Part 98.70 and for day-to-day operations of a coalition or other OEL subrecipients, it is necessary to utilize a consistent and reliable cost accounting system to report program costs incurred in an organized and systematic manner. OEL established OCA definitions for use by ELCs and other subrecipients or contractors to do this. The OCA guidance includes definitions for allowable costs, specific examples, the related federal/state regulations or state statutes and other relevant instructions to help OEL ensure consistency for federal reporting of costs and related performance objectives. These codes are also grouped into sub-categories for direct services, quality activities, other non-direct service expenditures and administrative costs.

**Use of monthly budgeting/forecasting tools.** OEL staff performs monthly reviews of all coalition expenditure projections within the School Readiness expenditure projection tool within the School Readiness Invoice Workbook. Coalitions are required to utilize this tool, which includes administrative, non-direct, quality, direct childcare payments, and advance reconciliation for each program year.

**Desk reviews to track costs.** OEL staff perform desk reviews on selected coalition expenditures to determine the allowability of reimbursed expenditures as a compliment to the monthly invoice submission process and annual financial monitoring activities. These desk reviews select a limited number of sample items from administrative, quality and other non-direct service expenditures.

- ☒ Other. Describe: The following procedures are in place to ensure changes made to grant awards and contracts are completed and shared on a timely basis with OEL staff and other entities that administer the CCDF program.

- OEL performs routine grant award review/updates each program year.

- [OEL maintains a dedicated network site for grant awards and contracts available to all subrecipients with copies of federal regulations, state statutes and other program guidance, reference materials and template tools.](#)
- [OEL staff attend, conduct and/or coordinate periodic training on Uniform Grant Guidance topics. OEL ensures these events allow participation of staff from all OEL subrecipients.](#)
- [OEL conducts other webinars, phone conferences and/or group and in-person training updates each program year, with participation by all subrecipients encouraged.](#)
- [OEL performs follow-up tasks and provides additional technical assistance to individual subrecipients as requested or as needed.](#)

[Review of entity federal/state single audit reports. OEL staff also perform annual financial statement audit report reviews to ensure consideration of other reporting mechanisms for sound financial management processes of OEL subrecipients. OEL units share the review results as needed to assist with any annual/periodic risk assessment processes.](#)

**[Conclusion:](#)** [GAAP compliance processes are in place at OEL. OEL’s described processes help address basic accounting principles and guidelines that include, but may not be limited to the following.](#)

- [Cost principles](#)
- [Full disclosure principle](#)
- [Going concern principle](#)
- [Matching principle](#)
- [Revenue recognition principle](#)
- [Materiality Conservatism](#)
- [Other characteristics for accounting information to be](#)
  - [Reliable, verifiable and objective](#)
  - [Consistently disclosed](#)
- [Comparably presented](#)

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:

- ☒ Conduct a risk assessment of policies and procedures. Describe: [The following periodic processes occur to analyze risks for CCDF program policies and procedures.](#)
  - [1. OEL staff perform ongoing/routine reviews of applicable federal/state grant program laws, rules and regulations.](#)
  - [2. OEL staff compile/review all proposed updates/edits each March – May for accuracy and completeness.](#)
  - [3. OEL shares proposed updates and edits in “draft” form with OEL subrecipients. An additional questions/comments period is available each program year.](#)
  - [4. OEL prepares and shares a summary of material changes each program year with](#)

subrecipients. If multiple issues/changes happen, OEL may prepare an additional “cross-walk” file to offer more help.

5. When policy updates affect an entity’s SR plan disclosures, OEL staff provide additional instructions and offer specialized technical assistance as needed to each impacted entity.

OEL conducts other webinars, phone conferences and/or group and in-person training updates each program year, with participation by all subrecipients encouraged.

- ☒ Establish checks and balances to ensure program integrity. Describe: The following checks and balances to ensure program integrity are in place and shared on a timely basis with OEL staff and other entities that administer the CCDF program. OEL staff perform ongoing/routine reviews of applicable federal/state grant program laws, rules and regulations.

1. Program Integrity Unit – Accountability Unit programmatic monitoring activities.

2. Program Integrity Unit – fiscal monitoring activities.

3. Program Integrity Unit – Policy.

4. Financial Administration and Budget Services (FABS) – periodic desk reviews.

- ☒ Use supervisory reviews to ensure accuracy in eligibility determination. Describe: Each Early Learning Coalition must submit its school readiness plan, which includes the coalition’s policies and procedures, to the Office for approval. Each early learning coalition shall submit an electronic copy of its proposed school readiness plan to the Office of Early Learning (OEL) within 30 days of board approval and before implementation. OEL shall base its approval, rejection, or approval with conditions on the coalition’s compliance with Chapter 1002, Part VI, F.S., the federal Child Care and Development Fund (CCDF) Block Grant Florida State Plan, the federal CCDF regulations located at Title 45 Code of Federal Regulations Part 98, Subparts B through G and K and the School Readiness Plan Guide. The coalition shall not implement school readiness plans or amendments without the express written approval of OEL. Rule, 6M-9.115, FAC. Also, the coalition or its designee must conduct internal file monitoring activities to ensure the accuracy of eligibility determinations. Rule 6M-4.208, FAC

- ☒ Other. Describe: The following additional risk assessment processes are in and performed on a timely basis by OEL staff for other entities that administer the CCDF program.

**Annual and periodic risk assessments.** OEL evaluates and documents the results of each subrecipient’s risk of noncompliance at various stages during each program year.

Assessment activities include (1) preliminary/ planning assessments, (2) periodic updates during the year and (3) post-award risk analysis tasks. OEL shares analysis results across all OEL units to help support targeted of monitoring activities and program resources. Risk factors include, but are not limited to, the following: - Total award/contract values or special project funding; - Recent results for entity operations (deficits, changes in service models, personnel turnover, etc.); - Timeliness and accuracy of reporting or required filings; - Independent audit coverage/audit issues noted; -

History of recent and/or repeated monitoring findings; - Findings from other oversight bodies or other OEL units; - Internal control environment, general operating conditions or other noted concerns.

8.1.4 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

- a) Check and describe all activities that the Lead Agency conducts to identify and prevent fraud or intentional program violations. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations. Include a description of the results of such activity.
- ☐ Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)). Describe: [REDACTED]
  - ☒ Run system reports that flag errors (include types). Describe: [The following statewide information system reports are currently generated: Gold Seal Edit Report, School Readiness Duplicate Record, CCRR Standard Code Edit Report, CCMS Standard Code Edit Report, CRLV Care Level Standard Code Edit Report, OCA Standard Code Edit Report, Purpose for Care Report, Childs age => 13 excludes, SN Teens, Active SR files with SSA/SSI income, Type Standard Code Edit Report, Care Level Too Low for Age, FTFT \(extended hours\) Childcare, Total Family Income Exceeds 85% SMI, Provider Cleansing Report, Parent Cleansing Report, Over 20 - Payment Days Greater Than Total Work Days. The OEL will be deploying an enhanced version of the statewide information system that will reduce the number of system reports needed to flag errors. Since this enhanced version will be supported by one database \(instead of individual coalition databases\), duplicate records and payments will be flagged immediately.](#)
  - ☒ Review enrollment documents and attendance or billing records. Describe: [Coalitions are required to conduct post attendance monitoring of provider reimbursement submissions. OEL conducts biennial monitoring of coalitions and RCMA that includes review of eligibility determinations and payment validation for post attendance monitoring done by the coalitions and RCMA.](#)
  - ☒ Conduct supervisory staff reviews or quality assurance reviews. Describe: [Rule 6M-4.208\(1\), Florida Administrative Code \(F.A.C.\), requires that the coalition or its designee must conduct internal file monitoring activities to ensure the accuracy of eligibility determinations. OEL conducts biennial monitoring of coalitions and RCMA](#)

that includes review of eligibility determinations and payment validation for post attendance monitoring done by the coalitions and RCMA.

- ☒ Audit provider records. Describe: Coalitions are required to conduct post attendance monitoring of provider reimbursement submissions. OEL conducts biennial monitoring of coalitions and RCMA that includes review of eligibility determinations and payment validation for post attendance monitoring done by the coalitions and RCMA.
- ☒ Train staff on policy and/or audits. Describe: OEL monitoring and CCDF policy staff are continuously internally trained on CCDF policy and audits beginning on the first day of employment. Staff also participate (on a regular basis) in external trainings on contract management, audit/monitoring practices, and uniform grant guidance. Additionally, several of the monitoring/policy team staff are Florida Certified Contract Managers which is a professional designation that has to be renewed every four (4) years.
- ☒ Other. Describe: In accordance with Rules 6M-4.610 and 6M-4.630, F.A.C., all school readiness providers shall be monitored by a coalition using Form OEL-SR-20M (this also applies to RCMA). This contract monitoring tool shall also be used by a coalition to monitor a school readiness program provider in response to a parental complaint. Using the monitoring tool form OEL-SR 20M, the coalition shall monitor a random sample of all of its contracted SR program providers, regardless of provider type (including school district SR programs) on an annual basis. The coalition's monitoring plan may be developed to monitor 100% of its SR program providers annually.

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.

- ☐ Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS). Describe: \_\_\_\_\_
- ☒ Run system reports that flag errors (include types). Describe: The following statewide information system reports are currently generated: Gold Seal Edit Report, School Readiness Duplicate Record, CCRR Standard Code Edit Report, CCMS Standard Code Edit Report, CRLV Care Level Standard Code Edit Report, OCA Standard Code Edit Report, Purpose for Care Report, Childs age => 13 excludes, SN Teens, Active SR files with SSA/SSI income, Type Standard Code Edit Report, Care Level Too Low for Age, FTFT (extended hours) Childcare, Total Family Income Exceeds 85% SMI, Provider Cleansing Report, Parent Cleansing Report, Over 20 - Payment Days Greater Than Total Work Days. The OEL will be deploying an enhanced version of the statewide information system that will reduce the number of system reports needed to flag errors. Since this enhanced version will be

supported by one database (instead of individual coalition databases), duplicate records and payments will be flagged immediately.

- ☒ Review enrollment documents and attendance or billing records. Describe: Coalitions are required to conduct post attendance monitoring of provider reimbursement submissions. OEL conducts biennial monitoring of coalitions and RCMA that includes review of eligibility determinations and payment validation for post attendance monitoring done by the coalitions and RCMA.
- ☒ Conduct supervisory staff reviews or quality assurance reviews. Describe: Rule 6M-4.208(1), F.A.C., requires that the coalition or its designee must conduct internal file monitoring activities to ensure the accuracy of eligibility determinations. OEL conducts biennial monitoring of coalitions and RCMA that includes review of eligibility determinations and payment validation for post attendance monitoring done by the coalitions and RCMA.
- ☒ Audit provider records. Describe: Coalitions are required to conduct post attendance monitoring of provider reimbursement submissions. OEL conducts biennial monitoring of coalitions and RCMA that includes review of eligibility determinations and payment validation for post attendance monitoring done by the coalitions and RCMA.
- ☒ Train staff on policy and/or audits. Describe: OEL monitoring and CCDF policy staff are continuously internally trained on CCDF policy and audits beginning on the first day of employment. Staff also participate (on a regular basis) in external trainings on contract management, audit/monitoring practices, and uniform grant guidance. Additionally, several of the monitoring/policy team staff are Florida Certified Contract Managers which is a professional designation that has to be renewed every four (4) years.
- ☒ Other. Describe: In accordance with Rule 6M-4.610 and Rule 6M-4.630, FAC, all school readiness providers shall be monitored by a coalition using Form OEL-SR-20M (this also applies to RCMA). This contract monitoring tool shall also be used by a coalition to monitor a school readiness program provider in response to a parental complaint. Using the monitoring tool form OEL-SR 20M, the coalition shall monitor a random sample of all of its contracted SR program providers, regardless of provider type (including school district SR programs) on an annual basis. The coalition's monitoring plan may be developed to monitor 100% of its SR program providers annually.

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

- ☐ Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS). Describe: [REDACTED]

- ☒ Run system reports that flag errors (include types). Describe: [The following statewide information system reports are currently generated: Gold Seal Edit Report, School Readiness Duplicate Record, CCRR Standard Code Edit Report, CCMS Standard Code Edit Report, CRLV Care Level Standard Code Edit Report, OCA Standard Code Edit Report, Purpose for Care Report, Childs age => 13 excludes, SN Teens, Active SR files with SSA/SSI income, Type Standard Code Edit Report, Care Level Too Low for Age, FTFT \(extended hours\) Childcare, Total Family Income Exceeds 85% SMI, Provider Cleansing Report, Parent Cleansing Report, Over 20 - Payment Days Greater Than Total Work Days. The OEL will be deploying an enhanced version of the statewide information system that will reduce the number of system reports needed to flag errors. Since this enhanced version will be supported by one database \(instead of individual coalition databases\), duplicate records and payments will be flagged immediately.](#)
- ☒ Review enrollment documents and attendance or billing records. Describe: [Coalitions are required to conduct post attendance monitoring of provider reimbursement submissions. OEL conducts biennial monitoring of coalitions and RCMA that includes review of eligibility determinations and payment validation for post attendance monitoring done by the coalitions and RCMA.](#)
- ☒ Conduct supervisory staff reviews or quality assurance reviews. Describe: [Rule 6M-4.208\(1\), F.A.C., requires that the coalition or its designee must conduct internal file monitoring activities to ensure the accuracy of eligibility determinations. OEL conducts biennial monitoring of coalitions and RCMA that includes review of eligibility determinations and payment validation for post attendance monitoring done by the coalitions and RCMA.](#)
- ☒ Audit provider records. Describe: [Coalitions are required to conduct post attendance monitoring of provider reimbursement submissions. OEL conducts biennial monitoring of coalitions and RCMA that includes review of eligibility determinations and payment validation for post attendance monitoring done by the coalitions and RCMA.](#)
- ☒ Train staff on policy and/or audits. Describe: [OEL monitoring and CCDF policy staff are continuously internally trained on CCDF policy and audits beginning on the first day of employment. Staff also participate \(on a regular basis\) in external trainings on contract management, audit/monitoring practices, and uniform grant guidance. Additionally, several of the monitoring/policy team staff are Florida Certified Contract Managers which is a professional designation that has to be renewed every four \(4\) years.](#)
- ☒ Other. Describe: [In accordance with Rule 6M-4.610 and Rule 6M-4.630, F.A.C., all school readiness providers shall be monitored by a coalition using Form OEL-SR-20M \(this also applies to RCMA\). This contract monitoring tool shall also be used by a coalition to monitor a school readiness program provider in response to a parental complaint. Using the monitoring tool form OEL-SR 20M, the coalition shall monitor](#)



a random sample of all of its contracted SR program providers, regardless of provider type (including school district SR programs) on an annual basis. The coalition's monitoring plan may be developed to monitor 100% of its SR program providers annually.

8.1.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

a) Check and describe all activities that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- ☒ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: There is \$0.00 threshold for each instance of fraud or intentional program violations, especially if there is court-ordered restitution. OEL sets a reporting materiality threshold of \$50 per each instance of Unintentional Program Violations (UPV) that result in improper payments. For UPV improper payments less than \$50 per each instance, OEL does not require recovery. However, OEL does require that early learning coalitions implement corrective actions, at the point of discovery, to mitigate any future improper payments. This also includes review of operations for a review period to determine if other similar improper payments may have occurred. It will be the early learning coalition's discretion to recover UPV improper payments that are less than \$50 per instance. An instance is operationally defined as an observation of an unintentional program error (UPV) made for a unique customer for the child's current annual eligibility period or child care provider transaction, during a contract year, that results in an improper overpayment or underpayment of early learning funds.
- ☒ Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency). Describe: The OEL Office of Inspector General (OIG) refers suspected fraud cases to the Florida Department of Financial Services, Division of Public Assistance Fraud (DPAF) for criminal investigation.
- ☐ Recover through repayment plans. Describe: \_\_\_\_\_
- ☐ Reduce payments in subsequent months. Describe: \_\_\_\_\_
- ☐ Recover through state/territory tax intercepts. Describe: \_\_\_\_\_
- ☐ Recover through other means. Describe: \_\_\_\_\_
- ☒ Establish a unit to investigate and collect improper payments and describe the composition of the unit below. Describe: OEL has an Office of Inspector General (OIG), which consists of an Inspector General and an OIG Analyst. The mission of the OIG is to protect and promote public integrity and accountability within the Office of Early Learning (OEL) through audits and investigations that detect fraud, waste and abuse, and administrative violations. The OIG also administers the public

assistance fraud referral process for OEL and coordinates the process with external partners to ensure maximum efficiency. The OIG does not collect improper payments. Section 1002.91(8), F.S., also requires the local early learning coalitions to adopt an anti-fraud plan, to be approved by OEL's OIG. Rule 6M-9.400, F.A.C., further delineates the responsibilities of coalitions when implementing their anti-fraud plans. The anti-fraud plan must be approved by the coalition board prior to submission to OEL no later than June 30 of each year. OEL will process the plan no later than September 1 of each year and shall notify the coalition in writing of approval or disapproval and the reasons for disapproval. If disapproved, a corrected plan shall be submitted no later than November 1 of each year. Additionally, coalitions have identified personnel with the responsibility of fraud prevention and detection in accordance with their approved anti-fraud plan. Also, each coalition and RCMA are responsible for fraud prevention at the local level and have designated staff that assist with fraud prevention, detection and investigation.

- ☒ Other. Describe: For Intentional Program Violations (IPVs), s. 1002.84(17), F.S., requires OEL to implement an anti-fraud plan to address the detection, reporting and prevention of overpayment, abuse and fraud relating to the provision of and payment for the School Readiness Programs. Section 1002.91(8), F.S., also requires the local early learning coalitions to adopt an anti-fraud plan, to be approved by OEL, which addresses the items previously mentioned above. Rule 6M-9.400, FAC, further delineates the responsibilities of coalitions when implementing their anti-fraud plans. The anti-fraud plan must be approved by the coalition board prior to submission to OEL's Office of Inspector General no later than June 30 of each year. OEL will process the plan no later than September 1 of each year and shall notify the coalition in writing of approval or disapproval and the reasons for disapproval. If disapproved, a corrected plan shall be submitted no later than November 1 of each year.

- b) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- ☒ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: OEL sets a reporting materiality threshold of \$50 per each instance of Unintentional Program Violations (UPV) that result in improper payments. For UPV improper payments less than \$50 per each instance, OEL does not require recovery. However, OEL does require that early learning coalitions implement corrective actions, at the point of discovery, to mitigate any future improper payments. This also includes review of operations for a review period to determine if other similar improper payments may have occurred. It will be the early learning coalition's discretion to recover UPV improper

payments that are less than \$50 per instance. OEL sets an aggregate of instances threshold of \$150 dollars per monitoring sample. An instance is operationally defined as a singular observation of an unintentional program error (UPV) made for a unique customer or child care provider transaction, during a unique monthly billing/payment period, that results in an improper overpayment or underpayment of early learning funds. The aggregate of instances is operationally defined as the sum of all observed UPVs identified in a sample of customer or child care provider transactions, during a unique monthly billing/payment period, that results in improper overpayments or underpayments of early learning funds.

- ☒ Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency). Describe: By way of OEL's fiscal and programmatic monitoring sections, observations of improper payments that are discovered during biennial monitoring engagements are compiled and sent to coalitions and the RCMA via monitoring reports. Recovery of improper payments that are caused by UPVs or administrative errors is typically done at the local early learning coalition level in accordance with OEL Program Guidance 240.01 and Rule 6M-4.400 , F.A.C., which instructs the coalitions how to manage funding when addressing audit and monitoring disallowances, refunds and court ordered restitution. Improper payments are then forwarded to OEL, if applicable.
- ☒ Recover through repayment plans. Describe: Recovery of UPV improper payments is typically done at the coalition level. Improper payments made to child care providers is recovered through offsetting subsequent reimbursements (adjusting) for the improper payment amount (if the provider is still under contract). A provider may request that adjustments be made through repayment a plan.
- ☒ Reduce payments in subsequent months. Describe: Recovery of UPV improper payments is typically done at the coalition level. Improper payments made to child care providers is recovered through offsetting subsequent reimbursements (adjusting) for the improper payment amount (if the provider is still under contract). A provider may request that adjustments be made through reducing the amount of subsequent reimbursements until the improper payment is reconciled.
- ☐ Recover through state/territory tax intercepts. Describe: \_\_\_\_\_
- ☐ Recover through other means. Describe: \_\_\_\_\_
- ☒ Establish a unit to investigate and collect improper payments. Describe: By way of OEL's fiscal and programmatic monitoring sections, observations of improper payments that are discovered during biennial monitoring engagements are compiled and sent to coalitions and the RCMA via monitoring reports. Also, under the statewide information system, the programmatic monitoring section reviews system generated reports that identify potential errors that could result in UPVs. If improper payments are validated via the monitoring reports or the statewide information system generated reports, coalitions and the RCMA are required to recovery all overpayments that are feasible.

☐ Other. Describe:

c) Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

- ☒ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: OEL sets a reporting materiality threshold of \$50 per each instance of Unintentional Program Violations (UPV) that result in improper payments. For UPV improper payments less than \$50 per each instance, OEL does not require recovery. However, OEL does require that early learning coalitions implement corrective actions, at the point of discovery, to mitigate any future improper payments. This also includes review of operations for a review period to determine if other similar improper payments may have occurred. It will be the early learning coalition's discretion to recover UPV improper payments that are less than \$50 per instance. OEL sets an aggregate of instances threshold of \$150 dollars per monitoring sample. An instance is operationally defined as a singular observation of an unintentional program error (UPV) made for a unique customer or child care provider transaction, during a unique monthly billing/payment period, that results in an improper overpayment or underpayment of early learning funds. The aggregate of instances is operationally defined as the sum of all observed UPVs identified in a sample of customer or child care provider transactions, during a unique monthly billing/payment period, that results in improper overpayments or underpayments of early learning funds.
- ☒ Coordinate with and refer to the other state/territory agency(ies) (e.g., state/territory collection agency, law enforcement agency). Describe: Recovery of improper payments that are caused by UPVs or administrative errors is typically done at the local early learning coalition level in accordance with OEL Program Guidance 240.01 and Rule 6M-4.400 , F.A.C., which instructs the coalitions how to manage funding when addressing audit and monitoring disallowances, refunds and court ordered restitution. Improper payments are then forwarded to OEL, if applicable.
- ☐ Recover through repayment plans. Describe: \_\_\_\_\_
- ☒ Reduce payments in subsequent months. Describe: Recovery of improper payments that are caused by UPVs or administrative errors is typically done at the local early learning coalition level in accordance with OEL Program Guidance 240.01 and Rule 6M-4.400 , F.A.C., which instructs the coalitions how to manage funding when addressing audit and monitoring disallowances, refunds and court ordered restitution. Improper payments are then forwarded to OEL, if applicable.
- ☐ Recover through state/territory tax intercepts. Describe: \_\_\_\_\_
- ☐ Recover through other means. Describe: \_\_\_\_\_

- ☒ Establish a unit to investigate and collect improper payments and describe the composition of the unit below. Describe: By way of OEL's fiscal and programmatic monitoring sections, observations of improper payments that are discovered during biennial monitoring engagements are compiled and sent to coalitions and the RCMA via monitoring reports. Also, under the statewide information system, the programmatic monitoring section reviews system generated reports that identify potential errors that could result in UPVs. If improper payments are validated via the monitoring reports or the statewide information system generated reports, coalitions and the RCMA are required to recovery all overpayments that are feasible.
- ☐ Other. Describe:

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

- ☒ Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified. Describe: Rule 6M-9.400, F.A.C., requires the coalition to provide written advance notice of the intended action to suspend or terminate benefits to the recipient to be affected and it must clearly advise of the allegations, the basis of the allegations, the intended action and the date the action is to be imposed. The coalition shall send the written advance notice at least 14 calendar days before the intended action. The length of time for which the recipient's benefits are suspended or the date of the termination of benefits shall be proportionate to the alleged offense committed, consistent with suspensions or terminations issued to other recipients who allegedly committed comparable offenses, and may also consider prior offenses, as appropriate. A suspension or termination shall not be applied against recipients with a valid at-risk referral. If the recipient believes that the issue was not resolved by the coalition, the recipient may file a formal written appeal for review by the executive director of the coalition that must be postmarked or emailed before the date of the intended action, whichever is later. If the recipient files a timely appeal, he or she will not be suspended or terminated from the program until the written decision of the executive director or the original date of the intended action, whichever is later. The executive director of the coalition or other executive staff person designated by the coalition board must respond to the recipient, in writing, within 30 days of receiving the appeal with a decision as to whether the suspension or termination will be upheld or modified. The recipient who wishes to appeal the decision of the executive director of the coalition or other executive staff person designated by the coalition board may request further review by an appeals committee with 10 calendar days of the date of the executive director or other executive staff person designated by the coalition board's written response to the recipient's formal written appeal. The appeals committee shall be convened within 45 calendar days of receipt of the recipient's request for an appeal. The appellant shall be notified in writing of the appeals

committee's determination within 10 days of the date of the meeting. The determination of the appeals committee shall be final.

- ☒ Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified. Describe: In accordance with s. 1002.91 (4), F.S., the coalition may suspend or terminate the provider from participating in the School Readiness Program when it has reasonable cause to believe that the provider has committed fraud. If suspended, the provider shall remain suspended until the completion of any investigation by OEL, the Department of Financial Services (DFS), or any other state or federal agency, and subsequent prosecution or other legal proceeding. The provider may request in writing a review of the determination made by the coalition within five business days of receipt of notice of the determination, which the provider believes to be incorrect. If the coalition receives a request for a review hearing from the provider, the coalition must address the request by assigning a review hearing committee within three days of the request and send a written response to the provider within five days of the request. The hearing must convene within 45 days of the request. Within five business days of receipt of the response to a request for a review hearing, the provider must inform the coalition of preferred date and time of the hearing and whether the provider will meet in person or via a method of telecommunication. Following completion of the presentation by the provider and the coalition, the review hearing committee will vote regarding each of the provider's claims. A written notice of the review hearing conclusion is given to the provider that states the outcome of each of the provider's claims and reasons supporting the committee's decision. The decision of the Review Hearing Committee is final.
- ☒ Prosecute criminally. Describe: Parents and providers suspected of fraudulent activities are referred to the Office of Inspector General for staff to validate the referral within 48 hours of entry into the fraud referral system. If warranted, the referral is then submitted to DPAF for further investigation. If there is enough evidence to support legal action then restitution and or criminal penalties could be imposed which may include removal from the School Readiness Program.
- ☐ Other. Describe:

---

## Appendix A: Background Check Waiver Request Form

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers will be considered “transitional and legislative waivers” to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)) These waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 – 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019.

If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

### Overview of Background Check Implementation deadlines

Original deadline for implementation (658H(j)(1) of CCDBG Act):	September 30, 2017
Initial one-year extension deadline (658H(j)(2) of CCDBG Act):	September 30, 2018
One-year waiver deadline (45 CFR 98.19(b)(1)(i)):	September 30, 2019
Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)):	September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting a time-limited waiver extension.

- ☐ **Appendix A.1:** In-state criminal registry or repository checks with fingerprint requirements for existing staff. (See related question at 5.4.1 (b).)
  - Describe the provision from which the state/territory seeks relief. [Click or tap here to enter text.](#)



- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [Click or tap here to enter text.](#)
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [Click or tap here to enter text.](#)

☐ **Appendix A.2:** In-state sex offender registry requirements for existing staff. (See related question at 5.4.2 (b).)

- Describe the provision from which the state/territory seeks relief.
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

☒ **Appendix A.3:** In-state child abuse and neglect registry requirements for existing staff. (See related question at 5.4.3 (b).)

- Describe the provision from which the state/territory seeks relief. [Policies and procedures are in place for these requirements, effective July 2016. In July 2016, child care providers were advised that all existing child care personnel were required to be rescreened, to include a search of Florida's Statewide Automated Child Welfare Information System \(SACWIS\) for allegations of child abuse and neglect. The results of this search are documented within the Agency for Health Care Administration \(AHCA\) Clearinghouse pursuant to ss. 402.302 \(15\), 402.305\(2\)\(a\) and \(b\), and 435.12, Florida Statutes, and is viewable by the provider on the child care personnel's profile page. As of this date, there are still approximately 35,000 existing staff that have not completed a rescreen. However, the state continues to work with existing providers to complete the necessary rescreening of existing child care personnel, hence the need for the waiver. The cost of rescreening existing staff poses a challenge for many providers and program personnel. Additional time is needed to address this challenge, as well as to ensure all existing childcare personnel have submitted fingerprints via the background screening clearinghouse so that data can be monitored and collected by licensing into the database system.](#)
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [The provision will allow licensing the time to confirm all child care personnel have met the new background screening requirements and are considered of 'good moral character' for continued eligibility in the child care industry. The background screening qualification for personnel is a safeguard for the children served to ensure their caregivers have not committed any disqualifying offenses.](#)
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [This component has already been addressed for some existing staff that are in \(or have been\) one of the following roles: owner, operator, and/or director. However, upon rescreening an in-state review of Florida's abuse/neglect will be completed for continued eligibility.](#)

☒ **Appendix A.4:** National FBI fingerprint search requirements for existing staff. (See related question at 5.4.4 (b).)

- Describe the provision from which the state/territory seeks relief. [Effective July 2016 existing staff were required to be rescreened to include the new disqualifying offenses in accordance with the federal requirements. As of this date there are still approximately 35,000 existing staff that have not completed a rescreen under the new disqualifying offenses. Florida's screening process already included a check of the national criminal record. Therefore, this component was previously reviewed for existing staff that were screened prior to July 2016. This is still part of the screening process and is accomplished via the FBI. However, additional time is needed to ensure all existing child care personnel have submitted fingerprints via the background screening clearinghouse and the data can be monitored and collected by licensing into the database system.](#)
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [The provision will allow licensing the time to confirm all child care personnel have met the new background screening requirements and are considered of 'good moral character' for continued eligibility in the child care industry. The background screening qualification for personnel is a safeguard for the children served to ensure their caregivers have not committed any disqualifying offenses.](#)
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [Florida's background screening process includes a review of the national criminal record via the FBI. Existing staff have been screened under the previous process and previous disqualifying offenses. Upon rescreening a new review will be completed for continued eligibility.](#)

☐ **Appendix A.5:** National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for new or prospective staff. (See related question at 5.4.5 (a).)

- Describe the provision from which the state/territory seeks relief. [REDACTED]
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [REDACTED]
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [REDACTED]

☒ **Appendix A.6:** National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for existing staff. (See related question at 5.4.5 (b).)

- Describe the provision from which the state/territory seeks relief. [All new child care personnel have, as part of the Level 2 screening requirement pursuant to s. 435.04, Florida Statutes, the National Crime Information Center \(NCIC\) search of 21 records which includes a search of the National Sex Offender Registry. This search is conducted by the Florida Department of Law Enforcement as part the Level 2 screening process. In July 2016, child care providers were advised that all existing](#)

[child care personnel were required to be rescreened under the new federal and state laws, to include the new disqualifying offenses in accordance with the federal requirements. As of this date there are still approximately 35,000 existing staff that have not completed a rescreen. However, Florida's screening process already included a check of the national sex offender registry, therefore, this component was previously reviewed for existing staff that were screened prior to July 2016. This is still part of the screening process and is accomplished via the NCIC program. The state continues to work with existing providers to complete the necessary rescreening of existing child care personnel to include the NCIC check, hence the need for the waiver.](#)

- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [The provision will allow licensing the time to confirm all child care personnel have met the new background screening requirements and are considered of 'good moral character' for continued eligibility in the child care industry. The background screening qualification for personnel is a safeguard for the children served to ensure their caregivers have not committed any disqualifying offenses.](#)
  - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [This component has already been addressed for existing staff using previous disqualifying offenses. Upon rescreening a new review will be completed for continued eligibility according to the new guidelines for disqualifying offenses.](#)
- ☐ **Appendix A.7:** Interstate criminal registry or repository check for new or prospective staff. (See related question at 5.4.6 (a).)
- Describe the provision from which the state/territory seeks relief. [REDACTED]
  - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [REDACTED]
  - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [REDACTED]
- ☒ **Appendix A.8:** Interstate criminal registry or repository check for existing staff. (See related question at 5.4.6 (b).)
- Describe the provision from which the state/territory seeks relief. [Effective July 2016 existing staff were required to be rescreened to include the new disqualifying offenses in accordance with the federal requirements. As of this date there are still approximately 35,000 existing staff that have not completed a rescreen. However, the state continues to work with providers to complete the necessary rescreening of child care personnel, to include inter-state background checks. The department has implemented a process for collecting criminal records from other states during which time the individual is eligible for provisional hire. In some cases, the response from other states may be delayed or becomes a cost factor for providers. This is not an issue if the other state participates in the NFF program. Additional time is needed to ensure all existing childcare personnel have submitted fingerprints via](#)

[the background screening clearinghouse and the data can be monitored and collected by licensing into the database system.](#)

- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [The provision will allow licensing the time to confirm all child care personnel have met the new background screening requirements and are considered of 'good moral character' for continued eligibility in the child care industry. The background screening qualification for personnel is a safeguard for the children served to ensure their caregivers have not committed any disqualifying offenses.](#)
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [The department allows an individual that has cleared in-state and FBI criminal to be provisionally hired if need be while the out-of-state records are retrieved. During this time, the individual must be under direct supervision of a screened staff when working directly with the children.](#)

☐ **Appendix A.9:** Interstate sex offender registry or repository check for new or prospective staff. (See related question at 5.4.7 (a).)

- Describe the provision from which the state/territory seeks relief. [REDACTED]
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [REDACTED]
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [REDACTED]

☒ **Appendix A.10:** Interstate sex offender registry or repository check for existing staff. (See related question at 5.4.7 (b).)

- Describe the provision from which the state/territory seeks relief. [The process for interstate sex offender registry checks is in place for prospective and existing child care staff. However, the state continues to work with existing providers to complete the necessary rescreening of existing child care personnel, hence the need for the waiver. In July 2016, child care providers were advised that all existing child care personnel were required to be rescreened to include the new federal requirements, including this element. As of this date there are still approximately 35,000 existing staff that have not completed a rescreen. Providers are responsible for completing a search of out-of-state registries. Many states have an online search which assists in expediting this process. Some providers do not internet access and/or are not versed in completing this process. Therefore, additional time may be needed to ensure all existing childcare personnel have this completed and documented to their personnel file for monitoring by licensing.](#)
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [The provision will allow licensing the time to confirm all child care personnel have met the new background screening requirements and are considered of 'good moral character' for continued eligibility in the child care industry. The background screening qualification for personnel is a safeguard for](#)

[the children served to ensure their caregivers have not committed any disqualifying offenses.](#)

- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [The department allows an individual that has cleared in-state and FBI criminal history to be provisionally hired if need be while the out-of-state records are retrieved. During this time, the individual must be under direct supervision of a screened staff when working directly with the children.](#)
- ☐ **Appendix A.11:** Interstate child abuse and neglect registry check for new or prospective staff. (See related question at 5.4.8 (a).)
- Describe the provision from which the state/territory seeks relief.
  - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.
  - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
- ☒ **Appendix A.12:** Interstate child abuse and neglect registry check for existing staff. (See related question at 5.4.8 (b).)
- Describe the provision from which the state/territory seeks relief. [The process for conducting interstate child abuse and neglect checks is in place for all new and existing child care staff, and effective July 2016, providers were notified that existing staff were required to be rescreened to include the new disqualifying offenses and added elements in accordance with the federal requirements, including this element. As of this date there are still approximately 35,000 existing staff that have not completed a rescreen. Providers are responsible for completing a search of out-of-state registries. Many states do not have a process in place and/or do not allow providers to request the information directly. The department requests the information on behalf of providers when needed. Therefore, additional time may be needed to ensure all existing childcare personnel have this completed and documented to their personnel file for monitoring by licensing.](#)
  - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [The provision will allow licensing the time to confirm all child care personnel have met the new background screening requirements and are considered of 'good moral character' for continued eligibility in the child care industry. The background screening qualification for personnel is a safeguard for the children served to ensure their caregivers have not committed any disqualifying offenses.](#)
  - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [The department allows an individual that has cleared in-state and FBI criminal to be provisionally hired if need be while the out-of-state records are retrieved. During this time, the individual must be under direct supervision of a screened staff when working directly with the children.](#)

- ☐ **Appendix A. 13:** New staff hired to work provisionally until background checks are completed. (See related question at 5.4.9.)
- Describe the provision from which the state/territory seeks relief.
  - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.
  - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.