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**Child Care and Development Fund (CCDF) Plan  
for  
State/Territory Texas**

**FFY 2025 – 2027**

**Version: Initial Plan**

**Plan Status: Approved as of 2024-11-09 00:49:24 GMT**

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

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

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## Overview

### *Introduction*

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

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

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

### *Organization of Plan*

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

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

### *Completing the Plan*

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

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

#### *Review and Amendment Process*

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

#### *Appendix 1: Implementation Plan*

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

#### *CCDF Plan Submission*

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

## 1 CCDF Program Administration

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

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

## 1.1 CCDF Leadership

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

### 1.1.1 Designated Lead Agency

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

- a. Lead Agency or Joint Interagency Office Information:
  - i. Name of Lead Agency: **Texas Workforce Commission**
  - ii. Street Address: **101 East 15th Street**
  - iii. City: **Austin**
  - iv. State: **Texas**
  - v. ZIP Code: **78771**
  - vi. Web Address for Lead Agency: **<https://www.twc.texas.gov/>**
- b. Lead Agency or Joint Interagency Official contact information:
  - i. Lead Agency Official First Name: **Edward**
  - ii. Lead Agency Official Last Name: **Serna**
  - iii. Title: **Executive Director**
  - iv. Phone Number: **(512) 305-9636**
  - v. Email Address: **[edward.serna@twc.texas.gov](mailto:edward.serna@twc.texas.gov)**

### 1.1.2 CCDF Administrator

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

- a. CCDF Administrator contact information:
  - i. CCDF Administrator First Name: **Reagan**

- ii. CCDF Administrator Last Name: **Miller**
- iii. Title of the CCDF Administrator: **Division Director, Child Care & Early Learning (CC&EL) Division**
- iv. Phone Number: **(512) 936-3563**
- v. Email Address: **reagan.miller2@twc.texas.gov**
- b. CCDF Co-Administrator contact information (if applicable):
  - i. CCDF Co-Administrator First Name: **Allison**
  - ii. CCDF Co-Administrator Last Name: **Wilson**
  - iii. Title of the CCDF Co-Administrator: **Director, Program Policy & Quality Improvement**
  - iv. Phone Number: **(512) 936-4917**
  - v. Email Address: **allison.wilson@twc.texas.gov**
  - vi. Description of the Role of the Co-Administrator: **Manages state-level policy staff responsible for CCDF planning, guidance, and implementation efforts.**

## 1.2 CCDF Policy Decision Authority

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

### 1.2.1 Entity establishing CCDF program rules

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

Check one of the following:

- a. ☐ All program rules and policies are set or established by the State or Territory. (If checked, skip to question 1.2.2.)
- b. ☒ Some or all program rules and policies are set or established by local entities or agencies. If checked, indicate which entities establish the following policies. Check all that apply:
  - i. Eligibility rules and policies (e.g., income limits) are set by the:
    - ☒ State or Territory.
    - ☐ Local entity (e.g., counties, workforce boards, early learning coalitions).
    - ☐ Other. Identify the entity and describe the policies the entity can set:

- ii. Sliding-fee scale is set by the:  
☒ State or Territory.  
☐ Local entity (e.g., counties, workforce boards, early learning coalitions).  
☐ Other. Identify the entity and describe the policies the entity can set:
- iii. Payment rates and payment policies are set by the:  
☒ State or Territory.  
☒ Local entity (e.g., counties, workforce boards, early learning coalitions).  
☐ Other. Identify the entity and describe the policies the entity can set:
- iv. Licensing standards and processes are set by the:  
☒ State or Territory.  
☐ Local entity (e.g., counties, workforce boards, early learning coalitions).  
☐ Other. Identify the entity and describe the policies the entity can set:
- v. Standards and monitoring processes for license-exempt providers are set by the:  
☐ State or Territory.  
☐ Local entity (e.g., counties, workforce boards, early learning coalitions).  
☒ Other. Identify the entity and describe the policies the entity can set: **Texas does not monitor license-exempt providers. Listed family homes providing relative care only and Department of Defense (DoD) regulated providers are the only license-exempt providers eligible for CCDF in Texas.**
- vi. Quality improvement activities, including QIS, are set by the:  
☒ State or Territory.  
☒ Local entity (e.g., counties, workforce boards, early learning coalitions).  
☐ Other. Identify the entity and describe the policies the entity can set:
- vii. Other. List and describe any other program rules and policies that are set at a level other than the State or Territory level:

#### 1.2.2 Entities implementing CCDF services

The Lead Agency has broad authority to operate (i.e., implement activities) through other agencies, as long as it retains overall responsibility for CCDF. Complete the table below to identify which entity(ies) implements or performs CCDF services.

Check the box(es) to indicate which entity(ies) implement or perform CCDF services.

CCDF Activity	CCDF Lead Agency	TANF Agency	Local Government Agencies	CCR&R	Other
Who conducts eligibility determinations?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe:



CCDF Activity	CCDF Lead Agency	TANF Agency	Local Government Agencies	CCR&R	Other
Who assists parents in locating child care (consumer education)?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe:
Who issues payments?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe:
Who monitors licensed providers?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe:
Who monitors license-exempt providers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Describe: Texas does not monitor license-exempt providers. Listed family homes providing relative care only and DOD-regulated providers are the only license-exempt providers eligible for CCDF in Texas.
Who operates the quality improvement activities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe:

### 1.2.3 Information systems availability

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

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

a. Tasks to be performed.

☒ Yes. If yes, describe: **The Workforce Board Grants department in TWC's Workforce Development Division is responsible for contract oversight for all Board-allocated funds, including child care. The CC&EL Division works with the Workforce Development Division to develop and manage contracts for CCDF funds administered by the 28 Boards and clearly define the tasks to be performed for each contract type. Allowable activities are aligned with CCS rules. CC&EL and Workforce Board Grants meet regularly to discuss any issues related to Board performance or spending to ensure Boards remain on budget and on track to meet target for the average number of children served per day.**

**The CC&EL Division's Grants and Contracts team works closely with the Business Operations Division's Procurement & Contract Services department to oversee CCDF activities carried out through statewide grants, contracts, and interagency agreements.**

☐ No. If no, describe:

b. Schedule for completing tasks.

☒ Yes. If yes, describe: **Workforce Board Grants works closely with the CC&EL Division to develop and oversee the schedule for Boards to complete required actions and reports within a set contract period. The CC&EL Division's Technical Assistance (TA) department monitors Board performance and provides guidance and direction to support compliance with program requirements.**

**The CC&EL Division's Grants and Contracts team also works closely with the TWC's Procurement & Contract Services department to monitor contract compliance and deliverable schedules on statewide initiative contracts.**

☐ No. If no, describe:

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

☒ Yes. If yes, describe: **Workforce Board Grants and Procurement & Contract Services works closely with the CC&EL Division to oversee contractual compliance and use of allocated funds, including budgeting and correct reporting of expenditures in accordance with CCDF and TWC requirements, overseeing expenditure levels, and processing any deobligation and reallocation of funds.**

**For statewide grants, contracts, and interagency agreements, the CC&EL Division's Grants and Contracts team also works closely with the TWC's Procurement & Contract Services department to monitor contract compliance and expenditures in accordance with CCDF and TWC requirements. Additionally, all grants and contracts are subject to financial monitoring by TWC's Fraud Deterrence and Compliance Monitoring Division.**

☐ No. If no, describe:

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

☒ Yes. If yes, describe: **Workforce Board Grants works closely with the CC&EL Division to oversee**

contractual compliance and use of allocated funds, including:

Meeting required performance levels, which are established each year by TWC and included as a Board contracted measure; and  
Issuing TA plans or corrective actions.

TWC adopts Board child care performance standards in an open, posted meeting each year. TWC's contracts with Boards include performance measures for the use of CCDF funds. TWC also tracks each Board's monthly performance for the average number of children served using the number of paid billings.

Board performance is reviewed by the CC&EL Division each month, including the:

Average number of children served per day (total and by eligibility category);  
Average cost of care per day (total and by eligibility category); and  
Texas Rising Star provider participation.

For statewide grants, contracts, and interagency agreements, the CC&EL Division's Grants and Contracts team is staffed by specialists who are certified in contract development and management by the Texas Comptroller of Public Accounts. This team ensures grants and contracts are developed to include appropriate deliverables and performance measures, supports program staff in monitoring grant/contract compliance, and approves disbursements of funds.

[ ] No. If no, describe:

- e. In addition to the written agreements identified above, describe any other monitoring and auditing processes used to oversee CCDF administration. **TWC's Subrecipient Monitoring (SRM) department within the Fraud Deterrence and Compliance Monitoring (FDCM) Division monitors Boards annually to ensure that funds are spent in accordance with applicable federal and state statutes, regulations, and rules. SRM performs monitoring reviews of fiscal and program activities, including customer eligibility, wage verification, provider billing, and disbursement testing. FDCM also provides training to identify and prevent improper payments and potential problems.**

SRM conducts an agencywide annual risk analysis to identify statewide grants and contracts to monitor each fiscal year. The CC&EL Division provides input into this risk analysis each year. Grantees selected are monitored for fiscal and program activities, including use of funds for allowable quality improvement activities. FDCM also collects and reviews all single audits completed on TWC grantees, including those funded with CCDF.

#### 1.2.4 Certification of shareable information systems.

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

[x] Yes.

☐ No. If no, describe:

#### 1.2.5 Confidential and personally identifiable information

Certification of policies to protect confidential and personally identifiable information

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

☒ Yes.

☐ No. If no, describe:

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

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

- (1) Appropriate representatives of general-purpose local government. General purpose local governments are defined by the U.S. Census at [https://www2.census.gov/govs/cog/g12\\_org.pdf](https://www2.census.gov/govs/cog/g12_org.pdf).
- (2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) or similar coordinating body pursuant to 98.14(a)(1)(vii).
- (3) Tribe(s) or Tribal organization(s) within the State. This consultation should be done in a timely manner and at the option of the Tribe(s) or Tribal organization(s).

#### 1.3.1 Consultation efforts in CCDF Plan development

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

- a. Describe how the Lead Agency consulted with appropriate representatives of general-purpose local government: **Local Workforce Development Board (Board) members are appointed by chief elected officials (CEOs) in each local workforce development area (LWDA) and certified by TWC. Boards are statutorily created public entities recognized by state statute as local governmental entities, and Board members are considered public officials. TWC staff members serve on Boards as the required public employment service representatives. The CEOs and the Board chair enter into a partnership agreement that defines their operating relationship. The Board executive director (ED) is responsible for administering Board staff operations. TWC's three-member Commission (Commission) and TWC staff consult regularly with Board EDs on all aspects of workforce services, including CCS.**

Board staff is consulted on a regular basis regarding TWC rules, policies, and procedures that are included in the State Plan. This consultation includes biweekly conference calls with Board EDs, annual Workforce Forums, and quarterly child care network meetings. Board child care staff participates in ad hoc workgroups regarding implementation of new initiatives.

In development of this State Plan, TWC solicited input from Board EDs and Board staff through a stakeholder survey, in-person stakeholder meetings in five Board areas (West Central Texas, Rural Capital Area, Gulf Coast, Lower Rio Grande Valley, and Greater Dallas), and a virtual meeting available for all Board EDs and Board child care staff. Boards also provided input on policy changes occurring in advance of the State Plan through meetings and public input opportunities.

- a. Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body: The Texas Early Learning Council (TELC) serves as Texas' State Advisory Council on early childhood education and care. Members of TELC, including Texas CCDF Administrator and TELC chairperson Reagan Miller, are appointed by Governor Greg Abbott. The group includes representatives from state agencies, school districts, colleges, Head Start (HS), child care providers, and nonprofit organizations.

In 2023, TELC collaborated with the Early Childhood Inter-Agency (ECIA) Workgroup (a group of state-level early childhood program leaders from TWC, Texas Education Agency (TEA), Department of Family and Protective Services (DFPS), Texas Health & Human Services Commission (HHSC), and the Department of State Health Services (DSHS)), and the University of Texas Health Science Center to conduct a new statewide needs assessment (<https://www.twc.texas.gov/sites/default/files/ccel/docs/early-childhood-system-needs-assessment-in-texas-final-accessible.pdf>) and Early Learning Strategic Plan for 2024-2026 (<https://www.twc.texas.gov/sites/default/files/ccel/docs/texas-early-learning-strategic-plan-2024-2026-final-accessible.pdf>). These projects were funded by the Preschool Development Fund Birth through Five Renewal Grant (PDG B-5). TELC continues to meet bi-monthly to provide input on child care and early learning initiatives in the state and to work toward meeting the goals of the strategic plan.

In the January 19, 2024 TELC meeting, TWC consulted with TELC on the 2025-2027 CCDF State Plan and solicited input on the State Plan as well as invited members of the council to complete a survey and attend additional stakeholder input meetings in person or virtually. TWC shared a copy of the draft State Plan with TELC members to provide another opportunity for input prior to finalizing the plan.

- b. Describe, if applicable, how the Lead Agency consulted with Indian Tribes(s) or Tribal organizations(s) within the State: During the summer of 2023, CC&EL Division staff visited the Tribal CCDF administrators from the Alabama-Coushatta, Kickapoo, and Ysleta del Sur Pueblo tribes at their sites along with representatives from Boards, Office of Child Care, Tribal Capacity Building Center, and State Capacity Building Center. During these meetings, areas for potential program changes were identified to better support both tribal and Board needs.

The Ysleta del Sur Pueblo tribe has one licensed child care home (LCCH) provider that participates in CCS and is Texas Rising Star certified. The tribe is in the process of

becoming an accredited Montessori school. Based on this discussion and other requests, TWC is updating the list of recognized accreditation organizations to include Montessori accreditation bodies. This will create an easier path to Texas Rising Star certification should the tribe decide to pursue licensure, state subsidy and Texas Rising Star certification for their center in the future. TWC and Workforce Solutions Borderplex will continue meeting with the Tribal CCDF administrator regularly.

During TWC's visit with Alabama-Coushatta, tribal leadership expressed interest in opportunities to partner with the state to better serve tribal children. Further discussions are needed as we explore this option. TWC and Workforce Solutions Deep East Texas will continue meeting with the Tribal CCDF administrator regularly.

Beginning with FY'24, TWC is extending invitations to tribal child care programs to attend the Texas Rising Star Early Educators Conference. These conferences offer a day and a half of free, high-quality training for early childhood teachers and administrators in an environment that acknowledges their status as professionals.

- c. Identify other entities, agencies, or organizations consulted on the development of the CCDF Plan (e.g., representatives from the child care workforce, or statewide afterschool networks) and describe those consultation efforts: In addition to holding a public hearing regarding the draft State Plan in April 2024, TWC conducted a statewide survey and held six stakeholder input meetings (five in person and 1 virtual) prior to the development of the draft State Plan. TWC's 2025-2027 CCDF State Plan Stakeholder Survey was available via Survey Monkey from January 19, 2024, to February 12, 2024. The survey was posted to the TWC website and widely distributed to child care providers, parents, Boards, advocacy groups, community organizations, and state agencies. TWC received 5,481 responses from the following:

2,022 child care providers;  
1,405 parents;  
167 child care advocacy groups or community organizations;  
82 Board staff members; and  
54 employers.

Stakeholders that provided input on the State Plan represented 160 counties and all 28 LWDAs.

TWC hosted six stakeholder input meetings to discuss State Plan input. All meetings were hosted by the local Board and scheduled for 6:00 p.m. The meetings were listed on the TWC website and shared with the CC&EL Division's subscribers (including advocates, providers, and community members) via TWC's GovDelivery email notification service.

Locations & Dates of Stakeholder Input Meetings/Attendees:

Abilene: Thursday, February 8, 2024 (25 attendees)  
Round Rock: Tuesday, February 13, 2024 (13 attendees)  
Houston: Wednesday, February 21, 2024 (27 attendees)  
McAllen: Thursday, February 22, 2024 (12 attendees)

Dallas: Monday, February 26, 2024 (40 attendees)  
Virtual: Wednesday, February 28, 2024 (223 attendees)

### 1.3.2 Public hearing process

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

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

- i. Date of the public hearing: **5/7/2024**

Reminder: Must be no earlier than January 1, 2024. If more than one public hearing was held, enter one date (e.g., the date of the first hearing, the most recent hearing date, or any hearing date that demonstrates this requirement).

- ii. Date of notice of public hearing: **4/16/2024**

- iii. Was the notice of public hearing posted publicly at least 20 calendar days prior to the date of the public hearing?

☒ Yes.

☐ No. If no, describe:

- iv. Describe how the public was notified about the public hearing, including outreach in other languages, information on interpretation services being available, etc. Include specific website links if used to provide notice **TWC sent a Gov Delivery email with the dates and locations of the hearings to all early childhood care and education stakeholders subscribed to the system, including child care providers, advocates, parents, and Boards (more than 21,600 emails). TWC also posted notice of the hearing on its website at [www.twc.texas.gov](http://www.twc.texas.gov).**

**Notifications for the public hearing were available at <https://www.twc.texas.gov/programs/childcare> and <https://www.twc.texas.gov/events#commission>.**

- v. Describe how the approach to the public hearing was inclusive of all geographic regions of the State or Territory: **The hearing was held virtually on Zoom, allowing participation from anywhere in the state. A recording of the public hearing is available on the TWC Website.**

- vi. Describe how the content of the Plan was made available to the public in advance of the public hearing (e.g., the Plan was made available in other languages, in multiple formats, etc.): **On April 16, 2024, TWC posted the draft State Plan on TWC's website and sent an e-mail informing all child care providers, stakeholders, and Boards of the availability of the draft State Plan. The TWC website has a mobile-first design, is available in English, Spanish, and Vietnamese, and all information posted is accessible to individuals with disabilities. Every page on the website includes the following language: Auxiliary aids and services are available upon request to individuals with disabilities.**

- vii. Describe how the information provided by the public was taken into consideration regarding the provision of child care services under this Plan: **Commenters were able to testify at the public hearing or provide written comments on the State Plan during the public comment period. TWC solicited input during the development of the draft State Plan through public hearings as previously described. TWC reviewed and considered all public comments. TWC modified the draft State Plan in response to comments received and is considering other comments for future action.**

### 1.3.3 Public availability of final Plan, amendments, and waivers

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

- a. Provide the website link to where the Plan, any Plan amendments, and waivers (if applicable) are available. Note: A Plan amendment is required if the website address where the Plan is posted changes. **All approved State Plans are available at <https://www.twc.texas.gov/programs/child-care/data-reports-plans>.**
- b. Describe any other strategies that the Lead Agency uses to make submitted and approved CCDF Plan and approved Plan amendments available to the public. Check all that apply and describe the strategies below, including any relevant website links as examples.
  - i. ☒ Working with advisory committees. Describe: **TWC provides the information for TELC in open public meetings. Boards work with their local child care committees which include representatives from licensed child care centers (LCCCs) participating in TWC's CCS program, LCCHs or registered child care homes (RCCHs) participating in CCS, families currently or formerly served by CCS, Board CCS contractors, Board members and/or Board staff, and other child care stakeholders that represent the interests of the children and/or the families served to disseminate CCDF plan information.**
  - ii. ☐ Working with child care resource and referral agencies. Describe:
  - iii. ☐ Providing translation in other languages. Describe:
  - iv. ☒ Sharing through social media (e.g., Facebook, Instagram, email). Describe: **TWC emails a listserv (GovDelivery) of stakeholders, including advocacy groups, providers, and parents, to share the draft State Plan. TWC's internet home page includes a link for interested persons to sign up to receive updates (GovDelivery) on several topics, including child care. TWC posts all approved State Plans and State Plan amendments on its website.**
  - v. ☒ Providing notification to key constituents (e.g., parent and family groups, provider groups, advocacy groups, foundations, and businesses). Describe: **TWC emailed more than 21,600 providers and stakeholders about the availability of the draft State Plan and information on the public hearing. TWC maintains both internal and subscription-based email distribution lists of child care stakeholders.**
  - vi. ☒ Working with Statewide afterschool networks or similar coordinating entities for out-of-school time. Describe: **TWC is collaborating with the Texas Partnership for Out of School Time (TXPOST) to discuss its needs for school-aged children outside the classroom who may be considered as the State Plan is developed.**



TWC requested input from TXPOST through the Stakeholder Input Survey. TXPOST also participated in TWC’s Texas Rising Star 4-year review Workgroup.

- vii. ☐ Direct communication with the child care workforce. Describe:
- viii. ☒ Other. Describe: **The State Plan refers to CCS rules, Board child care policies, and other applicable TWC rules and policies. In accordance with state law, the public is given notice of rule changes and the opportunity for public input. TWC requires Boards to post policy changes for public input at an open meeting. Rule and policy changes are incorporated into any plan amendments.**

## 2 Child and Family Eligibility and Enrollment and Continuity of Care

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

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

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

### 2.1 Reducing Barriers to Family Enrollment and Redetermination

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

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

#### 2.1.1 Eligibility practices to reduce barriers to enrollment

- a. Does the Lead Agency implement any of the following eligibility practices to reduce barriers at the time of initial eligibility determination? Check all that apply and describe those elements checked.
  - i. ☐ Establishing presumptive eligibility while eligibility is being determined. Describe the policy, including the populations benefiting from the policy, and identify how long the period of presumptive eligibility is:

- ii. ☒ Leveraging eligibility from other public assistance programs. Describe: **Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), Medicaid, or other related public assistance records are accepted as primary verification of identity, child's age, and child's citizenship status.**
  - iii. ☒ Coordinating determinations for children in the same household (while still ensuring each child receives 12 months of eligibility). Describe: **TWC determines eligibility for the household, including all CCDF-eligible children.**
  - iv. ☒ Self-assessment screening tools for families. Describe: **TWC is using PDG B-5 funding to develop an eligibility screener for families. The tool, which is expected to launch in 2025, will help parents identify their eligibility for child care scholarships, public Pre-K and HS/Early Head Start (EHS). If potentially eligible for child care scholarships, parents will be directed to the online application. If potentially eligible for Pre-K or HS/EHS, parents will be directed to the appropriate resources to apply for services.**
  - v. ☐ Extended office hours (evenings and/or weekends).
  - vi. ☒ Consultation available via phone.
  - vii. ☒ Other. Describe the Lead Agency policies to process applications efficiently and make timely eligibility determinations: **TWC will implement a new statewide, online application in December 2024 for parents applying for CCS (Texas Child Care Connection (TX3C)). TX3C allows parents access a mobile-friendly, plain language application and upload their eligibility documents. Completed applications are queued up in the case management system and assigned to the case worker responsible for determining eligibility. TWC policy requires that Boards must ensure that verification of eligibility is completed within 20 calendar days of receipt of a parent's completed application with documentation (CCS Guide, Section D-1003).**
  - viii. ☐ None.
- b. Does the Lead Agency use an online subsidy application?
- ☐ Yes.
- ☒ No. If no, describe why an online application is impracticable. **Currently, applications are managed by Boards. Many have an online application process.**
- TWC will implement a new statewide, online application in December 2024 for parents applying for CCS (Texas Child Care Connection (TX3C)). TX3C allows parents to access a mobile-friendly, plain language application and to upload their eligibility documents.**
- c. Does the Lead Agency use different policies for families receiving TANF assistance?
- ☐ Yes. If yes, describe the policies:
- ☒ No.

#### 2.1.2 Preventing disruption of eligibility activities

- a. Identify, where applicable, the Lead Agency's procedures and policies to ensure that

parents do not have their employment, education, or job training unduly disrupted to comply with the State's/Territory's or designated local entity's requirements for the redetermination of eligibility. Check all that apply.

- i. ☒ Advance notice to parents of pending redetermination.
  - ii. ☒ Advance notice to providers of pending redetermination.
  - iii. ☒ Pre-populated subsidy renewal form.
  - iv. ☒ Online documentation submission.
  - v. ☐ Cross-program redeterminations.
  - vi. ☐ Extended office hours (evenings and/or weekends).
  - vii. ☒ Consultation available via phone.
  - viii. ☒ Leveraging eligibility from other public assistance programs.
  - ix. ☐ Other. Describe:
- b. Does the Lead Agency use different policies for families receiving TANF assistance?
- ☐ Yes. If yes, describe the policies:
- ☒ No.

## 2.2 Eligible Children and Families

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

### 2.2.1 Eligibility criteria: age of children served

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

- a. Does your Lead Agency serve the full federally allowable age range of children through age 12?
- ☒ Yes.
- ☐ No. If no, describe the age range of children served and the reason why you made that decision to serve less than the full range of allowable children.
- Note:* Do not include children incapable of self-care or under court supervision, who are reported below in 2.2.1b and 2.2.1c.
- b. Does the Lead Agency extend eligibility for CCDF-funded child care to children ages 13 and older but below age 19 who are physically and/or mentally incapable of self-care?

☐ No.

☒ Yes.

i. If yes, the upper age is (may not equal or exceed age 19): **18.00**

ii. If yes, provide the Lead Agency definition of physical and/or mental incapacity: **A child who has a physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment. Major life activities include, but are not limited to, caring for oneself, performing manual tasks, walking, hearing, seeing, speaking, breathing, learning, and working (CCS rule §809.2(8)).**

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

☐ No.

☒ Yes. If yes, and the upper age is (may not equal or exceed age 19): **18.00**

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

i. “residing with”: **A child is considered to be residing with the parent when the child is living with, and physically present with, the parent during the time period for which child care services are being requested or received (CCS rule §809.2(23)).**

ii. “in loco parentis”: **An individual 18 years of age or older who is responsible for the day-to-day care and supervision of the child when the child's natural parent, adoptive parent, stepparent, or legal guardian is not available to care for the child. The individual must document the reason that the child's parents are unavailable to care for the child, and that he or she is exercising parental responsibility for the child (CCS Guide, D-105.c).**

#### 2.2.2 Eligibility criteria: reason for care

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

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

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

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

ii. ☒ Being self-employed.

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

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

- v. ☐ Time for meals or breaks.
  - vi. ☒ Time for travel.
  - vii. ☒ Seeking employment or job search.
  - viii. ☒ Other. Describe: **Participation in TANF Choices or SNAP E&T activities.**
- b. Identify which of the following activities are included in your definition of “attending job training” by checking the boxes below:
- i. ☒ Vocational/technical job skills training.
  - ii. ☒ Apprenticeship or internship program or other on-the-job training.
  - iii. ☒ English as a Second Language training.
  - iv. ☒ Adult Basic Education preparation.
  - v. ☒ Participation in employment service activities.
  - vi. ☐ Time for meals and breaks.
  - vii. ☒ Time for travel.
  - viii. ☒ Hours required for associated activities such as study groups, lab experiences.
  - ix. ☒ Time for outside class study or completion of homework.
  - x. ☐ Other. Describe:
- c. Identify which of the following diplomas, certificates, degrees, or activities are included in your definition of “attending an educational program” by checking the boxes below:
- i. ☒ Adult High School Diploma or GED.
  - ii. ☒ Certificate programs (12-18 credit hours).
  - iii. ☒ One-year diploma (36 credit hours).
  - iv. ☒ Two-year degree.
  - v. ☒ Four-year degree.
  - vi. ☒ Travel to and from classrooms, labs, or study groups.
  - vii. ☐ Study time.
  - viii. ☒ Hours required for associated activities such as study groups, lab experiences.
  - ix. ☒ Time for outside class study or completion of homework.
  - x. ☐ Applicable meal and break times.
  - xi. ☐ Other. Describe:
- d. Does the Lead Agency impose a Lead Agency-defined minimum number of hours of activity for eligibility?
- ☐ No.
  - ☒ Yes.

If yes, describe any Lead Agency-imposed minimum requirement for the following:

☐ Work. Describe:

☐ Job training. Describe:

☐ Education. Describe:

☒ Combination of allowable activities. Describe: **For at-risk: A parent is required to work or attend a job training or educational program for a combination of at least an average of 25 hours per week for a single-parent family or 50 hours per week for a two-parent family, or a higher number of hours per week as established by the Board (CCS rule §809.50).**

**For parents enrolling for Initial Job Search: After the three-month initial job search period, a total activity participation of at least 25 hours for a single-parent family or a total combined 50 hours per week for dual-parent families, which must include a minimum of 12 hours in employment for a single-parent family and a total combined 25 hours in employment for a dual-parent family must be met to continue the full 12-month eligibility period (CCS rule §809.56).**

☐ Other. Describe:

- e. Does the Lead Agency allow parents to qualify for CCDF assistance based on education and training without additional work requirements?

☒ Yes.

☐ No. If no, describe the additional work requirements:

- f. Does the Lead Agency extend eligibility to specific populations of children otherwise not eligible by including them in its definition of “children who receive or need to receive protective services?”

Note: A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are *not* working or are *not* in education/training activities, but this provision should be included in the Lead Agency’s protective services definition.

☐ No. If no, skip to question 2.2.3.

☒ Yes. If yes, answer the questions below:

Provide the Lead Agency’s definition of “protective services” by checking below the sub-populations of children that are included:

☐ Children in foster care.

☐ Children in kinship care.

☒ Children who are in families under court supervision.

☒ Children who are in families receiving supports or otherwise engaged with a child welfare agency.

☐ Children participating in a Lead Agency’s Early Head Start - Child Care Partnerships program.

☐ Children whose family members are deemed essential workers under a governor-declared state of emergency.

☒ Children experiencing homelessness.

☐ Children whose family has been affected by a natural disaster.

☐ Other. Describe:

- g. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis?

☐ No.

☒ Yes.

- h. Does the Lead Agency waive the eligible activity (e.g., work, job training, education, etc.) requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis?

☐ No.

☒ Yes.

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

☐ No.

☒ Yes.

### 2.2.3 Eligibility criteria: deciding entity on family income limits

How are income eligibility limits established?

☒ There is a statewide limit with no local variation.

☐ There is a statewide limit with local variation. Provide the number of income eligibility tables and describe who sets the limits:

☐ Eligibility limits are established locally only. Provide the number of income eligibility tables and describe who sets the limits:

☐ Other. Describe:

### 2.2.4 Initial eligibility: income limits

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

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

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1	4473.00	85.00	3802.00
2	5849.00	85.00	4971.00

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
3	7225.00	85.00	6141.00
4	8601.00	85.00	7311.00
5	9977.00	85.00	8481.00

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

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

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

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

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

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

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1			
2			
3			
4			
5			

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

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1			
2			



Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
3			
4			
5			

iii. Region/locality that is most populous:

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1			
2			
3			
4			
5			

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

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

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

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

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

- i. ☒ Gross wages or salary.
- ii. ☐ Disability or unemployment compensation.
- iii. ☐ Workers’ compensation.
- iv. ☐ Spousal support, child support.
- v. ☐ Survivor and retirement benefits.
- vi. ☐ Rent for room within the family’s residence.
- vii. ☐ Pensions or annuities.
- viii. ☐ Inheritance.

- ix. ☐ Public assistance.
  - x. ☒ Other. Describe: **CCS rule §809.44(b) lists all income sources that are excluded from family income; all other sources are included as income.**
- d. What is the effective date for these income eligibility limits? **October 1, 2024**
- e. Income limits must be established and reported in terms of current SMI based on the most recent data published by the Bureau of the Census, even if the federal poverty level is used in implementing the program.
- What federal data does the Lead Agency use when reporting the income eligibility limits?  
☒ LIHEAP. If checked, provide the publication year of the LIHEAP guideline estimates used by the Lead Agency: **2024**
- ☐ Other. Describe:
- f. Provide the direct URL/website link, if available, for the income eligibility limits. **The income eligibility for limits for October 1, 2023 through September 30, 2024 are available at <https://www.twc.texas.gov/sites/default/files/wf/policy-letter/wd/wd-24-23-att1-twc.pdf> (Workforce Development (WD) 24-23 Attachment 1). The income eligibility limits for October 1, 2024 through September 30, 2025 are available at <https://www.twc.texas.gov/sites/default/files/ccel/docs/bcy25-income-limits-twc.pdf>.**

#### 2.2.5 Income eligibility: irregular fluctuations in earnings

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

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

- i. ☒ Average the family's earnings over a period of time (e.g., 12 months).
  - Identify the period of time **Three months. Income fluctuations that occur during the three-month income calculation period are calculated separately and averaged over the appropriate time period in accordance with local procedures. Fluctuations in earnings during sustained employment are income amounts that differ due to any of the following:**
  - Variable work schedules (pay periods without a guaranteed number of hours per day or per week);**
  - Overtime pay;**
  - Pay based solely on commissions or tips;**
  - Fixed compensation paid in different time periods, as in education; and**
  - Seasonal or temporary employment.**
  - In some cases, Boards annualize fluctuations in income rather than average them across the three-month period. Examples of income that should be annualized may include, but are not limited to, the following:**

A coaching stipend paid only for the sports season;  
Accrued vacation leave paid out in a lump sum at year's end; and  
Holiday employment.

If pay documents indicate that a family member received a bonus or other lump sum during the income calculation period or in the year-to-date amount, Boards determine the number of months that the bonus or lump sum covers and if there is any expectation of future repetition. In that case, the sum is averaged over the applicable number of months to reach an average monthly figure (CCS Guide, Section D-107.c).

- ii. ☐ Request earning statements that are most representative of the family's monthly income.
- iii. ☐ Deduct temporary or irregular increases in wages from the family's standard income level.
- iv. ☒ Other. Describe the other ways the Lead Agency takes into account irregular fluctuations in earnings: **For bonuses and other lump sum payments received during the three-month income calculation period or appearing in the year-to-date amount on a pay stub, staff determines the number of months the bonus or lump sum covers and if there is any expectation of future repetition. If a recurring bonus/lump sum, it is averaged over the applicable number of months to reach an average monthly figure (CCS Guide, Section D-107.d).**

Average an annual bonus by 12;  
Average a lump sum payment by 12;  
Average a quarterly bonus by 3; and  
Average a onetime payment by 12.

#### 2.2.6 Family asset limit

- a. When calculating income eligibility, does the Lead Agency ensure each eligible family does not have assets that exceed \$1,000,000?  
☒ Yes.  
☐ No. If no, describe:
- 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: **CCS rule §809.41(a) exempts children who receive or need protective services from income limits and the family asset limit.**

#### 2.2.7 Additional eligibility criteria

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

- a. ☒ Eligibility determination? If checked, describe: **TWC requires Boards to serve children in**

the following three priority groups, as outlined in CCS rule §809.43 and in Section B-400 of the CCS Guide:

**First Priority Group-Mandatory**

Consistent with CCDF regulations, the first priority group is assured child care services and includes children of parents eligible for the following:

Choices child care;

Temporary Assistance for Needy Families (TANF) applicant child care;

Supplemental Nutrition Assistance Program (SNAP) Employment & Training (E&T) child care; and

Transitional child care for former TANF recipients.

**Second Priority Group-Subject to Availability of Funds**

The second priority group is served subject to the availability of funds and includes, in the following order of priority:

Children who need to receive protective services child care;

Children of a qualified veteran or qualified spouse;

Children of a foster youth;

Children experiencing homelessness;

Children of parents on military deployment whose parents are unable to enroll in military funded child care assistance programs;

Children of teen parents; and

Children with disabilities.

**Third Priority Group-Board Determined**

The third priority group includes any other priority adopted by the Board. However, a Board must not establish a priority group based on parent choice of an individual provider or provider type. Boards must ensure that children in the first and second priority groups are enrolled before enrolling children from Board-established priority groups.

- b. ☒ Eligibility redetermination? If checked, describe: If, at the time of eligibility redetermination, the family is experiencing a temporary status change in work, school, or job training, the Board has the option to extend the eligibility period to the date the parent is expected to return to work, school, or job training. In accordance with local procedures, the redetermination would then be based on the income upon the parent's return to work, school, or job training. This extension is allowed on a case-by-case basis (CCS Guide, Section D-1005).

**2.2.8 Documentation of eligibility determination**

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

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

Required at Initial Determination	Required at Redetermination	Description
[x]	[ ]	Applicant identity. Describe how you verify: <b>Parents will submit their application and documents through TX3C and will be provided a list of acceptable documents in the application. Acceptable documents include a driver's license, birth certificate, government-issued photo ID, or US passport. Boards review the documentation provided by parents and validate identity information such as name, date of birth, and Social Security number (if voluntarily provided) of parents and children through a data-match process with state and federal databases.</b>

Required at Initial Determination	Required at Redetermination	Description
[x]	[ ]	<p>Applicant's relationship to the child. Describe how you verify: <b>Parents will upload documents into TX3C.</b></p> <p><b>Acceptable documentation includes the child's birth certificate or hospital or public health birth record. In cases of in loco parentis documentation, Boards must verify the reason that the parent is unavailable to care for the child. Examples of acceptable documentation include:</b></p> <p><b>Military orders;</b></p> <p><b>A document from a licensed medical professional stating the medical condition that makes the parent unable to care for his or her child;</b></p> <p><b>A commitment order from a court; and</b></p> <p><b>A sworn affidavit attesting to:</b></p> <p><b>the circumstances of how and why the caretaker assumed responsibility for the child;</b></p> <p><b>the whereabouts of the natural parent(s);</b></p> <p><b>the caretaker's relationship to the child; and</b></p> <p><b>the length of time the child has been with the caretaker.</b></p> <p><b>Boards must verify that the caretaker is responsible for the child. Examples of acceptable documentation include:</b></p> <p><b>Military power of attorney appointing the caretaker as the guardian of the child;</b></p> <p><b>Notarized power of attorney; or</b></p> <p><b>A sworn affidavit of temporary custody or guardianship of the child and one of the following:</b></p> <p><b>the caretaker's most recent IRS tax return listing the child as a dependent;</b></p> <p><b>a letter from a child care center or other independent, nonrelative, verifiable source that can establish the individual's parental and financial responsibility for the child;</b></p> <p><b>a letter from an independent school district (ISD); or</b></p> <p><b>documentation that the caretaker is receiving TANF benefits on behalf of the child or has received benefits within the past six months.</b></p>

Required at Initial Determination	Required at Redetermination	Description
[x]	[ ]	<p>Child's information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe how you verify: <b>Parents will upload documents into TX3C. Acceptable documentation includes:</b></p> <p>A birth certificate;  A US passport;  A hospital or public health birth record;  A church or baptismal record (United States or its territories);  TANF, SNAP, Medicaid, or other public assistance documentation; or  Documentation proving qualified alien status: green card, asylum grant letter, I-94, I-571, or I-551.</p>
[x]	[x]	<p>Work. Describe how you verify: <b>Parents will upload documents into TX3C. Acceptable documents include:</b></p> <p>Pay stubs;  Pay statements;  Time sheets; and  Employer verification form.</p>
[x]	[x]	<p>Job training or educational program. Describe how you verify: <b>Parents will upload documents into TX3C. Acceptable documents include:</b></p> <p>Proof of course enrollment;  Course schedules; and  Transcripts.</p>
[x]	[x]	<p>Family income. Describe how you verify: <b>Parents will upload documents into TX3C. Acceptable documents include check stubs and tax returns.</b></p> <p>Board contractors review the income reported and exclude those sources disallowed by rule from the calculation. Boards ensure that the family income is calculated in accordance with TWC guidelines to:</p> <p>Consider irregular fluctuations in earnings; and  Ensure that temporary increases in income, including temporary increases that result in monthly income exceeding 85 percent of SMI, do not affect eligibility or the parent share of cost.</p>

Required at Initial Determination	Required at Redetermination	Description
[x]	[x]	Household composition. Describe how you verify: <b>Parents will upload documents into TX3C. Acceptable documents include public assistance records and tax returns.</b>
[x]	[x]	Applicant residence. Describe how you verify: <b>Parents will upload documents into TX3C. Acceptable documents include:</b>  <b>Utility bills;</b> <b>Rental agreements;</b> <b>Leases; and</b> <b>Home titles.</b>
[x]	[ ]	Other. Describe how you verify: <b>In accordance with the Texas Child Care Disaster and Emergency Preparedness Plan and for families affected by declared national or state emergencies and served using emergency federal funds, TWC may allow Boards to waive documentation requirements as necessary for a period of no more than three months. Following the waiver period, the family must submit required documentation to determine eligibility for CCS to continue.</b>

#### 2.2.9 Exception to TANF work requirements

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

- a. Identify the TANF agency that established these criteria or definitions: **TWC administers the TANF/Choices program, which is the employment and training component of TANF in Texas. HHSC administers the TANF benefit program. Boards administer the Choices program at the local level and ensure that participants are made aware that if they are unable to obtain child care to participate in Choices, they will be granted good cause and will not receive a TANF sanction for failure to participate in the Choices program.**
- b. Provide the following definitions established by the TANF agency:
  - i. **“Appropriate child care”: Relatives who meet the requirements stipulated in 45 CFR §98.2 and who are eligible under CCS rule §809.91(e); or Child care facilities licensed by or registered with Child Care Regulation (CCR) and those operated and monitored by US military services.**
  - ii. **“Reasonable distance”: TWC grants Boards the authority to define "reasonable distance" for each LWDA based on the LWDA's specific geography and**



transportation systems.

- iii. **“Unsuitability of informal child care”: Any informal child care that does not meet the definition of appropriate child care or is deemed inappropriate by the parent is considered unsuitable.**
- iv. **“Affordable child care arrangements”: Child care arrangements that fall within the maximum rates established by each Board. Parents participating in Choices are exempt from co-payments.**
- c. How are parents who receive TANF benefits informed about the exception to the individual penalties associated with the TANF work requirements?
  - i. ☐ In writing
  - ii. ☐ Verbally
  - iii. ☒ Other. Describe: **TANF parents are informed about exceptions at the Workforce Orientation for Applicants. They are also provided this information in writing in their Family Employment Plan which is jointly developed between Choices participants and Choices program staff.**

## 2.3 Prioritizing Services for Vulnerable Children and Families

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

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

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

### 2.3.1 Lead Agency definition of priority groups

Describe how the Lead Agency defines:

- d. **“Children with special needs.” The following groups are considered children with special needs and vulnerable populations (CCS Guide, Section B-402.e):**  
  
**Children of parents on military deployment whose parents are unable to enroll in military-assistance program;**  
**Children of teen parents; and**  
**Children with disabilities.**  
  
**These children are included in the Second Priority Group, which also includes children of a qualified veteran/spouse, children of a foster youth, and children experiencing homelessness.**
- e. **“Families with very low incomes.” Families with very low incomes, which are included in the First Priority Group, is defined as families eligible for the following (CCS Guide, Section B-400):**

Choices child care;  
TANF Applicant child care;  
SNAP E&T child care; and  
At-Risk child care for former Choices child care recipients whose TANF benefits were denied or voluntarily ended within the last 12 months due to employment, timing out of benefits, or an earnings increase.

Children in families with very low incomes are in the First Priority Group and are assured CCS.

### 2.3.2 Prioritization of child care services

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

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

Population Prioritized	Prioritize for enrollment in child care services	Serve without placing on waiting list	Waive co-payments as described in 3.3.1	Pay higher rate for access to higher quality care	Use grants or contracts to reserve spots	Other
Children with special needs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Describe: Providers serving children with disabilities may receive up to 190 percent of the provider's payment rate for eligible children requiring extra classroom support.
Families with very low incomes	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe:

Population Prioritized	Prioritize for enrollment in child care services	Serve without placing on waiting list	Waive co-payments as described in 3.3.1	Pay higher rate for access to higher quality care	Use grants or contracts to reserve spots	Other
Children experiencing homelessness, as defined by CCDF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Describe: <b>Families with children experiencing homelessness have up to three months to provide documentation verifying the child's age and citizenship or legal immigration status and the parent's activity participation at any level to continue care for their full 12-month eligibility period. Families of children experiencing homelessness are income-eligible based on their homelessness status and are not required to submit income documentation. (CCS Guide D-600).</b>
(Optional) Families receiving TANF, those attempting to transition off TANF, and those at risk of becoming dependent on TANF	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe:

- a. Does the Lead Agency define any other priority groups?

☐ No.

☒ Yes. If yes, identify the populations prioritized and describe how the Lead Agency prioritizes services: **As also described in 2.2.6, TWC has established a Second Priority Group (CCS Guide B-402). The Second Priority Group are served subject to availability of funds, and are served in the following order of priority:**

**Children who need to receive protective services child care;  
Children of a qualified veteran or qualified spouse;  
Children of a foster youth;  
Children experiencing homelessness (previously described) (included in TWC's CCDF definition of protective care);  
Children of parents on military deployment whose parents are unable to enroll in military-funded child care assistance programs;  
Children of teen parents; then  
Children with disabilities.**

### 2.3.3 Enrollment and grace period for children experiencing homelessness

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

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

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

- a. Describe the strategies to allow CCDF enrollment of children experiencing homelessness while required eligibility documentation is obtained: **For children experiencing homelessness, CCS rules exempt the family from the parent share of cost (§809.19(a)(2)(C)) and require that the child is initially enrolled for a period of three months to allow the parent to provide documentation verifying the child's eligibility (§809.52).**
- b. Describe the grace period for each population below and how it allows them to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements.
- i. Provide the policy for a grace period for:
- Children experiencing homelessness: **HHSC CCR minimum standards provide a 30-day grace period to comply with immunization and other health and safety requirements (26 TAC 744.613(c)(2); 26 TAC 746.613(c)(2); 26 TAC 747.613(c)(2)).**
- Children who are in foster care: **For children who are in foster care, CCR minimum standards provide a 30-day grace period to comply with**

**immunization and other health and safety requirement (26 TAC 744.613(c)(2); 26 TAC 746.613(c)(2); 26 TAC 747.613(c)(2)).**

- ii. Does the Lead Agency certify that the length of the grace period was established in consultation with the State, Territorial, or Tribal public health agency?

☒ Yes.

☐ No. If no, describe:

- c. Describe how the Lead Agency coordinates with licensing agencies and other relevant State, Territorial, Tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements: **Boards must ensure that consumer education information, including information provided through a Board's website, contains, at a minimum, information on the prevention and control of infectious diseases, including immunizations (CCS rule §809.15(b)(2) and CCS Guide, Section H-101).**

CCR minimum standards require that families with children receiving services during a grace period be referred to an appropriate health-care professional to obtain the required immunizations (26 TAC §746.613(c)). The DSHS rule at 25 TAC §97.66, Provisional Enrollment for (Non-Higher Education; Non-Veterinary) Students and Children, establishes the guidelines for provisional enrollment as described here.

TWC coordinates with other agencies serving young children, including those experiencing homelessness through the standing ECIA Workgroup. The ECIA Workgroup includes leadership and program administration level staff from TWC, the TEA, HHSC, DFPS, and DSHS. In FY'25, the ECIA Workgroup plans to enhance the state's cross-agency, parent information portal to include information and resources specific to families experiencing homelessness.

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

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

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

- a. Check the strategies the Lead Agency or partners utilize to conduct outreach and provide services to eligible families with limited English proficiency. Check all that apply.
- i. ☒ Application in languages other than English (application and related documents, brochures, provider notices).
  - ii. ☒ Informational materials in languages other than English.
  - iii. ☒ Website in languages other than English.
  - iv. ☐ Lead Agency accepts applications at local community-based locations.
  - v. ☒ Bilingual caseworkers or translators available.

- vi. ☒ Bilingual outreach workers.
  - vii. ☒ Partnerships with community-based organizations.
  - viii. ☒ Collaboration with Head Start, Early Head Start, or Migrant and Seasonal Head Start.
  - ix. ☒ Home visiting programs.
  - x. ☐ Other. Describe:
- b. Check the strategies the Lead Agency or partners utilize to conduct outreach and provide services to eligible families with a person(s) with a disability. Check all that apply.
- i. ☒ Applications and public informational materials available in braille and other communication formats for access by individuals with disabilities.
  - ii. ☒ Websites that are accessible (e.g., Section 508 of the Rehabilitation Act).
  - iii. ☐ Caseworkers with specialized training/experience in working with individuals with disabilities.
  - iv. ☒ Ensuring accessibility of environments and activities for all children.
  - v. ☒ Partnerships with State and local programs and associations focused on disability- related topics and issues.
  - vi. ☐ 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.
  - vii. ☒ Partnerships with State and local IDEA Part B, Section 619 and Part C providers and agencies.
  - viii. ☒ Availability and/or access to specialized services (e.g., mental health, behavioral specialists, therapists) to address the needs of all children.
  - ix. ☐ Other. Describe:

#### 2.4.2 Families experiencing homelessness: Outreach and technical assistance efforts

- a. Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness and their families.
  - i. ☐ Lead Agency accepts applications at local community-based locations.
  - ii. ☒ Partnerships with community-based organizations.
  - iii. ☒ Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care.
  - iv. ☐ Other. Describe:
- b. The Lead Agency must provide training and technical assistance (TA) to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness.
  - i. Describe the Lead Agency's training and TA efforts for providers in identifying and

serving children and their families experiencing homelessness. **TWC developed guidance in 2018 that helps Boards identify and serve families and individuals experiencing homelessness. Boards use the information to inform assistance and training offered to providers.**

**TWC's new online parent application in TX3C will include screening questions that help determine a family's status without expecting them to know the McKinney-Vento definition (for example, Are you currently staying with someone else because you lost your housing or cannot afford housing?).**

**The application will also include guidance for parents experiencing homelessness on alternatives for providing contact information if they lack a permanent address.**

- ii. Describe the Lead Agency's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness. **TWC developed guidance in 2018 that helps Boards identify and serve families and individuals experiencing homelessness. TWC continues to offer guidance as needed.**

## 2.5 Promoting Continuity of Care

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

### 2.5.1 Children's development

Describe how the Lead Agency's eligibility, enrollment, reporting, and redetermination policies promote continuity of care in order to support children's development. **CCS rule §809.42(b) requires Boards to ensure that eligibility for CCS is redetermined no sooner than 12 months following the date of the initial determination or most recent redetermination. Families that are recertifying their eligibility are not subject to the waiting list.**

**Boards ensure that parents experiencing work or school/training activity interruptions continue receiving CCS at the same level for at least three months. CCS rule §809.51 states that:**

**(a) if the child meets all the applicable eligibility requirements for CCS on the date of the most recent eligibility determination or redetermination, the child must be considered to be eligible and will receive services during the 12-month eligibility period described in CCS rule §809.42, regardless of any:**

- (1) change in family income, if that family income does not exceed 85 percent of SMI for a family of the same size; or**
- (2) temporary change in the ongoing status of the child's parent as working or attending a job training or education program.**

**(b) Boards must ensure that care continues at the same level for a period of not less than three months after loss of work or cessation of attendance at a job training or educational program.**

(c) If a parent resumes work or attendance at a job training or education program at any level and at any time during the three-month activity interruption period, the Board must ensure that:

- (1) care will continue to the end of the 12-month eligibility period at the same or greater level, depending upon any increase in the activity hours of the parent;
- (2) the parent share of cost will not be increased during the remainder of the 12-month eligibility period, including for parents who are exempt from the parent share of cost pursuant to CCS rule §809.19 of this chapter; and
- (3) the Board's child care contractor verifies only:

(A) that the family income does not exceed 85 percent of SMI; and

(B) the resumption of work or attendance at a job training or education program.

#### 2.5.2 Minimum 12-month eligibility

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

- Regardless of changes in income, Lead Agencies may not terminate CCDF assistance during the minimum 12-month period if a family has an increase in income that exceeds the Lead Agency's income eligibility threshold but not the federal threshold of 85 percent of SMI; and
- Regardless of temporary changes in participation in work, training, or educational activities.
  - a. Does the Lead Agency certify that their policies or procedures provide a minimum 12-month eligibility period for each child at initial eligibility determination?

☐ Yes.

☒ No. If no, describe: **TWC received a potential monitoring finding related to practices around adding a child to the family's case. TWC is in the process of implementing changes, as outlined below, to address the issue.**

#### **Adding a Child to the Family's Case**

**TWC's current child care case management system was designed to establish 12-month eligibility periods based upon a family's eligibility. Additional children added to a case were added based upon the pre-existing 12-month eligibility period. This was done to create family-friendly policies that aligned all children's redetermination date.**

**TWC is in the process of launching a new child care case management system. TWC will issue instructions to the Boards to ensure that new children added to an existing Child Care Services (CCS) case will be authorized for 12-months of child care, as follows:**

**Boards must extend redetermination dates for all children in a family when an additional child is enrolled in CCS to ensure that every child in the family receives a minimum of 12 months of care, with the exception of Department of Family and Protective Services (DFPS) funded care in which each child's case is considered a "family of one."**

**Boards must ensure staff members manually adjust the family's eligibility redetermination**



date in TX3C when a new child in care results in an extended eligibility period.

Boards must notify both parents and providers of the extension of CCS eligibility when the redetermination date is extended due to a new child added to the case.

This change will be implemented for new children enrolled in CCS with the launch of the Texas Child Care Connection (TX3C) on December 9, 2024.

#### **Implementation Plan**

**Overall Target Date for Compliance: December 2025**

#### **Action Steps, Milestones, and Timeline:**

TWC informs Board Child Care Network (consisting of Board personnel overseeing the Child Care Services program) of the issue and of the upcoming changes ☐ completed February 29, 2024

TWC issued Workforce Development (WD) Letter 06-24, Change 1 to provide new guidance requiring Boards to extend a current family's redetermination date to no sooner than 12 months from the date of a new sibling's eligibility ☐ completed July 27, 2024.

TWC issued a desk aid to instruct Boards on the manual process to override the eligibility date in TX3C ☐ completed August 16, 2024.

TWC also received a potential monitoring finding related to practices around a family's voluntary withdrawal from care. TWC is in the process of implementing changes, as outlined below, to address the issue.

#### **Voluntary Withdrawal**

TWC has previously terminated care for families upon the parents' request due to relocation outside of Texas or otherwise no longer requiring Child Care Services in Texas. Additionally, TWC offered parents the option of voluntary suspension to support them during temporary changes in circumstances where a child did not need Child Care Services. Voluntary suspension status keeps the case open through the end of the 12-month eligibility period so that the child can quickly receive a new referral for care once it is needed.

Based upon OCC instruction, TWC will no longer allow a family to voluntarily withdraw from CCS and terminate their CCS case. Instead, TWC will suspend these cases, and the suspension will continue through the family's 12-month eligibility period. TWC issued new guidance to Boards as follows:

Boards must be aware that pursuant to 45 CFR 98.21, eligibility may not be redetermined sooner than 12 months of the most recent eligibility determination. Per guidance from the federal Office of Child Care, this policy applies to families that voluntarily withdraw from the program. Effective September 1, 2024, Boards must suspend care rather than terminating eligibility. Eligibility should be terminated when the end of the 12-month period is reached if the family has not come back into care.

## Implementation Plan

Overall Target Date for Compliance: December 9, 2024

### Action Steps, Milestones, and Timeline:

TWC issued WD Letter 06-24, Change 1 to provide new guidance to Boards stating that they may not terminate a family's eligibility during a 12-month eligibility period ☑ Completed June 27, 2024.

Full implementation is dependent on new data system ☑ Launches December 9, 2024.

- b. Does the Lead Agency certify that its definition of "temporary change" includes each of the minimum required elements?
1. Any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness.
  2. Any interruption in work for a seasonal worker who is not working between regular industry work seasons.
  3. Any student holiday or break for a parent participating in a training or educational program.
  4. Any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program.
  5. Any cessation of work or attendance at a training or educational program not listed above. In these cases only, Lead Agencies may establish a period of 3 months or longer.
  6. Any change in age, including a child turning 13 years old during the minimum 12-month eligibility period.
  7. Any changes in residency within the State or Territory.
- ☒ Yes.
- ☐ No. If no, describe:
- c. Are the policies different for redetermination?
- ☒ No.
- ☐ Yes. If yes, provide the additional/varying policies for redetermination:

### 2.5.3 Job search and continued assistance

- a. Does the Lead Agency consider seeking employment (engaging in a job search) as an eligible activity at initial eligibility determination and/or at the minimum 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of 3 months of job search.) Check all that apply:
- i. ☒ Yes. The Lead Agency does consider seeking employment (engaging in a job search) as an eligible activity at initial eligibility determination. If yes, describe: **CCS rule §809.56, states that a parent, including a parent in a dual-parent family, is eligible for CCS during an initial three-month job search period. If total activity participation of at least 25 hours for a single-parent family or a total combined 50**

hours per week for dual-parent families, which must include a minimum of 12 hours in employment for a single-parent family and a total combined 25 hours in employment for a dual-parent family, are met within the initial three months, eligibility will continue for a total of 12 months, inclusive of the care provided during the initial job search period, provided that the family income does not exceed 85 percent of the state median income. If the family does not meet minimum activity requirements under this subsection within three months, care must be terminated.

- ii. ☒ Yes. The Lead Agency does consider seeking employment (engaging in a job search) as an eligible activity at redetermination. If yes, describe: **Boards must ensure that child care continues for a minimum of three months or up until the scheduled redetermination if sooner, to allow the parent to resume participation in an activity (CCS Guide D-802).**

Boards must be aware that if at time of eligibility redetermination, the family is experiencing a temporary status change in work, education or job training, the Board has the option to extend the eligibility period to the date the parent is expected to return to work, school, or training. In accordance with local procedures, the redetermination would then be based on the work, education, training, and income upon the parent's return to activity. Effective October 1, 2017, Boards must ensure that extensions of the 12-month eligibility periods are only granted on a case-by-case basis when a customer is experiencing a temporary status change in work, education, or training. Boards must document in TWIST Counselor Notes the duration of and reason for any extension granted for a customer's eligibility redetermination. (CCS Guide D-1005).

- iii. ☐ No. The Lead Agency does not consider seeking employment (engaging in a job search) as an eligible activity at initial eligibility determination or redetermination.

- b. Does the Lead Agency continue assistance during the minimum 12-month eligibility period when a parent has a non-temporary loss or cessation of eligible activity?

☐ Yes. The Lead Agency continues assistance.

☒ No, the Lead Agency discontinues assistance.

- i. If no, describe the Lead Agency's policies for discontinuing assistance due to a parent's non-temporary change: **During the period of time between eligibility redeterminations, a Board shall discontinue CCS due to a parent's loss of work or cessation of attendance at a job training or educational program that does not constitute a temporary change as described in Section 3.4.1. However, Boards must ensure that care continues at the same level for a period of not less than three months after such loss of work or cessation of attendance at a job training or educational program (CCS rule §809.51(b)). Boards must provide parents written notification at least 15 calendar days before any termination of CCS (CCS rule §809.71(9)).**
- ii. If no, describe what specific actions/changes trigger the job-search period after each such loss or cessation: **The job search period is triggered based on parent self-report of permanent cessations of activity or identification of those who have**

filed an unemployment insurance (UI) claim using the TWC UI Early Warning Report. The UI Early Warning Report seeks to identify child care parents who filed a UI claim and who may no longer be working and therefore may have experienced a nontemporary change in work status. A parent identified in the report may or may not have experienced a nontemporary change in work, so Boards must verify the customer's employment and/or training status prior to placing them on a job search period. The parent is required to report only a permanent cessation of activity (§809.73(b)(2)). The three-month activity interruption for job search begins the day after the activity ends and is tracked in TX3C.

If the parent does not report a permanent cessation that has already exceeded three months and the Board contractor discovers and verifies with the parent that one has occurred, care must be terminated after proper notice is provided to the parent. Before deciding to end care, verification that the parent has not resumed participation in any activity at any level must occur.

- iii. If no, how long is the job-search period where a family can continue assistance (must be at least 3 months)? **Boards must ensure that care continues at the same level for a period of not less than three months after such loss of work or cessation of attendance at a job training or educational program.**
- c. The Lead Agency may discontinue assistance prior to the next minimum 12-month redetermination in the limited circumstances listed below. Check and provide the policy for all circumstances in which the Lead Agency chooses to discontinue assistance prior to the next minimum 12-month redetermination:
  - i. ☐ Not applicable.
  - ii. ☒ Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

Provide the Lead Agency's policy defining the number of unexplained absences identified as excessive: **If a child has exceeded 40 total unexplained absences during the most recent eligibility period, then the child shall be terminated from care because of excessive unexplained absences. Exceptions are provided for court-ordered visitation, documented chronic illness, or disability (CCS rule §809.78).**

**When a child reaches 15 and 30 cumulative absences, notice regarding the potential termination must be provided to the parent and provider before terminating care, allowing the parent to explain the absences or determine whether a voluntary suspension may be appropriate.**
  - iii. ☒ A change in residency outside of the State or Territory.

Provide the Lead Agency's policy for a change in residency outside the State or Territory: **Boards must terminate CCS when a family experiences a change in residency outside of the state (CCS Guide D-901.a).**
  - iv. ☒ Substantiated fraud or intentional program violations that invalidate prior

determinations of eligibility.

Provide the Lead Agency's definition of fraud/intentional program violations that lead to discontinued assistance: **As described in Section G of the CCS Guide, and in CCS rules §809.111 and §809.112, the following parental actions may be grounds for suspected fraud and cause for Boards to conduct fraud fact-finding:**

**Not reporting or falsely reporting at initial eligibility or at eligibility redetermination: household composition or income sources or amounts that would have resulted in ineligibility or a higher parent share of cost; and/or work, training, or education hours that would have resulted in ineligibility.**

**Not reporting during the 12-month eligibility period: changes in income or household composition that would cause the family income to exceed 85 percent SMI (taking temporary fluctuations of income into consideration); a permanent loss of job or cessation of training or education that exceeds three months; and/or improper or inaccurate attendance reporting.**

**These violations may result in the following actions:**

**Recouping funds from the parent;  
Prohibiting future child care eligibility until a recoupment is repaid in full, provided the prohibition does not result in a Choices or SNAP E&T participant becoming ineligible;  
Requiring parents to select a regulated child care provider;  
Terminating care during the 12-month eligibility period if eligibility was determined using fraudulent information provided by the parent; and  
Any other action consistent with the intent of the governing statutes or regulations to investigate, prevent, or stop suspected fraud.**

**Per CCS rule §809.19(a)(3)), failure to pay the parent share of cost may constitute an intentional program violation and result in termination of care. Before terminating care, Boards must follow locally established policies regarding the evaluation of each family's financial situation and a possible temporary reduction in the parent share of cost based on extenuating circumstances. Parents must also receive written notice of possible termination resulting from failure to pay the parent share of cost prior to services being terminated.**

#### **2.5.4 Reporting changes during the minimum 12-month eligibility period**

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

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

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

☒ Yes.

☐ No. If no, describe:

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

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

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

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

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

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

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

- a. ☒ Not applicable. The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and therefore is not required to provide a graduated phase-out period. (If checked, skip to question 3.1.1.)

- b. ☐ The Lead Agency sets the second tier of eligibility at 85 percent of SMI. If checked, describe the policies and procedures:
  - i. ☐ Lead Agency adjusts the family's co-pay during the graduated phase-out period. If checked, describe how the Lead Agency gradually adjusts co-payment for families under a graduated phase-out period in proportion to a family's income growth. Include information on the percentage or amount of change made in the co-payment during graduated phase-out:
  - ii. ☐ Lead Agency requires additional reporting requirements during the graduated phase-out period. If checked, describe:
- c. ☐ The Lead Agency sets the second tier of eligibility at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold. If checked, provide the following information:
  - i. Provide the income level (\$/month) and the percent of SMI for the second tier of eligibility for a family of three:
  - ii. Describe how the second eligibility threshold takes into account the typical household budget of a low-income family:
  - iii. Describe how the second eligibility threshold is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:
  - iv. Describe how the second eligibility threshold reasonably allows a family to continue accessing child care services without unnecessary disruption:
  - v. ☐ Lead Agency adjusts the family's co-pay during the graduated phase-out period. If checked, describe how the Lead Agency gradually adjusts co-payment for families under a graduated phase-out period in proportion to a family's income growth. Include information on the percentage or amount of change made in the co-payment during graduated phase-out:
  - vi. ☐ Lead Agency requires additional reporting requirements during the graduated phase-out period. If checked, describe:

### 3 Child Care Affordability

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

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

### 3.1 Family Co-payments

Lead Agencies must establish and periodically revise a sliding-fee scale for families receiving CCDF services that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) and does not create a barrier to receiving CCDF assistance. In addition to income and the size of the family, the Lead Agency may use other factors as appropriate when determining family contributions/co-payments. Lead Agencies may not use price of care or amount of subsidy payment in determining co-payments. Lead Agencies must ensure that the total payment to a child care provider is not reduced because of family's lowered or waived co-payment.

#### 3.1.1 Family co-payment

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

- a. What is the maximum percent of a family's gross income any family could be charged as a co-payment? **TWC will implement a new policy on September 1, 2024, that caps co-payments at 7 percent of a family's gross income for children in care. TWC is not able to implement this change with the current case management system. TWC will implement the new copayment methodology with the launch of TX3C in December 2024. This policy change will both be rolled out incrementally as families are recertified, and TWC will therefore request a temporary waiver of this federal requirement.**

- b. Does the Lead Agency certify that their sliding fee scales are always based on income and family size (regardless of how many different scales they may use)?

☒ Yes.

☐ No. If no, describe:

#### 3.1.2 Sliding fee scale

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

- a. Is the sliding fee scale set statewide?

☐ Yes.

☒ No. If no, describe how the sliding fee scale is set: **Currently, the parent copayments are set locally by each of the 28 Boards based on income limits available at <https://www.twc.texas.gov/sites/default/files/ccel/docs/bvy25-income-ranges-for-parent-share-of-cost-assessment-twc.pdf>.**

**Effective December 9, 2024, TWC will implement the new statewide policy that caps family copayments at 7 percent. The new sliding fee scale is available at <https://www.twc.texas.gov/sites/default/files/ccel/docs/bcy25-psoc-chart-twc.pdf>.**



- b. Complete the table below. If the sliding fee scale is not set statewide, complete the table for the most populous locality:

	<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>
Family Size	Lowest monthly income at initial eligibility where the family is first charged a co-pay (greater than \$0).	What is the monthly co-payment for a family of this size based on the income level in (A)?	What percentage of income is the co-payment in (B)?	Highest monthly income at initial eligibility where a family is charged a co-pay before a family is no longer eligible.	What is the monthly co-payment for a family of this size based on the income level in (D)?	What percentage of income is this co-payment in (E)?
<i>1</i>						
<i>2</i>	852.00	12.00	1.41	4971.00	360.00	7.24
<i>3</i>	1076.00	12.00	1.11	6141.00	360.00	5.86
<i>4</i>	1300.00	12.00	0.09	7311.00	360.00	4.92
<i>5</i>	1524.00	12.00	0.79	8480.00	360.00	4.25

- c. What is the effective date of the sliding-fee scale(s)? **October 1, 2024**

- d. Provide the link(s) to the sliding-fee scale(s):  
<https://www.twc.texas.gov/sites/default/files/ccel/docs/bvy25-income-ranges-for-parent-share-of-cost-assessment-twc.pdf> and  
<https://www.twc.texas.gov/sites/default/files/ccel/docs/bcy25-psoc-chart-twc.pdf>.

- e. Does the Lead Agency allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment?

☐ No.

☒ Yes.

If yes:

- i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy does not provide a barrier and promotes affordability and access for families: **CCS rule §809.92 states that Boards may develop a policy that allows providers to charge parents more than the assessed parent share of cost in instances where the provider's published rate exceeds the Board's reimbursement rate (including the assessed parent share of cost) to all parents except (1) parents who are exempt from a copay; (2) parents with a copay calculated at zero; or (3) parents with child care services during the initial job search period.**

**This policy is determined at the local level and is based on the needs of the LWDA**

related to child care capacity, availability, and accessibility. By allowing providers to charge the difference in certain local areas, Boards can support more parental choice and child care access for families they serve.

- 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: **Out of the 28 Boards, two Boards (Workforce Solutions of Texoma and Workforce Solutions Permian Basin) have opted to allow providers to charge families the difference between their published rate and the reimbursement rate. Data on the size and frequency of those amounts follows:**

#### **Texoma**

**7 out of 62 CCDF-funded providers charge the difference.**

**Approximately 15 out of 79,316 CCDF-funded families pay these additional charges which range from \$7.20 to \$757.00 per month.**

#### **Permian Basin**

**31 out of 92 CCDF-funded providers charge the difference.**

**Approximately 675 out of 79,316 CCDF-funded families pay these additional charges which range from \$1.00 to \$1,487.20 per month.**

**In Texoma, 25 out of the 40 (63 percent) CCDF-funded providers in Texoma are in a child care desert. In Permian Basin, 42 out of the 67 (63 percent) CCDF-funded providers are in a child care desert. Allowing providers to charge families the difference between the published rate and the reimbursement rate supports parental choice and child care access for families in these LWDAs.**

## **3.2 Calculation of Co-Payment**

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

### **3.2.1 Family co-payment calculation**

- a. How is the family's contribution calculated, and to whom is it applied? Check if the fee is a dollar amount or if the fee is a percent of income below, and then check all that apply under the selection, as appropriate.
  - i. ☒ The fee is a dollar amount and (check all that apply):
    - ☐ The fee is per child, with the same fee for each child.
    - ☐ The fee is per child and is discounted for two or more children.
    - ☐ The fee is per child up to a maximum per family.
    - ☐ No additional fee is charged after a certain number of children.
    - ☒ The fee is per family.
  - ☒ The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe: **Effective December 9, 2024, TWC will implement the new statewide policy that caps family copayments at 7**

percent. The statewide sliding fee scale is determined by:

Establishing a minimum parent share of cost amount of 2 percent of the family income for families beginning at the lowest income level (1 percent of the SMI); and

Gradually increasing the parent share of cost up to a maximum of 7 percent of the family income for a family from 76 to 85 percent of the SMI.

☐ Other. Describe:

ii. ☒ The fee is a percent of income and (check all that apply):

☐ The fee is per child, with the same percentage applied for each child.

☐ The fee is per child, and a discounted percentage is applied for two or more children.

☐ The fee is per child up to a maximum per family.

☐ No additional percentage is charged after a certain number of children.

☒ The fee is per family.

☐ The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe:

☐ Other. Describe:

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

☐ No.

☒ Yes.

If yes, check and describe those additional factors below:

i. ☒ Number of hours the child is in care. Describe: **CCS rule §809.19 allows Boards to reduce the assessed parent share of cost upon the child's referral for part-time care. The following 12 of the 28 Boards have a policy to reduce the parent share of cost amount assessed upon the child's referral for part-time or blended care:**

Brazos Valley;  
Capital Area;  
Central Texas;  
Concho Valley;  
Heart of Texas;  
Middle Rio Grande;  
North Central Texas;  
Panhandle;  
South Plains;  
Southeast Texas;  
Texoma; and

**West Central Texas.**

- ii. ☐ Quality of care (as defined by the Lead Agency). Describe:
- iii. ☐ Other. Describe:
- c. Describe any other policies the Lead Agency uses in the calculation of family co-payment to ensure it does not create a barrier to access. Check all that apply:
  - i. ☐ Base co-payments on only a portion of the family's income. For instance, only consider the family income over the federal poverty level.
  - ii. ☒ Base co-payments on the number of children in the family and reduce a portion of the co-payments as the number of children being served increases.
  - iii. ☒ Other. Describe: **Effective December 9, 2024, TWC's new sliding fee scale includes slight increases based on the number of children in care. However, TWC will cap each family's total co-payment amount at 7% of the family's income regardless of the number of children in care.**

### 3.3 Waiving Family Co-payment

#### 3.3.1 Waiving family co-payment

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

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

☐ No, the Lead Agency does not waive any family contributions/co-payments. (Skip to question 4.1.1.)

☒ Yes. If yes, identify and describe which family contributions/co-payments waived.

- i. ☐ Families with an income at or below 100% of the Federal Poverty Level for families of the same size.
- ii. ☐ Families with an income above 100% but at or below 150% of the Federal Poverty Level for families of the same size.
- iii. ☐ Families experiencing homelessness.
- iv. ☐ Families with children with disabilities.
- v. ☐ Families enrolled in Head Start or Early Head Start.
- vi. ☒ Children in foster care or kinship care, or otherwise receiving or needing to receive protective services. Describe the policy: **Parents who have children who are receiving protective services child care are exempt from paying a parent copay unless the DFPS assesses the parent share of cost.**
- vii. ☒ Families meeting other criteria established by the Lead Agency. Describe the policy: **As described in CCS rule §809.19(b), parents eligible for the following are exempt from paying a parent copay:**

**Choices child care;**

SNAP E&T child care; and  
Child care for a child experiencing homelessness.

Families who are initially eligible for child care with a three-month job search period will have their parents' share of cost set at the maximum based on their family size. The Board must waive the parent's share of cost during the initial job search period. If the parent begins to meet participation requirements within or by the end of the three months, the parent's share of cost will be reinstated based on the initially established amount or the actual family income, whichever amount is lower.

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

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

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

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

### 4.1 Access to Full Range of Provider Options

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

#### 4.1.1 Parent choice

- a. Identify any barriers to provider participation, including barriers related to payment rates and practices, (including for family child care and in-home providers), based on provider feedback, public comment, and reports to the Lead Agency: **To gain insight into the dynamics of which facilities accept children with subsidy scholarships and how it affects their pricing for such children, the Market Rate Survey (MRS) includes two questions. The first question, addressed to those who serve subsidized children, asks whether they**

charge more to families of subsidized children if their established rates are greater than the reimbursement they would receive (which includes the subsidy plus co-payment). As shown in the 2024 MRS, 2.1 percent of centers and 8.1 percent of homes indicated that they charged such families an additional amount. The proportion of centers charging families additional amounts has dropped by 60% in the past year, while among homes the rate is unchanged. The 2024 MRS data was collected between September 2023 and April 2024 and do not reflect changes in local Board policies to no longer allow providers to charge the difference to families. When the 2025-2027 State Plan was submitted, two boards allowed the practice of providers charging families the difference between their rates and the board's reimbursement rate.

The next question addressed to facilities that do not report serving subsidized children, asks whether they had a reason for not accepting subsidized children. The most common reason reported by both homes and centers is that families have not requested or needed subsidized care. About 19 percent of homes and 23 percent of centers did not provide a response. Another common reason among homes is that they do accept subsidized children but do not currently provide care for any subsidized children at the time of their interview. Also commonly reported by center respondents at about 12 percent is the paperwork or reporting requirements.

Less than 6 percent of centers and 3 percent of homes not serving subsidized children indicated they did not do so because reimbursement rates were too low, a number that has come down in recent years. Around 6 or 7 percent of centers and homes felt they needed more information or training to accept subsidized children. All patterns are similar to those seen in recent years.

Feedback was sought from providers who do not report serving subsidized children to find out the reasons for not accepting subsidized children. Respondents were able to select more than one response. Below is a summary of the responses from centers and homes:

1.4% of centers and 17.6% of homes indicated they are not currently caring for subsidized children, but do accept them;

6.7% of centers and 2.6% of homes indicated they are in the process of setting up to accept subsidized children;

28% of centers and 19.5% of homes indicated there have been no requests or need from families for subsidized care;

12.1% of centers and 6.1% of homes indicated paperwork or reporting requirements as a barrier;

3.2% of centers and 5.6% of homes indicated that reimbursement rates are too low;

No centers and 0.7% of homes indicated issues related to not receiving or receiving late parent co-payments;

0.3% of centers and 0.6% of homes indicated challenges with not receiving or receiving late CCS payments;

7.7% of centers and 1.9% of homes indicated that their facility is too new or too small;

6.3% of centers and 6.7% of homes indicated that they need more information or training about CCS;

4.9% of centers and 3.7% of homes indicated they are not a Texas Rising Star provider;

and

18.7% of centers and 22.8% of homes did not provide a reason.

In 2021, the Governor Abbott signed HB 2607, which requires all subsidy providers to participate in Texas Rising Star. Child care providers may enter the Texas Rising Star program at the Entry Level Designation and receive the base level provider payments for up to 24 months. Entry Level ensures that programs receiving subsidies in Texas meet a base level of quality as determined by their most recent 12 months of licensing history while also ensuring they are on a path to increase their level of quality over time.

In accordance with state law, if a participating program does not meet the Entry Level requirements, they are no longer eligible to receive child care subsidies regardless of whether they exist in a desert or serve an underserved population.

- b. Does the Lead Agency offer child care assistance through vouchers or certificates?  
☒ Yes.  
☐ No.
- c. Does the Lead Agency offer child care assistance through grants or contracts?  
☒ Yes.  
☐ No.
- d. Describe how the parent is informed that the child care certificate allows the option to choose from a variety of child care categories, such as private, not-for-profit, faith-based providers; centers; family child care homes; or in-home providers: **TWC and Boards use consumer education materials (flyers, forms, and brochures), verbal communication at the time of application, and Board websites. There are multiple points of communication throughout the eligibility and renewal process.**

CCS rule §809.15 requires Boards to inform parents of child care options by providing a description of the full range of eligible child care providers, including:

LCCCs;  
LCCHs;  
RCCHs; and  
The option to choose an eligible relative.

TWC rules require Boards to provide parents with:

A description of programs available in the LWDA relating to Texas Rising Star provider certification, providers participating in the Texas School Ready project, and other quality rating systems, including national accreditations;  
The CCR website and telephone number, so parents can be aware of health and safety requirements for regulated child care providers; and  
Information about 211 Texas.

TWC distributes a brochure to Boards with information for parents to consider when choosing child care, including quality considerations. Texas Government Code §2308.3171

requires that Boards post a list of child care providers that have met a quality indicator in a prominent place on the Board's website. The statute also requires any child care provider that cares for subsidized children to post its quality indicator at the entrance of the provider's facility.

TX3C includes TWC's Child Care Availability Portal. The portal will provide parents with detailed information about child care providers with available slots that meet their needs including location, subsidy status, Texas Rising Star quality level, available child care slots, a link directly to the provider's licensing and inspection history, and value-added information the provider may optionally include such as curriculum used, and special activities offered.

Upon the launch of the full TX3C case management system and parent portal December 9, 2024 target), TX3C will also allow parents to apply for CCDF subsidies directly from the TX3C website which will help parents to connect the information about providers that accept subsidy to the process of applying for child care assistance.

- e. Describe what information is included on the child care certificate: **Upon eligibility determination, parents receive a child care certificate (Notice of Action).** The parent may have already selected a provider but is not required to do so before receiving the certificate.

**A written eligibility Notice of Action includes:**

**A congratulatory opening statement;**

**The children authorized for care;**

**The dates of authorization (minimum of 12 months);**

**A child care provider selected by the parent or notice that parent needs to select a child care provider;**

**Specific eligibility reasons or elements;**

**The expected parent share of cost amount; and**

**The requirement to report changes.**

## 4.2 Assess Market Rates and Analyze the Cost of Child Care

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

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



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

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

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

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

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

- a. ☒ Market rate survey.
- i. When were the data gathered (provide a date range; for instance, September – December 2023)? **September 2023 to May 2024.**
- b. ☐ ACF pre-approved alternative methodology.
- i. ☐ The alternative methodology was completed.
- ii. ☐ The alternative methodology is in process.

*If the alternative methodology was completed:*

When were the data gathered and when was the study completed?

Describe any major differences between the pre-approved methodology and the final methodology used to inform payment rates. Include any major changes to stakeholder engagement, data, assumptions or proposed scenarios.

*If the alternative methodology is in progress:*

Provide a status on the alternative methodology and timeline (i.e., dates when the alternative methodology activities will be conducted, any completed steps to

date, anticipated date of completion, and expected date new rates will be in effect using the alternative methodology).

c. Consultation on data collection methodology.

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

- iii. State Advisory Council or similar coordinating body: **TWC solicited comments in 2016, when the MRS instrument was significantly modified, on the draft MRS implementation plan and survey questionnaires from Boards, CCR, TEA, the Children’s Learning Institute (CLI), and multiple child care policy and advocacy groups. The MRS methodology has not been significantly modified since this time.**
- iv. Local child care program administrators: **TWC solicited comments on the draft MRS implementation plan and survey questionnaires from providers that serve subsidized children.**
- v. Local child care resource and referral agencies: **TWC solicited comments on the draft MRS implementation plan and survey questionnaires from Boards and contractors that provide child care resource and referral services. TWC incorporated feedback into the survey methodology.**
- vi. Organizations representing child care caregivers, teachers, and directors from all settings and serving all ages: **TWC solicited comments on the draft MRS implementation plan and survey questionnaires from the Texas Licensed Child Care Association.**
- vii. Other. Describe: **After the vendor submitted its MRS implementation plan, which included the MRS statistical methodology and process, TWC provided a copy of the plan process and the draft MRS survey questionnaire to Boards, CCR, TEA, CLI, and multiple child care policy and advocacy groups. The stakeholders had 30 days to review and comment. TWC reviewed the comments with the vendor and incorporated changes as appropriate.**

**TWC funds and publishes the MRS every year. Each year, upon publication of the MRS, TWC also ensures that stakeholders are notified of the MRS each year. TWC also updates stakeholders on rate actions taken by the Commission in response to each year’s updated MRS as well as the complimentary Cost of Quality/Price Modeling Report.**

d. An MRS must be statistically valid and reliable.

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

- i. When was the market rate survey completed? **7/5/2024**
- ii. What was the time period for collecting the information (e.g., all of the prices in the survey are collected within a three-month time period)? **September 2023 to May 2024.**

- iii. Describe how it represented the child care market, including what types of providers were included in the survey: **The survey represents LCCCs, LCCHs, and RCCHs.**

**The MRS summarizes child care market rate data for the entire state of Texas and for each of its 28 LWDAs. The most recent age scheme (added in 2022) was included in this report. This scheme is more detailed than the traditional infant, toddler, preschool, and school-age scheme used prior to 2022. Instead, it uses eight age groups as mandated by recent legislation (Texas Government Code, §2308.315, implemented in FY'24) to characterize rates charged for child care. In limited areas of the report, it was necessary to characterize rates using the old scheme.**

- iv. What databases are used in the survey? Are they from multiple sources, including licensing, resource and referral, and the subsidy program? **The survey sample was drawn from a list of all 13,805 licensed and registered child care facilities provided by the HHSC CCR department on August 28, 2023. The list includes LCCCs, LCCHs, and RCCHs in each of the 28 LWDAs.**

**Before the survey sample was finalized, a match was performed between the list of sampled facilities and TWC's data indicating which facilities were serving subsidized children, and whose published rates were already available through administrative records. These partially subsidized facilities were randomly split into two groups, with one half being retained in the sample and the other half set aside to be excluded from further study. This sampling plan can be described as an under-sample of subsidized facilities, whose rate data are largely redundant with existing data sources, and a corresponding over-sample of non-subsidized facilities who rates constitute the bulk of the paid market and are not otherwise available without surveying. Before final rates were estimated, data from the statewide sample were combined with that from the local samples in their respective areas as well as the published rate data, and weighting schemes were applied as appropriate. The number of rate observations collected by this design was more than adequate to provide stable rate estimates. TWC provided the MRS researchers with the administrative data for providers that accept subsidy (reported published rates and their Texas Rising Star status/certification level).**

- v. How does the survey use good data collection procedures, regardless of the method for collection (mail, telephone, or web-based survey)? **Research staff members are provided detailed training and supervision on survey methodology, interviewing protocols, data collection, data entry, and tracking procedures.**

**Prior to interviews, the research team mails introductory postcards and/or emails to all facilities in the sample explaining the survey purpose, goals, objectives, confidentiality policies, and voluntary nature of participation.**

**Data collection began in September 2023 and ended in May 2024. Research staff members maintained a tracking database containing basic provider information and call history.**

- vi. What is the percent of licensed or regulated child care centers responding to the survey? **60.70**
- vii. What is the percent of licensed or regulated family child care homes responding to the survey? **36.90**
- viii. Describe if the survey conducted in any languages other than English: **Prior to interviews, the research team mailed introductory postcards and/or emails to all facilities in the sample explaining the survey purpose, goals, objectives, confidentiality policies, and voluntary nature of participation. Information was presented in both English and Spanish unless providers' surnames suggested they were of Vietnamese origin, in which case information was presented in both English and Vietnamese.**

**To prevent a delay in data collection, bilingual staff members (English/Spanish or English/Vietnamese) were hired to conduct interviews with centers and homes.**

- ix. Describe if data were analyzed in a manner to determine price of care per child: **Because different types of facilities tend to set their rates differently, analysis of center rates was based on the rates for a category of care (for example, full-day care for toddlers), while the rates for home-based care (LCCH and RCCH) were determined by the amounts charged for individual children.**

**In interviews with centers, research staff asked for the rates charged for a particular age group following a particular schedule. Research staff asked home-based facilities for the age and rate charged for each individual child.**

- x. Describe if data were analyzed from a sample of providers and if so, how the sample was weighted: **The data was analyzed from a sample of providers. It is a weighted sample, with an over-sample of non-urban providers that was necessary to estimate rates for less populous local board areas. The analysis was weighted to correct for this and related oversampling, as well as to correct for non-response bias.**

e. Price variations reflected.

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

- i. Describe how the market rate survey or pre-approved alternative methodology reflected variation in geographic area (e.g., county, region, urban, rural). Include information on whether parts of the State or Territory were not represented by respondents and include information on how prices or costs could be linked to local geographic areas. **Each of the 28 LWDAs were represented in the MRS. To accomplish this, a small statewide representative sample of 1,000 facilities was randomly selected to provide greater statistical power for estimating statewide rates and trends and increase the precision of rate estimates for the largest Boards that provide the bulk of care in the state. A second random sample was drawn from the remaining facilities to estimate rates at the LWDA level. For this latter sample, we chose a target number of centers and a separate target for homes from every LWDA based on projections of the number needed to yield an**

average of 200 independent rate observations across full-day rate categories.

Projections based on detailed response rates to the last three annual surveys indicated that, on average, 91 LCCCs, 36 LCCHs, and 95 RCCHs per LWDA were needed to reach this goal. These target numbers were then increased by between 5 percent and 18 percent for LWDA and facility type combinations that showed low response rates in recent surveys. The target number of facilities was then randomly selected from each LWDA, or if fewer providers were available in any given combination of LWDA and facility type, the entire population was selected (a complete census). Implementation of this sampling scheme resulted in all facilities of any type being selected from five LWDAs: 1, 7, 9, 17, and 21. In addition to these five, a complete census of LCCCs was necessary in five LWDAs, a complete census of LCCHs was necessary in 8 more LWDAs, and a complete census of RCCHs was necessary in 12 more LWDAs.

During interviews, research staff members screened out facilities that did not represent the true price market for child care in Texas. These facilities include those that only offered drop-in care, part-day care with no after-school care, summer camps, care provided to specific populations only (that is, children with special needs, children of teen moms, and children of staff at a company), and free/family-discounted child care services. School and kindergarten programs that did not offer regular after-school care and HS programs were also excluded. Finally, facilities that had closed or no longer had children enrolled were determined to be ineligible.

- ii. Describe how the market rate survey or pre-approved alternative methodology reflected variation in type of provider (e.g., licensed providers, license-exempt providers, center-based providers, family child care home providers, home based providers). **The MRS included the following three types of child care facilities in each of the 28 LWDAs:**

LCCCs;  
LCCHs; and  
RCCHs.

Because different types of facilities tend to set their rates differently, analysis of center rates was based on the rates for a category of care (for example, full-day care for toddlers), while the rates for home-based care (LCCH and RCCH) were determined by the amounts charged for individual children. That is, in interviews with centers the researchers asked for the rates charged for a particular age group following a particular schedule. In contrast, researchers asked home-based facilities for the age and rate charged for each individual child.

- iii. Describe how the market rate survey or pre-approved alternative methodology reflected age of child (e.g., infant, toddler, preschool, school-age): **The most recent child age scheme (added in 2022) was included for this report. This scheme is more detailed than the traditional infant, toddler, preschool, and school-age scheme used prior to 2022. It uses eight age groups as mandated by recent legislation (Texas Government Code, §2308.315, implemented in FY'24) to**

characterize rates charged for child care. In some limited areas of the report, it was necessary to characterize rates using the older age scheme. The eight age group scheme is as follows:

Infants 1: Age 0 through 11 months;  
Infants 1: Age 12 months through 17 months;  
Toddlers: Age 18 through 23 months;  
Toddlers: Age 24 through 35 months;  
Preschool-age children: Age 36 through 47 months;  
Preschool-age children: Age 48 through 59 months;  
Preschool-age children: Age 60 through 71 months; and  
School-age children: Age: 72 months and older.

- iv. Describe any other key variations examined by the market rate survey or ACF pre-approved alternative methodology, such as quality level: **Providers who responded to the MRS were asked two questions related to their accreditation or certification status. The questions asked if they had any national accreditations or certifications and if they were a Texas Rising Star Provider. Providers that indicated they were a Texas Rising Star provider were then asked about their star level certification. Results show an increase in the availability in quality care among centers over the last few years, with Texas Rising Star certifications accounting for most of the increase. The general trend in quality among homes is relatively flat over the last several years, with increase in Texas Rising Star Certification being largely offset by a reduction in national accreditation.**

#### 4.2.2 Cost analysis

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

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

- a. How did the Lead Agency conduct a narrow cost analysis (e.g., a cost model, a cost study, existing data or data from the Provider Cost of Quality Calculator)? **TWC contracted with the Ray Marshall Center, LBJ School of Public Affairs, and the University of Texas at Austin to conduct a study of the cost of providing quality child care in the State of Texas. The 2024 Cost of Quality Price Modeling Report provides a narrow cost analysis by comparing the costs of providing higher quality child care under Texas Rising Star in LCCHs and RCCHs, relative to prices charged by comparison groups of homes who are not Texas Rising Star certified but are otherwise selected to be as similar as possible to the higher quality providers of interest. The report also models a baseline for rates that satisfy a**

minimum level of quality (meeting basic health and safety requirements). The 2024 Cost of Quality Price Modeling Report was published in August 2024.

- b. In the Lead Agency's analysis, were there any relevant variations by geographic location, category of provider, or age of child? **TWC develops price modeling reports for center-based care and home-based care in alternating years. The 2024 Cost of Quality Price Modeling Report focuses on home-based care. The 2024 calculators and statistical models that underlie them show that overall, prices charged for care of children at Texas Rising Star Four-Star certified homes are typically about 6 to 9 percent higher than care at comparable non-certified homes. These patterns represent an improvement over the findings from 2021, in which the quality effects of interest were not statistically significant among licensed and registered homes. In the present study, we were not able to find a significant pricing effect among Three-Star certified homes. Despite sampling all available Three-Star and Two-Star certified homes for this study, there were not enough respondents among them to detect what are likely to be fairly small pricing effects.**

The 2023 Cost of Quality Price Modeling Report focuses on center-based care. The 2023 calculators indicate that care provided for younger children at Texas Rising Star Four-Star facilities is routinely priced between 10 to 15 percent more than care at non-certified, non-accredited (that is, baseline) facilities in 2023. Similarly, the prices for care at Three-Star providers was typically found to be between 9 to 15 percent higher than at comparable non-certified centers.

- c. What assumptions and data did the Lead Agency use to determine the cost of care at the base level of quality (e.g., ratios, group size, staff compensations, staff training, etc.)? **Texas completed a Texas Child Care Cost of Quality Price Modeling Report for center-based care in 2023 and a similar report for home-based care in 2024. The approach of these reports diverges from the child care cost literature in that this study seeks to determine the costs of providing care based on extensive modeling of the prices charged. A sample of child care facilities was surveyed to capture important quality factors and pricing information. In addition, extensive data from various publicly available sources were assembled develop statistical models of the price of quality child care. These models estimate the marginal price of providing quality care based on quality choices individual facilities make, as revealed by the survey, as well as features of the local markets in which they operate, as measured by public data.**
- d. How does the Lead Agency define higher quality and what assumptions and data did the Lead Agency use to determine cost at higher levels of quality (e.g., ratio, group size, staffing levels, staff compensation, professional development requirements)? **A Lead Agency can use a quality improvement system or other system of quality indicators (e.g., accreditation, pre-Kindergarten standards, Head Start Program Performance Standards, or State-defined quality measures). The 2023 and 2024 Texas Child Care Cost of Quality Price Modeling Reports use Texas Rising Star certification and national accreditation as examples of higher quality. The report presents several calculators focused on factors related to the structural quality of early childhood education programs. These factors include staffing ratios and staff turnover; director and staff education and experience; staff training expenses; staff earnings and benefits; and curriculum, assessment, and staff planning time. The calculators are intended to assist providers, Local Workforce Development Boards, and the state in understanding cost drivers for improving quality as**

well as revealing which structural quality factors are typically used by providers to reach higher quality tiers. These calculators represent the results of statistical models that control for differences in external supports facilities receive, including reduced cost services, donations, participation in the Child and Adult Care Food Program (CACFP), and others. Controlling for these extraneous costs increases the precision of the estimated price of quality and related factors.

Texas Rising Star is a tiered quality rating and improvement system with certifications of higher quality at Two-, Three-, and Four-Star levels. Accreditation from the following national accrediting bodies were considered evidence of higher quality:

National Association for the Education of Young Children (NAEYC);  
National Association for Family Child Care (NAFCC; for home-based providers);  
National Early Childhood Program Accreditation (NECPA);  
National Accreditation Commission for Early Child Care and Education (NAC);  
Council of Accreditation (COA);  
Cognia (formerly AdvancED Quality Early Learning Standards, or QELS); and  
Association of Christian Schools International (ACSI).

- e. What is the gap between cost and price, and how did the Lead Agency consider this while setting payment rates? Did the Lead Agency target any rate increases where gaps were the largest or develop any long-term plans to increase rates based on this information? **TWC used the 2023 and 2024 Texas Child Care Cost of Quality/Price Modeling reports to inform rate setting, making targeted increases to over 50 percent of individual rates.**

The Cost of Quality Report includes baseline rates, which reflect the amount required to, at a minimum, meet state licensing standards. If the Cost of Quality Report indicated that the baseline rate exceeded the Market Rate Survey 75th percentile, TWC used the baseline rate from the Cost of Quality Report. For example, for child care centers, 24 of 28 infant base rates were increased above the 75th percentile, and 17 of 28 toddler rates were increased above the 75th percentile. For home-based providers, infant rates for 25 (LCCHs) and 26 (RCCHs) of the 28 Boards were increased above the 75th percentile, and 23 (LCCHs) and 24 (RCCHs) toddler rates were increased.

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

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

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

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



- i. Provide the date the report was completed: **7/5/2024**
- ii. Provide the date the report containing results was made widely available (no later than 30 days after the completion of the report): **7/15/2024**
- iii. Provide a link to the website where the report is posted and describe any other strategies the Lead Agency uses to make the detailed report widely available: **TWC provides links to current and previous MRSs and Cost of Quality Reports on its Child Care Data, Reports & Plans webpage at <https://www.twc.texas.gov/programs/child-care/data-reports-plans>.**

The MRS and Supplemental Report are also posted on The University of Texas at Austin, Texas Institute for Child & Family Wellbeing website at <https://txicfw.socialwork.utexas.edu/research/project/child-care-market-rate-survey/>.

The 2023 Cost of Quality Price Modeling Report is also posted on The University of Texas at Austin, Texas Institute for Child & Family Wellbeing website at <https://txicfw.socialwork.utexas.edu/research/project/child-care-market-rate-survey/>.

- iv. Describe how the Lead Agency considered partner views and comments in the detailed report. Responses should include which partners were engaged and how partner input influenced the market rate survey or alternative methodology: **As TWC developed the MRS and Cost of Quality methodology, TWC solicited feedback from focus groups, via emails to stakeholders, and public webinars. TWC engaged Boards, CCR, TEA, CLI, and multiple child care policy and advocacy groups.**

TWC briefs stakeholders annually on the publication of the MRS and the Cost of Quality Report. Stakeholders and the public are welcome to provide input at any time through TWC's stakeholder input email at [ccel@twc.texas.gov](mailto:ccel@twc.texas.gov). Consistent and significant rate increases over the last five years reflect stakeholder voice. In Fiscal Year 2020, the base reimbursement rate was set at the 30th percentile, beginning in FY23, the base reimbursement rate is set at the 75th percentile. And, beginning in FY24, the base reimbursement rate was increased above the 75th percentile based upon the Cost of Quality report.

### 4.3 Adequate Payment Rates

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

The ages and types of care listed in the base payment rate tables are meant to provide a snapshot of the categories of rates and are not intended to be comprehensive of all categories that might

exist or to reflect the terms used by the Lead Agency for particular ages. If rates are not statewide, please provide all variations of payment rates when reporting base payment rates below.

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

#### 4.3.1 Payment rates

- a. Are the payment rates that the Lead Agency is reporting in 4.3.2 set statewide by the Lead Agency?

☐ Yes.

- i. If yes, check if the Lead Agency:

☐ Sets the same payment rates for the entire State or Territory.

☐ Sets different payment rates for different regions in the State or Territory.

☒ No.

- ii. If no, identify how many jurisdictions set their own payment rates: **28**

- b. Provide the date the current payment rates became effective (i.e., date of last payment rate update based on most recent MRS or ACF pre-approved alternative methodology as reported in 4.2.1). **10/1/2024**

- c. If the Lead Agency does not publish weekly rates, then how were the rates reported in 4.3.2 or 4.3.3 calculated (e.g., were daily rates multiplied by 5 or monthly rates divided by 4.3)? **Weekly rates were calculated by multiplying daily rates by 5.**

#### 4.3.2 Base payment rates

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

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

If the Lead Agency conducted an ACF pre-approved alternative methodology, provide the estimated cost of care for the identified categories, as well as the percentage of the cost of care covered by the established payment rate. If the Lead Agency indicated it sets different payment rates for different regions in the State or Territory in 4.3.1.a, provide

the estimated cost of care and the percentage of the cost of care covered by the established payment rate for the most populous region as well as the region with rates established at the lowest percent of the cost of care.

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

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

i. Table 1: Complete if rates are set statewide. If rates are not set statewide, provide rates for most populous region. Percentiles are not required if the Lead Agency also conducted an ACF pre-approved alternative methodology but must be reported if the Lead Agency conducted an MRS only.

Care Type	Base payment rate (specify unit, e.g., per day, per week, per month)	% of providers receiving Base rate	Full-Time Weekly Base Payment Rate	What is the percentile of the rate? (MRS)	What is the 50th percentile of the rate? (MRS)	What is the 60th percentile of the rate? (MRS)	What is the 75th percentile of the rate? (MRS)	What is the estimated cost of care? (Alternative Methodology)	What percent of the estimated cost of care is the rate?
Center Care for Infants (6 months)	<b>46.60 Per Day</b>	<b>37.00</b>	<b>233.00</b>	<b>78.00</b>	<b>40.40</b>	<b>42.40</b>	<b>45.60</b>		
Family Child Care for Infants (6 months)	<b>51.00 Per Day</b>	<b>26.00</b>	<b>255.00</b>	<b>98.00</b>	<b>34.20</b>	<b>36.00</b>	<b>39.20</b>		
Center Care for Toddlers (18 months)	<b>42.80 Per Day</b>	<b>44.00</b>	<b>214.00</b>	<b>75.00</b>	<b>37.60</b>	<b>39.40</b>	<b>42.80</b>		
Family Child Care for Toddlers (18 months)	<b>46.00 Per Day</b>	<b>41.00</b>	<b>230.00</b>	<b>93.00</b>	<b>35.00</b>	<b>36.60</b>	<b>40.00</b>		

Care Type	Base payment rate (specify unit, e.g., per day, per week, per month)	% of providers receiving Base rate	Full-Time Weekly Base Payment Rate	What is the percentile of the rate? (MRS)	What is the 50th percentile of the rate? (MRS)	What is the 60th percentile of the rate? (MRS)	What is the 75th percentile of the rate? (MRS)	What is the estimated cost of care? (Alternative Methodology)	What percent of the estimated cost of care is the rate?
Center Care for Preschoolers (4 years)	<b>39.80 Per Day</b>	<b>51.00</b>	<b>199.00</b>	<b>76.00</b>	<b>34.40</b>	<b>36.20</b>	<b>39.40</b>		
Family Child Care for Preschoolers (4 years)	<b>41.00 Per Day</b>	<b>42.00</b>	<b>205.00</b>	<b>83.00</b>	<b>34.00</b>	<b>35.80</b>	<b>39.00</b>		
Center Care for School-Age (6 years)	<b>38.60 Per Day</b>	<b>21.00</b>	<b>193.00</b>	<b>75.00</b>	<b>33.80</b>	<b>35.60</b>	<b>38.60</b>		
Family Child Care for School-Age (6 years)	<b>36.40 Per Day</b>	<b>7.00</b>	<b>182.00</b>	<b>75.00</b>	<b>31.60</b>	<b>33.40</b>	<b>36.40</b>		

ii. Table 2: Do not complete if rates are set statewide. If rates are not set statewide, provide rates for region with payment rates set at the lowest percentile. Percentiles are not required if the Lead Agency also conducted an ACF pre-approved alternative methodology but must be reported if the Lead Agency conducted an MRS only.

Care Type	Base payment rate (specify unit, e.g., per day, per week, per month)	% of providers receiving Base rate	Full-Time Weekly Base Payment Rate	What is the percentile of the rate? (MRS)	What is the 50th percentile of the rate? (MRS)	What is the 60th percentile of the rate? (MRS)	What is the 75th percentile of the rate? (MRS)	What is the estimated cost of care? (Alternative Methodology)	What percent of the estimated cost of care is the rate?
Center Care for Infants (6 months)	<b>51.00 Per Day</b>	<b>13.46</b>	<b>255.00</b>	<b>75.00</b>	<b>45.00</b>	<b>47.20</b>	<b>51.00</b>		
Family Child Care for Infants (6 months)	<b>44.20 Per Day</b>	<b>11.54</b>	<b>221.00</b>	<b>75.00</b>	<b>38.80</b>	<b>40.80</b>	<b>44.20</b>		
Center Care for Toddlers (18 months)	<b>48.20 Per Day</b>	<b>18.23</b>	<b>241.00</b>	<b>75.00</b>	<b>42.40</b>	<b>44.60</b>	<b>48.20</b>		

Care Type	Base payment rate (specify unit, e.g., per day, per week, per month)	% of providers receiving Base rate	Full-Time Weekly Base Payment Rate	What is the percentile of the rate? (MRS)	What is the 50th percentile of the rate? (MRS)	What is the 60th percentile of the rate? (MRS)	What is the 75th percentile of the rate? (MRS)	What is the estimated cost of care? (Alternative Methodology)	What percent of the estimated cost of care is the rate?
Family Child Care for Toddlers (18 months)	<b>45.20 Per Day</b>	<b>30.77</b>	<b>226.00</b>	<b>75.00</b>	<b>39.60</b>	<b>41.60</b>	<b>45.20</b>		
Center Care for Preschoolers (4 years)	<b>44.40 Per Day</b>	<b>24.19</b>	<b>222.00</b>	<b>75.00</b>	<b>39.00</b>	<b>41.00</b>	<b>44.40</b>		
Family Child Care for Preschoolers (4 years)	<b>43.40 Per Day</b>	<b>38.46</b>	<b>217.00</b>	<b>75.00</b>	<b>38.00</b>	<b>40.00</b>	<b>43.40</b>		
Center Care for School-Age (6 years)	<b>43.60 Per Day</b>	<b>18.57</b>	<b>218.00</b>	<b>75.00</b>	<b>38.20</b>	<b>40.20</b>	<b>43.60</b>		
Family Child Care for School-Age (6 years)	<b>41.00 Per Day</b>	<b>7.69</b>	<b>205.00</b>	<b>75.00</b>	<b>35.80</b>	<b>37.80</b>	<b>41.00</b>		

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

☒ Yes.

☐ No. If no, what is the year of the MRS or ACF pre-approved alternative methodology that the Lead Agency used? What was the reason for not using the most recent MRS or ACF pre-approved alternative methodology? Describe:

#### 4.3.3 Tiered rates, differential rates, and add-ons

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

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

☐ Yes. If yes, describe the add-ons, including what they are, who is eligible to receive the add-ons, and how often are they paid:

☒ No.

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

☒ Yes.

☐ No. Tiered or differential rates are not implemented.

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

- i. ☒ Differential rate for non-traditional hours. Describe: **Boards may define differential rates for nontraditional hours (NTH), based on the MRS and factors specific to the workforce area. TWC will conduct an analysis on the availability of care across the state during NTH and will support Boards in increasing this type of care, if needed.**
- ii. ☒ Differential rate for children with special needs, as defined by the Lead Agency. Describe: **Providers may be reimbursed for additional staff or equipment needed to assist in the care of a child with disabilities at a rate up to 190 percent of the provider's reimbursement rate for a child without disabilities of that same age. The inclusion rate policies are set forth in Section B-707 of the CCS Guide.**
- iii. ☐ 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:
- iv. ☐ Differential rate for school-age programs. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on. Describe:
- v. ☒ Differential rate for higher quality, as defined by the Lead Agency. Describe: **Texas Government Code §2308.315 (CCS Guide, Section B703) requires that Boards reimburse Texas Rising Star certified providers an increased rate above the rate reimbursed to non-Texas Rising Star providers. The percentage of the increase must be at least:**  
  
**5 percent for a Two-Star provider;  
7 percent for a Three-Star provider; and  
9 percent for a Four-Star provider.**  
  
**TWC rules require that Boards reimburse providers participating in the Texas School Ready project at an increased rate for infants, toddlers, and preschool age children. The increased rate must be at least 5 percent greater than the Board's regular base rate.**
- vi. ☐ Other differential rates or tiered rates. For example, differential rates for geographic area or for type of provider. Describe:
- vii. If applicable, describe any additional add-on rates that you have besides those identified above.

Does the Lead Agency reduce provider payments if the price the provider charges to private-pay families not participating in CCDF is below the Lead Agency's established payment rate?

☒ Yes. If yes, describe: **TWC pays the published rate or the maximum rate, whichever is lower (CCS rule §809.21).**

☐ No.

#### 4.3.4 Establishing payment rates

Describe how the Lead Agency established payment rates:

- a. What was the Lead Agency's methodology or process for setting the rates or how did the Lead Agency use their data to set rates? **TWC set BCY'25 baseline rates for each Board area, provider type and age group at the highest of the:**

**2024 MRS 75th percentile;  
Baseline rate outlined in the 2023 and 2024 narrow cost analysis; or  
BCY 2024 provider payment rate.**

- b. How did the Lead Agency determine that the rates are adequate to meet health, safety, quality, and staffing requirements under CCDF? **TWC's narrow cost analysis, the 2023 and 2024 Cost of Quality Price Modeling Reports include baseline rates, which are defined as prices charged by providers of child care that at a minimum meet state licensing standards. TWC compared the base provider payment rate, set at the 75th percentile, against the Cost of Quality cost modeling data for the baseline rate at LCCCs in 2023 and LCCHs and RCCHs in 2024.**

- c. How did the Lead Agency use the cost of care, either from the narrow cost analysis or the ACF pre-approved alternative methodology to inform rate setting, including how using the cost of care promotes the stabilization of child care providers? **TWC's narrow cost analysis, the 2023 and 2024 Cost of Quality Price Modeling Reports include baseline rates, which are defined as prices charged by providers of child care that at a minimum meet state licensing standards. TWC compared the base provider payment rate, set at the 75th percentile, against the Cost of Quality cost modeling data for the baseline rate at LCCCs in 2023 and for LCCHs and RCCHs in 2024. TWC set BCY'25 baseline rates for each Board area, provider type and age group at the highest of the:**

**2024 MRS 75th percentile;  
Baseline rate outlined in the 2023 and 2024 narrow cost analysis; or  
BCY'24 provider payment rate.**

**Reviewing rates based on a narrow cost analysis results in some base rates being increased which provides higher income for child care providers. Child Care providers can use this higher revenue to support the quality of their programs. 73 of 84 infant full-time (FT) base rates were increased above the 75th percentile; 61 of 84 toddler FT base rates were increased above the 75th percentile; and 44 of 84 preschool FT base rates were increased above the 75th percentile.**

- d. How did the Lead Agency account for the cost of higher quality while setting payment rates? **Texas Government Code §2308.315 requires that Texas Rising Star certified**

providers be reimbursed at the following percentages above the Board's non-Texas Rising Star rate for the same type of care:

**Texas Rising Star Four-Star providers' payment rates must be set at 9 percent greater than non-certified providers' regular child care rates;**

**Texas Rising Star Three-Star providers' payment rates must be set at 7 percent greater than non-certified providers' regular child care rates; and**

**Texas Rising Star Two-Star providers' payment rates must be set at 5 percent greater than non-certified providers' regular child care rates.**

- e. Identify and describe any additional facts (not covered in responses to 4.3.1 – 4.3.3) that the Lead Agency considered in determining its payment rates to ensure equal access. **N/A**

#### 4.4 Payment Practices to Providers

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

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

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

##### 4.4.1 Prospective and enrollment-based payment practices

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

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

☐ Yes. If yes, describe:

☒ No, it is not a generally-accepted payment practice for each provider type. If no,



describe the provider type not paid prospectively and the data demonstrating it is not a generally-accepted payment practice for that provider type, and describe the Lead Agency's payment practice that ensures timely payment for that provider type: **Currently, Boards reimburse all providers in their workforce area on a standard weekly, biweekly, or monthly schedule as determined by the Board. Payment to child care providers is based on the child care authorization that is in place for the child.**

**Effective December 9, 2024, TWC pays all regulated providers (not including relative care providers) prospectively every two weeks based on enrollment. While paying child care businesses prospectively is considered a generally accepted practice, this is not the case for relative care.**

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

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

☐ No, it is not a generally-accepted practice for each provider type. If no, describe the provider types not paid by authorized enrollment, including the data showing it is not a generally-accepted payment practice for that provider type, and describe how the payment policy accounts for fixed costs:

☐ It is impracticable. Describe provider type(s) for which it is impracticable, why it is impracticable, and the alternative approach the Lead Agency uses to delink provider payments from occasional absences, including evidence that the alternative approach will not undermine the stability of child care programs, and thereby accounts for fixed costs:

#### 4.4.2 Other payment practices

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

- a. Does the Lead Agency pay all providers on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time)?

☒ Yes.

☐ No. If no, describe the policies or procedures that are different than paying on a part-time or full-time basis and the Lead Agency's rationale for not paying on a part-time or full-time basis:

- b. Does the Lead Agency pay for reasonable mandatory registration fees that the provider charges to private-paying parents?

☒ Yes. If yes, identify the fees the Lead Agency pays for: **TWC rules require that Boards ensure that a provider's published rate, used to calculate the maximum provider reimbursement, includes the provider enrollment, supply, and activity fees.**

**TWC's CCS Guide Section B-700 describes the procedures that Boards must use to calculate providers' published rates:**

The published daily rate is the sum of calculated daily rates and calculated daily fees. Boards must ensure that child care contractors use the methodology outlined in B-700 to calculate providers' published rates and applicable fees upon renewal of provider agreements. Daily fees include the following:

Enrollment and registration fees;  
Supply fees; and  
Activity fees.

[ ] No. If no, identify the data and how data were collected to show that paying for fees is not a generally-accepted payment practice:

- c. Describe how the Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process: **Boards establish contractual agreements with each provider receiving CCDF subsidies. TWC issued guidance to Boards (WD Letter 14-22, Change 1 and subsequent issuances) that includes a sample Provider Agreement detailing the following required elements: payment policies, including rates, schedules, fees, and the dispute resolution process.**
- d. Describe how the Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur: **Details of each child's authorization, including the days of the week authorized and the beginning and end dates, are sent to the provider based on local Board procedures. Updates to the authorization, including any changes in the days authorized and end dates, are immediately conveyed to the provider as outlined in local Board procedures (for example, by phone or email).**

CCS rule §809.13(c)(10) requires that Board policies regarding the transfer of a child from one provider to another include a waiting period of two weeks before the effective date of the transfer. This rule, which allows for limited exceptions such as when a provider has been placed on corrective action with CCR, ensures that providers have notice prior to a subsidy child being unenrolled.

- e. Describe the Lead Agency's timely appeal and resolution process for payment inaccuracies and disputes: **Boards or Board child care contractors reimburse providers on a weekly, biweekly, or monthly schedule, through December 8, 2024, and will pay providers prospectively on biweekly schedule effective December 9, 2025. Upon receipt of the payment, providers may contact Boards or Board contractors regarding any payment inaccuracy at any time, and Boards are able to resolve any discrepancy through direct payment adjustments to the provider.**
- f. Other. Describe any other payment practices established by the Lead Agency:

#### 4.4.3 Payment practices and parent choice

How do the Lead Agency's payment practices facilitate provider participation in all categories of care? **TWC Child Care Services rule §809.91 outlines the requirements to be a child care provider**

and §809.93 outlines provider reimbursement. Additionally, parents have parental choice and the ability to choose any provider that has entered into an agreement to provide subsidized child care. TWC's prospective payment practice is new and will be implemented based on feedback from providers and other stakeholders on challenges with the reimbursement practices. TWC will monitor data and feedback to identify any trends in prospective payment practices supporting equal access to a full range of providers.

## 4.5 Supply Building

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

### 4.5.1 Child care services available through grants or contracts

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

☐ Yes, statewide. Describe how the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:

☒ Yes, in some jurisdictions, but not statewide. Describe how many jurisdictions use grants or contracts for child care slots and how the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider: **All 28 Board areas may implement contracted slots, based upon legislative changes enacted in 2019. Texas Labor Code §302.0461 allows Boards to contract with Texas Rising Star programs to reserve slots to provide child care services for children participating in the CCS program. Rural Capital Area is currently designing a model to implement contracted slots for children in child care deserts in Summer 2024.**

☐ No. If no, describe any Lead Agency plans to provide direct child care services through grants and contracts for child care slots:

If no, skip to question 4.5.2.

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

☒ Children with disabilities. Number of slots allocated through grants or contracts: **Boards have the option of contracting with child care providers for slots dedicated to children with disabilities if this is a need in their area identified in the Board's strategic Plan. On April 30, 2024, the Commission approved publication of proposed rule amendments for public comment. One of the proposed changes will add increasing the number of places reserved for children with disabilities as an optional use of contracted slots for all Boards. If the final rule amendments are approved, the change will become effective December 9, 2024.**

☒ Infants and toddlers. Number of slots allocated through grants or contracts: **Boards have the option of contracting with child care providers for infant and toddler slots. Contracts in Alamo for 50 infant and toddler slots ended in February 2024. Currently, no Boards are offering contracted slots.**

☒ Children in underserved geographic areas. Number of slots allocated through grants or contracts: **Boards have the option of contracting with child care providers for children in underserved areas, such as child care deserts. Currently, no boards are offering contracted slots. However, Rural Capital is considering contracts for child care deserts in Lee, Fayette, Burnet, or Llano counties.**

☐ Children needing non-traditional hour care. Number of slots allocated through grants or contracts:

☐ School-age children. Number of slots allocated through grants or contracts:

☐ Children experiencing homelessness. Number of slots allocated through grants or contracts:

☐ Children in urban areas. Percent of CCDF children served in an average month:

☐ Children in rural areas. Percent of CCDF children served in an average month:

☒ Other populations. If checked, describe: **To qualify for a contract with Boards for reserved slots in accordance with Texas Labor Code §302.0461, providers must be a Texas Rising Star Three- or Four-Star provider and meet one of the following criteria:**

**Be located in a child care desert or area determined to be underserved;  
Have a Pre-K partnership;  
Have an HS/EHS partnership;  
Increase the number of places reserved for high quality infant/toddler care; or  
Satisfy a requirement for the Board's strategic plan.**

- ii. If yes, how are rates for slots funded by grants and contracts determined by the Lead Agency? **Providers will receive the same payment rates for contracted slots as they would for any other referral.**

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

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

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

☒ Yes.

☐ No.

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

- i. ☐ Restricted based on the minimum number of children in the care of the in-home provider to meet the Fair Labor Standards Act (minimum wage) requirements. Describe:
- ii. ☒ Restricted based on the in-home provider meeting a minimum age requirement. Describe: **In home providers must be at least 18 years of age.**
- iii. ☒ Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours). Describe: **In-home care is allowed if a parent has NTH (evenings, nights, and/or weekends).**
- iv. ☒ Restricted to care by relatives. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider.) Describe: **In-home providers must be eligible listed home providers.**
- v. ☐ Restricted to care for children with special needs or a medical condition. Describe:
- vi. ☒ Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF. Describe: **CCS rule §809.91(e)(1) requires in-home providers to list with CCR as a family home, undergo a criminal background check, and undergo a check against the sex offender registry and the central child abuse and neglect registry.**
- vii. ☒ Other. Describe: **CCS rule §809.91(e)(2) requires Boards to allow relative child care providers to provide in-home child care only for the following:**

**A child with disabilities and his or her siblings;  
A child under 18 months of age and his or her siblings; and  
A child of a teen parent when the parent's work schedule requires evening, overnight, or weekend child care and taking the child outside of the child's home would be disruptive to the child.**

**CCS rule §809.91(e) states a Board may allow relative in-home child care for circumstances in which the Board's child care contractor determines and documents that other child care provider arrangements are not available in the community.**

#### 4.5.3 Shortages in the supply of child care

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

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

- a. In infant and toddler programs:
  - i. Data sources used to identify shortages: **To determine shortages in the supply of high-quality providers, each Board uses information from TWC's child care case management system, CCR, and CLI to assess local data on the number of high-quality child care centers and parents seeking care. TWC and Boards also use data**

collected through the Texas Child Care Availability Portal to analyze supply and demand. TWC also collected data from the 2023 Statewide Early Childhood Needs Assessment and 2024 Stakeholder Input Survey. Through the 2024 Stakeholder Survey, TWC received feedback from 548 parents indicating the need for infant and/or toddler care. Of those parents, 126 reside in child care deserts.

- ii. Method of tracking progress: TWC will update the annual MRS to ask child care providers about their overall waiting lists and infant care waiting list. TWC is exploring enhancements to TX3C to analyze infants that remain on waiting lists due to supply challenges.
- iii. What is the plan to address the child care shortages using family child care homes TWC supports staffed family child care networks (FCCN). TWC previously awarded grants to two local collaborative efforts to develop staffed FCCNs designed to provide training, specialized services, and TA to address the needs of home-based child care providers, thereby increasing the availability and quality of family child care. Building on the success of those initiatives, TWC published a request for applications in March 2024 for a statewide FCCN to build supply and improve quality in underserved areas and provide funding to build new home-based capacity. The new statewide FCCN will also provide start-up grants to support new LCCHs and RCCHs.
- iv. What is the plan to address the child care shortages using child care centers? As part of a larger supply building effort in 2022, TWC began investing \$1 million to support CCR in staffing a new Child Care Navigator team. The CCR Navigators are strategically placed in different parts of the state to help support new child care providers build and sustain their child care business. The Navigators partner with new child care applicants, assisting them through the application process, providing them with available resources in their community or region, and connecting them with their CCR representatives. In recognition of the demand for services and success of the team, TWC and partner agencies plan to increase funding with PDG B-5 Renewal Grant funds to grow the Navigator team in 2024.

TWC also launched the Child Care Expansion Initiative (CCEI) to build the supply of high-quality child care across Texas. The initiative provided support to child care providers creating a new child care capacity in child care deserts, for infants, or that are working in partnership with an employer. This funding helped with offsetting costs incurred during launch and the first few months of operation. Both home- and center- based businesses were eligible to apply for funding if they planned to expand the capacity of their existing child care business or open a new business on or after March 1, 2022. Providers were required to either be expanding in a child care desert, expanding infant capacity, or operating in a documented partnership with an employer or consortium of employers to provide care for their employees' children. Two types of awards were available: start up awards for child care providers that had not received a new or modified child care license and Initial Operating Awards were available after the new or modified license was received. The application window for this initiative ended November 22, 2023.

Updated numbers on how many providers were awarded funds and how the funds were spent can be found on TWC's website.

- b. In different regions of the State or Territory:
- i. Data sources used to identify shortages: To determine shortages in the supply of high-quality providers, each Board uses information from TWC's child care case management system, CCR, and CLI to assess local data on the number of high-quality child care centers and parents seeking care. Several Boards leverage geographic information systems to map the locations of providers and identify child care deserts. TWC and Boards also use data collected through the Texas Child Care Availability Portal to analyze supply and demand. TWC also collected data from the 2023 Statewide Early Childhood Needs Assessment and 2024 Stakeholder Input Survey. Through the 2024 Stakeholder Survey, TWC received feedback from providers located in at least 175 unique counties (834 ZIP codes), and parents located in at least 103 counties (448 ZIP codes). Of those providers, 306 are in a child care desert.
  - ii. Method of tracking progress: TWC will update the annual MRS to ask child care providers about their overall waiting lists and analyze this based on geographical location. TWC is exploring enhancements to TX3C to analyze children that remain on waiting lists due to supply challenges.
  - iii. What is the plan to address the child care shortages using family child care homes? TWC previously awarded grants to two local collaborative efforts to develop staffed FCCNs designed to provide training, specialized services, and TA to address the needs of home-based caregivers, thereby increasing the availability and quality of family child care. Building on the success of those initiatives, TWC published a request for applications in March 2024 for a statewide FCCN to build supply and improve quality in underserved areas and provide funding to build new home-based capacity. The new statewide FCCN will also provide start-up grants to support new LCCHs and RCCHs.
  - iv. What is the plan to address the child care shortages using child care centers? TWC launched the CCEI to build the supply of high-quality child care across Texas. The initiative provided support to child care providers creating a new child care capacity. This funding helped to offset costs incurred during launch and the first few months of operation in child care deserts, for infants, or working in partnership with an employer. Both home based and center based businesses were eligible to apply for funding if they planned to expand the capacity of their existing child care business or open a new business on or after March 1, 2022. The providers were also required to be either expanding in a child care desert, expanding infant capacity, or operating in a documented partnership with an employer or consortium of employers to provide care for their employees' children. Two types of awards were available: start up awards for child care providers that had not received a new or modified child care license and Initial Operating Awards were available after the new or modified license was received.

The application window for this stimulus-funded initiative ended November 22, 2023. However, TWC plans to continue funding this initiative with regular CCDF

dollars beginning in FY'25. This initiative will enable to TWC to continue to target funding to increase needed child care capacity in child care deserts or in partnership with employers or consortiums of employers.

Updated numbers on how many providers were awarded funds and how the funds were spent can be found on TWC's website.

Based on the success of the stimulus-funded CCEI and stakeholder input, TWC will competitively procure an entity to administer a new CCEI in FY'25. The renewed initiative will focus on capacity expansion in child care deserts and for employer site-based expansion.

TWC is developing an Employer Site-Based Child Care TA program. This project uses contracts and public-private partnerships to improve the supply of child care in underserved areas and access to affordable child care for working parents. Employer Site-Based Child Care TA is designed to increase the supply of child care and increase access to affordable high-quality child care in underserved areas by providing TA to help employers identify how best to support their employees needing child care. TA contractors will provide free assistance, such as employee needs assessments, community child care landscape analyses, and feasibility studies to help employers determine if they could open an on-site or near-site child care center, partner with local child care providers, or provide other child care benefits. TA contractors may also help employers create a strategic plan to implement the option that best fits their needs.

TWC provides quality improvement funds to Boards to expand capacity or address particular needs in their workforce area.

c. In care for special populations:

- i. Data sources used to identify shortages: To determine shortages in the supply of high-quality providers, each Board uses information from TWC's child care case management system, CCR, and CLI to assess local data on the number of high-quality child care centers and parents seeking care. TWC also collected data from the 2023 Statewide Early Childhood Needs Assessment and 2024 Stakeholder Input Survey.

TWC has added a data field in the child care case management system to help Boards identify families that need care during NTH and connect them with child care providers that best meet their needs. TWC is also collecting data in the Texas Child Care Availability Portal on families seeking care during NTH.

In FY'23, TWC was selected to participate in the ACF-funded Early Care and Education-Receiving Individualized Support for Evaluation Capacity Building (ECE-RISE) project to receive technical assistance from Mathematica over an 18-month period. Through this project, TWC partnered with HHSC CCR to build research capacity in the state and to complete a research project exploring unmet needs for NTH care in the state, particularly in the Gulf Coast workforce area.



- ii. Method of tracking progress: **TWC is exploring enhancements to TX3C to analyze children with disabilities that remain on waiting lists due to supply challenges.**

**TWC will analyze and collect data to further understand the need for NTH care in Texas and develop research-based recommendations aimed at increasing the state's capacity to meet the NTH care needs of families and employers.**

- iii. What is the plan to address the child care shortages using family child care homes? **In FY'25, TWC plans to replicate the work started with ECE-RISE in other areas of the state to support Boards in identify strategies to assess and address unmet needs for NTH hour child care. TWC will measure outcomes by monitoring the number of families reporting a need for NTH child care as well as the number of providers and slots available for this type of care. Also, TWC published a request for applications in March 2024 for a statewide FCCN to build supply and improve quality in underserved areas and provide funding to build new home-based capacity. The new statewide FCCN will also provide start-up grants to support new LCCHs and RCCHs. Many home-based providers in Texas offer services during evenings and on weekends.**
- iv. What is the plan to address the child care shortages using child care centers? **Boards work with partnering agencies and local providers to identify available child care slots for children with disabilities and special needs.**

**Boards may develop differential rate structures for care during NTH (nights and weekends). Boards establish provider payment rates and may target rate increases to specific provider types.**

**In FY'25, TWC plans to replicate this work in other areas of the state to support Boards in identifying strategies to assess and address unmet needs for NTH child care. TWC will measure outcomes by monitoring the number of families reporting a need for NTH child care as well as the number of providers and slots available for this type of care.**

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

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

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

- a. Underserved geographic areas. Describe: **To determine shortages in the supply of high-quality providers, each Board uses information from TWC's child care case management system, CCR, and CLI to assess local data on the number of high-quality child care centers and parents seeking care. Several Boards leverage geographic information systems to map the locations of providers and identify child care deserts. TWC and Boards also use data collected through the Texas Child Care Availability Portal to analyze supply and demand. TWC also collected data from the 2023 Statewide Early Childhood Needs Assessment and**

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Texas Labor Code §302.0461 allows Boards to contract with eligible (Three- or Four- Star) Texas Rising Star providers for slots reserved for children participating in child care subsidies in areas:

Where the number of children younger than six years of age who have working parents is at least three times greater than the capacity of licensed child care providers in the area (for example a child care desert) or another area determined to be underserved;  
That have a Pre-K partnership (PKP);  
That have an HS/EHS partnership;  
That increase the number of places reserved for high quality infant/toddler care; or  
That satisfy a requirement for the Board's strategic plan.

TWC previously awarded grants to two local collaborative efforts to develop staffed FCCNs designed to provide training, specialized services, and TA to address the needs of home-based providers, thereby increasing the availability and quality of family child care. Building on the success of those initiatives, TWC will publish a request for applications in 2024 for a statewide FCCN to build supply and improve quality in underserved areas and provide funding to build new home-based capacity. The new statewide FCCN will also provide start-up grants to support new LCCHs and RCCHs.

TWC is developing an Employer Site-Based Child Care TA program. This project uses contracts and public-private partnerships to improve the supply of child care in underserved areas and access to affordable child care for working parents.

Employer Child Care Solutions TA is an initiative is designed to increase the supply of child care and increase access to affordable high-quality child care in underserved areas by providing TA to help employers identify how best to support their employees needing child care. TA contractors will provide free assistance, such as employee needs assessments, community child care landscape analyses, and feasibility studies to help employers determine if they could open an on-site or near-site child care center, partner with local child care providers, or provide other child care benefits. TA contractors may also help employers create a strategic plan to implement the option that best fits their needs.

TWC provides quality improvement funds to Boards to expand capacity or address particular needs in their workforce area.

- b. Infants and toddlers. Describe: To determine shortages in the supply of high-quality providers, each Board uses information from TWC's child care case management system, CCR, and CLI to assess local data on the number of high-quality child care centers and parents seeking care. TWC and Boards also use data collected through the Texas Child Care Availability Portal to analyze supply and demand. TWC also collected data from the 2023 Statewide Early Childhood Needs Assessment and 2024 Stakeholder Input Survey.

Texas Labor Code §302.0461 allows Boards to contract with eligible (Three- and Four-Star) Texas Rising Star child care providers for slots to be reserved for children participating in

CCS to increase the number of places reserved for infants and toddlers. This program focuses on supply building, but also incentivizes quality improvement.

TWC will publish a request for applications in 2024 for a statewide FCCN to build supply and improve quality in underserved areas and provide funding to build new home-based capacity. The new statewide FCCN will also provide start-up grants to support new LCCHs and RCCHs.

In March 2020, TWC provided \$3 million through a competitive procurement process to establish a statewide infant and toddler specialist network. The University of Texas Health Science Center at Houston was awarded the contract and has been implementing a network that provides teachers and administrators of infant and toddler programs with professional development, technical support, and opportunities to participate in professional learning communities. This continued work will help to enhance the quality of care provided to infants and toddlers across the state, as well as elevate the skills and competencies of the infant and toddler professionals who participate. TWC continues to monitor the effectiveness of this program and use that information to inform any future initiatives.

- c. Children with disabilities. Describe: TWC funded online training courses developed in partnership with CCR and Texas A&M AgriLife (Agrilife) to assist providers in serving children with disabilities. This initiative focuses on quality improvement.

TWC is partnering with HHSC Early Childhood Intervention (ECI) to provide training on developmental learning strategies, early brain development, and inclusion to child care providers; training and supporting child care providers on screening for developmental delays; and building the capacity of ECI personnel to support social-emotional wellness.

ECI-led inclusion support strategies will support the early childhood workforce by providing outside expertise and coaching for teachers to use in classroom settings. ECI's training for child care providers on developmental screenings equips early educators to better identify students' needs, when to refer them for additional supports, and how to have sensitive conversations with parents about service referrals.

- d. Children who receive care during non-traditional hours. Describe: TWC added a data field in the child care case management system to help Boards identify families that need care during NTH and connect them with child care providers that best meet their needs. TWC is also collecting data in the Texas Child Care Availability Portal on families seeking care during NTH hours.

TWC previously awarded grants to two local collaborative efforts to develop staffed FCCNs designed to provide training, specialized services, and TA to address the needs of home-based providers, thereby increasing the availability and quality of family child care. Building on the success of those initiatives, TWC will publish a request for applications in 2024 for a statewide FCCN to build supply and improve quality in underserved areas and provide funding to build new home-based capacity. The new statewide FCCN will also provide start-up grants to support new LCCHs and RCCHs.

In 2022, TWC was selected to participate in ECE-RISE. By participating in ECE-RISE, TWC

received 18 months of tailored support to conduct a research and evaluation project from Mathematica, a research and data analytics consultancy, as part of the OPRE-funded Child Care Research and Evaluation Capacity Building Center. Mathematica supported TWC in conducting a defined, short-term research and evaluation project and in building long-term capacity to conduct research and evaluation that can be used for planning as well as informing policy, program, and operational decisions.

TWC's research project focused on understanding the need for NTH child care in Texas. Through the research project, TWC, in partnership with CCR, has investigated the following research questions:

What do families perceive as the barriers to accessing NTH care?

Key finding: Cost and availability of care are the most frequently reported barriers to accessing NTH care.

What kind of NTH care do families want?

Key finding: Child care centers are the most used and preferred care option, while home child care was among the least used and preferred.

What do providers perceive as sufficient incentive to provide NTH care?

Key finding: Providers most frequently reported financial incentives as a support that would help them offer NTH care.

TWC will conduct additional analyses and data collection to further understand the need for NTH care in Texas and develop research-based recommendations aimed at increasing the state's capacity to meet the NTH care needs of families and employers.

- e. Other. Specify what population is being focused on to increase supply or improve quality. Describe: Children eligible for Texas public prekindergarten, EHS, or HS.

TWC works with Boards, child care providers, and school districts/charter schools to generate interest in PKPs and increase the number of partnerships across the state. PKP may expand access to high-quality early care and learning opportunities for children who are eligible for public Pre-K and provide better hours for working families who need a full workday of care.

Texas Labor Code §302.0461 allows Boards to contract for slots with eligible (Three- and Four-Star) Texas Rising Star child care providers that have a Pre-K or EHS/HS partnership.

TWC is also supporting supply building through efforts to increase the number of PKP programs, in which local education agencies partner with child care programs to provide Pre-K instruction and wraparound care (the hours before and after Pre-K instruction) to eligible three- and four-year-old children in one setting. TWC gives eligible child care providers a one-time award of \$25,000 for each new PKP classroom. Child care providers can use the funding to assist with the costs associated with the new partnership classroom, including teacher compensation, instructional materials, classroom furniture, and equipment. Providers are eligible to apply for the funding award if they are Texas Rising Star Three- or Four-Star certified, have an executed Memorandum of

Understanding indicating a partnership with a school district or charter school with dually enrolled children, and have at least one new three- or four-year-old Pre-K partnership classroom. TWC has awarded providers approximately \$2 million for the 2023-2024 school year and continues to accept applications for the upcoming school year. This initiative focuses on building supply and improving quality.

TWC's PKP supply building support also includes a partnership with the Texas Education Agency to pilot a Pre-K partnership intermediary model at the Texas A&M University System. Texas A&M assists child care providers, school districts, and charter schools to establish and manage PKPs by providing TA on operational logistics such as finances, staffing, and data reporting. In addition, Texas A&M supports quality improvement efforts for PKPs through communities of practice and professional development opportunities for partnering entities.

#### 4.5.5 Prioritization of investments in areas of concentrated poverty and unemployment

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

Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have access to high-quality programs. **TWC includes the percentage of the population below 100 percent of Federal Poverty Guidelines (FPG) and the percentage of children under 13 years of age in families below 150 percent FPG as factors in determining funding allocations to each workforce area. TWC provides funding to Boards to improve child care quality and increase access to Texas Rising Star certified providers for low-income families. Boards prioritize these quality funds based on the needs of the workforce area, including increasing the number of Texas Rising Star certified providers in areas that have high concentrations of poverty and unemployment. Magnifying these efforts, Texas Government Code §2308.317 requires Boards to prioritize quality child care funding initiatives that benefit child care facilities working toward Texas Rising Star certification or Texas Rising Star certified providers working toward higher certification levels.**

## 5 Health and Safety of Child Care Settings

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

CCDF health and safety standards help set clear expectations for CCDF providers, form the foundation for health and safety training for child care workers, and establish the baseline for monitoring to ensure compliance with health and safety requirements. These health and safety requirements apply to all providers serving children receiving CCDF services – whether the

providers are licensed or license-exempt, must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures by the [Lead Agency](#). CCDF-required annual monitoring and enforcement actions help ensure that CCDF providers are adopting and implementing health and safety requirements.

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

This section addresses CCDF health and safety requirements, [Lead Agency](#) licensing requirements and exemptions, and comprehensive background checks.

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

## 5.1 Licensing Requirements

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

### 5.1.1 Providers subject to licensing

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

- a. Identify the center-based provider types subject to child care licensing: **LCCCs and School-Age and Before or After-School Programs.**

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

☐ Yes. If yes, describe:

☒ No.

- b. Identify the family child care providers subject to licensing: **LCCHs and RCCHs.**

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

☒ Yes. If yes, describe: **Listed Family Homes. A Listed Family Home is a listing of a caregiver who is at least age 18 and who provides care in his or her own home for compensation, for three or fewer children unrelated to the caregiver, from birth through age 13, for at least four hours a day, three or more days a week, for three or more consecutive weeks, or four hours a day for 40 or more days in a 12-month period. The total number of children in care, including the children related to the caregiver, may not exceed 12. Listed Family Homes are not eligible for CCDF.**

☐ No.

- c. Identify the in-home providers subject to licensing: **Relative-only listed family home.**

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

☐ Yes. If yes, describe:

☒ No.

#### 5.1.2 CCDF-eligible providers exempt from licensing

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

- a. License-exempt center-based child care. Describe by answering the questions below.
- i. Identify the categories of CCDF-eligible center-based child care providers who are exempt from licensing requirements. **N/A**
  - ii. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. **N/A**
  - iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children. **N/A**
- b. License-exempt family child care. Describe by answering the questions below.
- i. Identify the categories of CCDF-eligible family child care providers who are exempt from licensing requirements. **N/A**
  - ii. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. **N/A**
  - iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children. **N/A**
- c. In-home care (care in the child's own home by a non-relative). Describe by answering the questions below.
- i. Identify the categories of CCDF-eligible in-home care (care in the child's own home by a non- relative) providers who are exempt from licensing requirements. **N/A**
  - ii. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. **N/A**
  - iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children. **N/A**

## 5.2 Ratios, Group Size, and Qualifications for CCDF Providers

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

#### 5.2.1 Age classifications

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

- a. Infant. Describe: **Birth to 17 months.**
- b. Toddler. Describe: **18 to 35 months.**
- c. Preschool. Describe: **A child who is three or four years of age before the beginning of the current school year.**
- d. School-Age. Describe: **A child who is five years of age and older and is enrolled in or has completed kindergarten. School-age and before- or after-school programs follow the same ratio and group sizes as licensed centers; however, they only care for children who attend Pre-K through grade six.**

#### 5.2.2 Ratio and group size limits

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

- a. Licensed CCDF center-based care:
  - i. Infant.  
Ratio: **1:4 for 0 to 11 months; 1:5 for 12 to 17 months.**  
Group size: **10 for 0 to 11 months; 13 for 12 to 17 months.**
  - ii. Toddler.  
Ratio: **1:9 for 18 to 23 months; 1:11 for 24 to 35 months.**  
Group size: **18 for 18 to 23 months; 22 for 24 to 35 months.**
  - iii. Preschool.  
Ratio: **1:15 for 3 years; 1:18 for 4 years.**  
Group size: **30 for 3 years; 35 for 4 years.**
  - iv. School-Age.  
Ratio: **1:22 for 5 years; 1:26 for 6 to 13 years.**  
Group size: **35 for 5 to 13 years.**
  - v. Mixed-Age Groups (if applicable).  
Ratio: **The child/caregiver ratio is the maximum number of children one caregiver can be responsible for. Each child must have a caregiver who is responsible for the child and who is aware of details of the child's habits, interests, and any special problems. Ratios for mixed-age groups are**



determined by the specified age of the children in the caregiver's group or the age of the youngest child in the group, depending on the activity and the number of children at the child care center. The specified age is determined as follows:

- 1) List each child by age from youngest to oldest;
- 2) Determine the core number by dividing the total number of children by 2 and round up any non-whole number;
- 3) Starting from the first or youngest child on the list, count down until reaching the core number;
- 4) The age of the child on the list that corresponds with the core number is the specified age of the group. This age dictates the applicable ratio as described above.

Group size: This specified age of the children in the group determines the maximum group size and the number of children two or more caregivers may supervise.

- b. If different, provide the ratios and group size requirements for the license-exempt center-based providers who receive CCDF funds under the following age groups:
- i. ☒ Not applicable. There are no differences in ratios and group size requirements.
  - ii. Infant:
  - iii. Toddler:
  - iv. Preschool:
  - v. School-Age:
  - vi. Mixed-Age Groups:
- c. Licensed CCDF family child care home providers:
- i. Infant (if applicable)

Ratio: The ratio varies depending on the number of children, the ages of the children, and the number of caregivers in the home. Ratio and group size requirements change for field trips and water activities. Listed family homes may only care for up to three unrelated children, with no restrictions on ratio/group size.

Group size: The group size varies depending on the total number of children, the ages of the children, and the number of caregivers in the home.

For a RCCH, the number of children in care at the same time must follow the chart found in 26 TAC §747.1701.

RCCHs are not allowed to increase the number of children in care if two or more caregivers are caring for the children.

For a LCCH, the number of children in care at the same time must follow the chart found in 26 TAC §747.1801.

For a LCCH when there are two caregivers caring for the children, the number of children in care at the same time must follow the chart found in 26 TAC §747.1803.

ii. Toddler (if applicable)

Ratio: The ratio varies depending on the number of children, the ages of the children, and the number of caregivers in the home. Ratio and group size requirements change for field trips and water activities. Listed family homes may care only for up to three unrelated children, with no restrictions on ratio/group size.

Group size: For a RCCH, the number of children in care at the same time must follow the chart found in 26 TAC §747.1701.

RCCHs are not allowed to increase the number of children in care if two or more caregivers are caring for the children.

For a LCCH, the number of children in care at the same time must follow the chart found in 26 TAC §747.1801.

For a LCCH when there are two caregivers caring for the children, the number of children in care at the same time must follow the chart found in 26 TAC §747.1803.

iii. Preschool (if applicable)

Ratio: The ratio varies depending on the number of children, the ages of the children, and the number of caregivers in the home. Ratio and group size requirements change for field trips and water activities. Listed family homes may only care for up to three unrelated children, with no restrictions on ratio or group size.

Group size: For a RCCH, the number of children in care at the same time must follow the chart found in 26 TAC §747.1701.

RCCHs are not allowed to increase the number of children in care if two or more caregivers are caring for the children.

For a LCCH, the number of children in care at the same time must follow the chart found in 26 TAC §747.1801.

For a LCCH when there are two caregivers caring for the children, the number of children in care at the same time must follow the chart found in 26 TAC §747.1803.

iv. School-Age (if applicable)

Ratio: The ratio varies depending on the number of children, the ages of

the children, and the number of caregivers in the home. Ratio and group size requirements change for field trips and water activities. Listed family homes may only care for up to three unrelated children, with no restrictions on ratio or group size.

Group size: For a RCCH, the number of children in care at the same time must follow the chart found in 26 TAC §747.1701.

RCCHs are not allowed to increase the number of children in care if two or more caregivers are caring for the children. For a LCCH, the number of children in care at the same time must follow the chart found in 26 TAC §747.1801.

For a LCCH when there are two caregivers caring for the children, the number of children in care at the same time must follow the chart found in 26 TAC §747.1803.

v. Mixed-Age Groups

Ratio: The child to caregiver ratio is the maximum number of children one caregiver may be responsible for.

The total number of children a caregiver may supervise is determined by the ages of the children in the child care home.

When determining the child-caregiver ratio, the provider may use the developmental or emotional age, rather than the chronological age, of a child with special care needs, if this is recommended by a health care professional or a qualified professional and is documented in the child's record.

All children present, including children related to the provider, assistant, and substitute caregiver's children, and drop-in and part-time children must be counted in the child to caregiver ratio, by age of the child, regardless of the length of time they are present.

The provider must also count neighborhood children visiting the child care home if the provider is responsible for their care and supervision in the absence of the parent.

In a RCCH, a child who is at least four years of age and attending a Pre-K program during the customary school day is counted in the same way children five years old and older who are in after-school care are counted. The Pre-K program must be operated by or in collaboration with the local school district.

Group size: The group size varies depending on the total number of children, the ages of the children, and the number of caregivers in the home.

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

☐ No.

☐ Yes. If yes, describe how the ratio and group size requirements for license-exempt providers vary by age of children served.

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

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

i. Infant (if applicable)

Ratio: **N/A**

Group size: **N/A**

ii. Toddler (if applicable)

Ratio: **N/A**

Group size: **N/A**

iii. Preschool (if applicable)

Ratio: **N/A**

Group size: **N/A**

iv. School-Age (if applicable)

Ratio: **N/A**

Group size: **N/A**

v. Mixed-Age Groups (if applicable)

Ratio: **Relative-Only Listed family homes are the only types of listed family homes eligible for CCDF and for the care to be in the child's own home. The care is limited to the number of related children living at that residence.**

Group size: **N/A**

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

☒ No.

☐ Yes. If yes, describe how the ratio and group size requirements for license-exempt in-home care vary by age of children served.

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

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

a. Licensed center-based care

i. Describe the teacher qualifications for licensed CCDF center-based care (e.g., degrees, credentials, etc.), including any variations based on the ages of children in care: **Must be at least 18 years of age;**

Have a high school diploma, high school equivalent, or high school certificate of coursework completion as defined in Texas Education Code §28.025(d);  
 Have a cleared background check;  
 Have a current record of a tuberculosis (TB) examination, showing the employee is free of TB, if required by DSHS or local health authority;  
 Complete an Affidavit for Applicants for Employment form;  
 Complete orientation;  
 24 required hours of pre-service training. For nonexempt caregivers: Eight hours before the caregiver may be counted in the child to caregiver ratio and 16 hours within 90 days of employment;  
 Current Pediatric CPR/first aid with rescue breathing within 90 days of employment and before having unsupervised access to a child in care; and  
 Complete transportation training, if applicable.

- ii. Describe the director qualification for licensed CCDF center-based care, including any variations based on the ages of children in care or the number of staff employed: **Must be at least 21 years of age;**  
 Have a high school diploma, high school equivalent, or high school certificate of coursework completion as defined in Texas Education Code §28.025(d);  
 Have a cleared background check;  
 Have a current record of a TB examination, showing that the employee is free of TB, if required by DSHS or local health authority;  
 Have completed an Affidavit for Applicants for Employment form;  
 Complete orientation;  
 Complete 24 required hours of pre-service training. For nonexempt caregivers: Eight hours before the caregiver may be counted in the child to caregiver ratio and 16 hours within 90 days of employment;  
 Current Pediatric CPR/first aid with rescue breathing within 90 days of employment and before having unsupervised access to a child in care; and  
 Complete transportation training, if applicable.

A director must also meet one of the following combinations of education and experience as listed below:

A bachelor's degree with 12 college credit hours in child development and six in management and at least one year of experience in a LCCC;  
 An associate of applied science degree in child development or a closely related field, with six college credit hours in child development, six college credit hours in management, and at least two years of experience in a LCCC;  
 60 college credit hours, with nine college credit hours in child development, six college credit hours in management, and at least two years of experience in a LCCC;  
 A child care administrator's certificate from a community college, with at least 15 college credit hours in child development, three college credit hours in management, and at least two years of experience in a LCCC;  
 A Child Development Associate™ credential or certified child care professional credential, with six college credit hours in management and at least two years of experience in a LCCC;  
 A day care administrator's credential issued by a professional organization or

educational institution and approved by CCR and at least two years of experience in a LCCC; or

Nine college credit hours in child development, nine college credit hours in management, and at least three years of experience in a LCCC.

b. Licensed family child care

Describe the provider qualifications for licensed family child care homes, including any variations based on the ages of children in care: **For LCCHs and RCCHs, the primary caregiver must:**

**Be at least 21 years of age;**

**Have a high school diploma or its equivalent;**

**Have a certificate of completion of the licensing orientation within one year of the application date; Have current certification in pediatric CPR and pediatric first aid with rescue breathing;**

**Have been cleared by a background check;**

**Have a current record of a TB examination showing you are free of contagious TB, if required by the Texas DSHS or local health authority; and**

**Have proof of training in the following:**

a. Prevention, recognition, and reporting of child maltreatment, including:

(i) Factors indicating a child is at risk for abuse or neglect;

(ii) Warning signs indicating a child may be a victim of abuse or neglect;

(iii) Procedures for reporting child abuse or neglect; and

(iv) Community organizations that have training programs available to employees, children, and parents.

b. Recognizing and preventing shaken baby syndrome and abusive head trauma;

c. Understanding and using safe sleep practices and preventing sudden infant death syndrome (SIDS);

d. Understanding early childhood brain development;

e. Understanding the developmental stages of children;

f. Emergency preparedness;

g. Preventing and controlling the spread of communicable diseases, including immunizations;

h. Administering medication, if applicable;

i. Preventing and responding to emergencies due to food poisoning or an allergic reaction;

j. Understanding building and physical premises safety, including identification and protection from hazards that can cause bodily injury, such as electric hazards, bodies of water, and vehicular traffic;

k. Handling, storing, and disposing of hazardous materials; and

l. Precautions in transporting children if the child care home plans to transport a child whose chronological or developmental age is less than nine years.

The primary caregiver in a LCCH must also meet one of the following combinations of education and experience in a LCCC, LCCH, or RCCH:

A bachelor's degree with 12 college credit hours in child development, three college credit hours in management, and at least one year of experience;

An associate of applied science degree in child development or a closely related field, with six college credit hours in child development, three college credit hours in management, and at least one year of experience;

Sixty college credit hours, with six college credit hours in child development, three college credit hours in management, and at least one year of experience;

A child development associate credential or certified child care professional credential with three college credit hours in management and at least one year of experience;

A child care administrator's certificate from a community college with at least 15 college credit hours in child development, three college credit hours in management, and at least two years of experience;

A day care administrator's credential issued by a professional organization or an educational institution and approved by CCR, and at least two years of experience; or 72 clock hours of training in child development, 30 clock hours in management, and at least three years of experience.

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

Describe the provider qualifications for licensed, regulated, or registered in-home care providers (care in the child's own home) including any variations based on the ages of children in care: **N/A**

#### 5.2.4 Teacher/caregiver qualifications for license-exempt providers

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

- a. License-exempt center-based child care. **N/A**
- b. License-exempt home-based child care. **N/A**
- c. License-exempt in-home care (care in the child's own home). **N/A**

### 5.3 Health and Safety Standards for CCDF Providers

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

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

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

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

- a. Provide the standards, appropriate to the provider setting and age of children, that address the prevention and control of infectious diseases for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746. Standards: §§746.501, 746.503, 746.611, 746.627, 746.901, 746.1305, 746.1309, 746.1311, 746.3111, 746.3113, 746.3123, 746.3317, 746.3119, 746.3401, 746.3433, 746.3501, 746.3505, 746.3601, 746.3611.**

**Brief description of the applicable standards: Providers must adhere to the local health authority's requirements regarding TB testing for children and employees. Employees and children must wash hands throughout the day at specific times, including after diapering and toileting. Multiple standards require sanitation of the class environment to prevent and control infectious disease. For home providers, orientation and annual training hours must include such training, and the primary caregiver must complete such training as part of the requirements of a primary caregiver.**

**Pre-service and annual training hours for LCCCs must include instruction on immunizations and preventing and controlling the spread of communicable diseases.**

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747. Standards: §§747.501, 747.503, 747.603, 747.605, 747.611, 747.629, 747.901, 747.903, 747.905, 747.909, 747.3117, 747.3201, 747.3203, 747.3211, 747.3213, 747.3229, 747.3301, 747.3307, 747.3401, 747.3403, 747.3411.**
- iii. All CCDF-eligible licensed in-home care. Provide the standard:  
**[x] Not applicable.**
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744. Standards: §§744.501, 744.503, 744.611, 744.625, 744.901, 744.2501, 744.2531, 744.2571, 744.2573, 744.2575, 744.2576, 744.2579, 744.2581.**

- b. Provide the standards, appropriate to the provider setting and age of children, that address that children attending child care programs under CCDF are age-appropriately immunized, according to the latest recommendation for childhood immunizations of the respective State public health agency, for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746.**



**Standards: §§746.501, 746.503, 746.603, 746.613, 746.615, 746.623, 746.625, 746.1305, 746.1309, 746.1311.**

**Brief description of the applicable standards: All providers eligible to receive CCDF must obtain immunization records or an exemption from immunizations and a health statement for each child in care. Providers must have policies for immunizations, vaccine-preventable diseases, and health checks. Vaccine-preventable diseases for employees must also be addressed in policy, unless the operation is in the home of the permit holder, the director, or a caregiver.**

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747.**  
**Standards: §§747.501, 747.503, 747.603, 747.613, 747.615, 747.623, 747.627, 747.1007, 747.1107, 747.1301, 747.1305, 747.1309.**
- iii. All CCDF-eligible licensed in-home care. Provide the standard:  
**[x] Not applicable.**
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
**Standards: §§744.501, 744.503, 744.603, 744.613, 744.615, 744.623, 744.1305, 744.1309, 744.1311, 744.2579, 744.2581.**

### 5.3.2 Prevention of sudden infant death syndrome and the use of safe-sleep practices health and safety standard

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

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746.**  
**Standards: §§746.501, 746.1305, 746.1309, 746.1311, 746.2401, 746.2403, 746.2405, 746.2409, 746.2411, 746.2413, 746.2415, 746.2423, 746.2425, 746.2426, 746.2427, 746.2428, 746.2429, 746.3407.**

**Brief description of the applicable standards: Any provider caring for infants and eligible to receive CCDF must follow the minimum standards which include standards for cribs and safety, require that infants be placed on their backs to sleep, and prohibit swaddling, sleeping in restrictive devices, and certain types of equipment.**

Minimum standards also require providers to have a safe-sleep policy and parents to sign an enrollment agreement that includes a copy of that policy. If a caregiver provides care for children younger than 24 months of age, pre-service and annual training hours must include one hour of training that covers the following topics:

Recognizing and preventing shaken baby syndrome and abusive head trauma;  
Understanding and using safe-sleep practices and preventing SIDS; and  
Early childhood brain development.

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747.**  
**Standards: §§747.501, 747.801, 747.1007, 747.1107, 747.1301, 747.1305, 747.1309, 747.2301, 747.2303, 747.2305, 747.2307, 747.2309, 747.2311, 747.2313, 747.2315, 747.2323, 747.2325, 747.2326, 747.2327, 747.2328, 747.2329.**
- iii. All CCDF-eligible licensed in-home care. Provide the standard:  
**[x] Not applicable.**
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-age, before-, and after-school programs are not permitted to care for infants.**

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

- a. Provide the standards, appropriate to the provider setting and age of children, that address the administration of medication for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746.**  
**Standards: §§746.501, 746.603, 746.605, 746.801, 746.1303, 746.1309, 746.1311, 746.3001, 746.3801, 746.3803, 746.3805, 746.3807, 746.3809, 746.3811, 746.3817, 746.3819.**

**Brief description of the applicable standards: Minimum standards require all providers eligible to receive CCDF to have a policy regarding procedures for dispensing medication. Minimum standards also require providers to inform parents before enrollment if the provider chooses not to administer medication. Parents are required to sign an enrollment agreement that includes a copy of the provider's medication policy.**

**Minimum standards require authorization from a parent for the provider to administer medications (except in the event of a medical emergency). This authorization must include instructions on how to administer and store**

medication and guidance on how to document the administration of medication. Medication records must be kept for at least three months.

If a caregiver provides care for a child with a diagnosed food allergy, the caregiver must have a food allergy emergency plan signed by the child's health care professional and a parent.

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747.**  
**Standards: §§747.501, 747.603, 747.605, 747.801, 747.1007, 747.1107, 747.1301, 747.1305, 747.1309, 747.2901, 747.3601, 747.3603, 747.3605, 747.3607, 747.3609, 747.3611, 747.3617, 747.3619.**
  - iii. All CCDF-eligible licensed in-home care. Provide the standard:  
**[x] Not applicable.**
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**
  - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
  - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
**Standards: §§744.501, 744.603, 744.605, 744.801, 744.1303, 744.1309, 744.1311, 744.2301, 744.2651, 744.2653, 744.2655, 744.2657, 744.2651, 744.2659, 744.2661, 744.2667, 744.2669.**
- b. Provide the standards, appropriate to the provider setting and age of children, that address obtaining permission from parents to administer medications to children for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746.**  
**Standards: §§746.1303, 746.1309, 746.1311, 746.3803.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs or LCCHs, Chapter 747.**  
**Standards: §§747.801, 747.1007, 747.1107, 747.1301, 747.1305, 747.1309, 747.3603.**
  - iii. All CCDF-eligible licensed in-home care. Provide the standard:  
**[x] Not applicable.**
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
**Standards: §§744.1303, 744.1309, 744.1311, 744.2653.**

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

- a. Provide the standards, appropriate to the provider setting and age of children, that address the *prevention* of emergencies due to food and allergic reactions for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746.**  
**Standards: §§746.401, 746.403, 746.605, 746.1303, 746.1309, 746.1311, 746.3001, 746.3301, 746.3817, 746.3819.**

**Brief description of the applicable standards: Providers take the following steps when caring for children with food allergies:**

**Obtain information about a child's allergies before admitting the child to the child care facility;**

**Post a list of each child's food allergies that require an emergency plan;**

**Take a copy of a child's food-allergy emergency plan and allergy medications on field trips; and**

**Ensure that the child is not served food that is identified on the child's food-allergy emergency plan.**

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747.**  
**Standards: §§747.401, 747.605, 747.1007, 747.1107, 747.1301, 747.1305, 747.1309, 747.3101, 747.3109, 747.3617, 747.3619.**

- iii. All CCDF-eligible licensed in-home care. Provide the standard:

**[x] Not applicable.**

- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
**Standards: §§744.401, 744.403, 744.605, 744.1303, 744.1309, 744.1311, 744.2301, 744.2401, 744.2409, 744.2667, 744.2669.**

- b. Provide the standards, appropriate to the provider setting and age of children, that address the *response* to emergencies due to food and allergic reactions for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746. Standards: §§746.1303, 746.1309, 746.1311, 746.3001, 747.3617, 747.3619.**

**Brief description of the applicable standards: For all providers eligible to receive CCDF, minimum standards define a food-allergy emergency plan and contain guidance about when a food-allergy emergency plan is required. A food-allergy emergency plan is defined as an individualized plan prepared by the child's health care professional that includes:**

**A list of each food the child is allergic to;  
Symptoms the child may exhibit if exposed to a food on the list; and  
The steps to take if the child has an allergic reaction.**

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747. Standards: §§747.1007, 747.1107, 747.1301, 747.1305, 747.1309, 747.2901, 747.3109.**

- iii. All CCDF-eligible licensed in-home care. Provide the standard::  
**[x] Not applicable.**

- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**

- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**

- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744. Standards: §§744.605, 744.1303, 744.1309, 744.1311, 744.2301, 744.2667, 744.2669.**

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

- a. Provide the standards, appropriate to the provider setting and age of children, that address the identification of and protection from building and physical premises hazards for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746. Standards: §§746.1303, 746.3407, 746.3701, 746.3703, 746.3707, 746.3709, 746.4311, 746.4135, 746.4751, 746.5501.**

**Brief description of the applicable standards: For all providers eligible to receive CCDF, minimum standards require providers to take safety precautions to ensure**

that areas accessible to children are free from hazards, including:

Electrical outlets and connections;  
Air conditioners, heaters, and fans;  
Sliding-glass doors;  
Play materials and equipment;  
Poisonous or potentially harmful plants;  
Storage chests, boxes, or trunks;  
Televisions;  
Dangerous individuals; and  
Unsafe children's products.

Minimum standards prohibit the presence of firearms and other weapons on the premises of a child care center (except for firearms and other weapons carried by certified peace officers and security officers). Minimum standards for child care homes require that weapons be locked and stored out of reach of children. Ammunition must be kept in a separate locked cabinet and be inaccessible to children during all hours of operation.

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747.**  
Standards: §§747.1007, 747.1107, 747.3203, 747.3501, 747.3503, 747.3505, 747.3935, 747.4113, 747.4407, 747.5011, 747.5301.
- iii. All CCDF-eligible licensed in-home care. Provide the standard:  
[x] Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
Standards: §§744.1303, 744.2601, 744.2603, 744.2607, 744.2609.

- b. Provide the standards, appropriate to the provider setting and age of children, that address the identification of and protection from bodies of water for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746.**  
Standards: §§746.1303, 746.1311, 746.1311, 746.2105, 746.3701, 746.5001, 746.5003, 746.5005, 746.5007, 746.5013, 746.5017.

Brief description of the applicable standards: For all providers eligible to receive CCDF, minimum standards require providers to take safety precautions to ensure that areas accessible to children are free from hazards related to bodies of water, such as pools, hot tubs, ponds, creeks, birdbaths, fountains, buckets, and barrels.

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 744.**  
Standards: §§747.301, 747.1007, 747.1107, 747.1301, 747.1305, 747.1309, 747.2005, 747.3501, 747.4801, 747.4803, 747.4805, 747.4807, 747.4817.
  - iii. All CCDF-eligible licensed in-home care. Provide the standard:  
[x] Not applicable.
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**
  - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
  - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
Standards: §§744.301, 744.1303, 744.1309, 744.1311, 744.1905, 744.2601, 744.3401, 744.3403, 744.3405, 744.3407, 744.3415.
- c. Provide the standards, appropriate to the provider setting and age of children, that address the identification of and protection from vehicular traffic hazards for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746.**  
Standards: §§746.1303, 746.1309, 746.1311, 746.5605.  
  
Brief description of the applicable standards: For all providers eligible to receive CCDF, minimum standards require training in understanding building and physical premises safety, including identification and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic.
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747.**  
Standards: §§747.1007, 747.1107, 747.1301, 747.1305, 747.1309, 747.5405.
  - iii. All CCDF-eligible licensed in-home care. Provide the standard:  
[x] Not applicable.
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**
  - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
  - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**

**Standards: §§744.1303, 744.1309, 744.1311, 744.3805.**

**5.3.6 Prevention of shaken baby syndrome, abusive head trauma, and maltreatment health and safety standard**

- a. Provide the standards, appropriate to the provider setting and age of children, that address the prevention of shaken baby syndrome and abusive head trauma and indicate the age of children it applies to for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746. Standards: §§746.501, 746.1305, 746.1309, 746.1311.**

**Brief description of the applicable standards: CCR minimum standards require employees to ensure that no child is abused or neglected while in the care of the facility and report suspected abuse or neglect.**

**An overview of the policy on the prevention, recognition, and reporting of child maltreatment must be covered in orientation and as part of annual training for all caregivers and must be covered in written operational policies. The standards also list acceptable and prohibited forms of discipline and guidance. SIDS and shaken baby syndrome must be covered in pre-service and annual training.**

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747. Standards: §§747.1007, 747.1107, 747.1301, 747.1305, 747.1309.**

- iii. All CCDF-eligible licensed in-home care. Provide the standard:

**[x] Not applicable.**

- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**

- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**

- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-age and before- or after-school programs are not permitted to care for infants.**

- b. Provide the standards, appropriate to the provider setting and age of children, that address the prevention of child maltreatment and indicate the age of children it applies to for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746. Standards: §§746.501, 746.901, 746.1303, 746.1309, 746.1311, 746.2803, 746.2805.**

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs**



and LCCHs, Chapter 747.

Standards: §§747.501, 747.901, 747.1007, 747.1107, 747.1301, 747.1403, 747.2703, 747.2705.

- iii. All CCDF-eligible licensed in-home care. Provide the standard:  
☒ Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard:  
**N/A**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
Standards: §§744.501, 744.901, 744.1303, 744.1309, 744.1311, 744.2103, 744.2105.

#### 5.3.7 Emergency preparedness and response planning standard

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

- i. ☒ Evacuation
- ii. ☒ Relocation
- iii. ☒ Shelter-in-place
- iv. ☒ Lock down
- v. Staff emergency preparedness
  - ☒ Training
  - ☒ Practice drills
- vi. Volunteer emergency preparedness
  - ☒ Training
  - ☒ Practice drills
- vii. ☒ Communication with families
- viii. ☒ Reunification with families
- ix. ☒ Continuity of operations
- x. Accommodation of
  - ☒ Infants
  - ☒ Toddlers
  - ☒ Children with disabilities

☒ Children with chronic medical conditions

xi. If any of the above are not checked, describe:

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

a. Provide the standards, appropriate to the provider setting and age of children, that address the handling and storage of hazardous materials for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746. Standards: §§746.1303, 746.1309, 746.1311, 746.3317, 746.3407, 746.3415, 746.3425, 746.3701.**

**Brief description of the applicable standards: For all providers eligible to receive CCDF, minimum standards require providers to:**

**Clearly mark cleaning supplies and other toxic materials;  
Keep cleaning supplies and other toxic materials away from food and inaccessible to children;  
Use, store, and dispose of hazardous materials as recommended by the manufacturer;  
Wash hands after handling cleaners, toxic materials, or bodily fluids; and  
Wear gloves when handling blood.**

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747. Standards: §§747.1007, 747.1107, 747.1301, 747.1305, 747.1309, 747.3203, 747.3117, 747.3211, 747.3221, 747.3225, 747.3501.**

- iii. All CCDF-eligible licensed in-home care. Provide the standard:

☒ Not applicable.

- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**

- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**

- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744. Standards §§744.1303, 744.1309, 744.1311, 744.2419, 744.2507, 744.2515, 744.2523, 744.2601.**

b. Provide the standards, appropriate to the provider setting and age of children, that address the disposal of bio contaminants for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746.**

**Standards: §§746.1303, 746.1309, 746.1311, 746.3407, 746.3425.**

**Brief description of the applicable standards: All providers must clearly mark cleaning supplies and other toxic materials and keep them separate from food and inaccessible to children. Additionally, providers must follow the manufacturer's recommendations for the use, storage, and disposal of hazardous materials.**

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747.**  
**Standards: §§747.1007, 747.1107, 747.1301, 747.1305, 747.1309, 747.3203, 747.3221.**
- iii. All CCDF-eligible licensed in-home care. Provide the standard:  
**[x] Not applicable.**
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
**Standards: §§744.1303, 744.1309, 744.1311, 744.2507, 744.2523.**

#### **5.3.9 Precautions in transporting children health and safety standard**

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

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746.**  
**Standards: §§746.301, 746.501, 746.605, 746.901, 746.1301, 746.1303, 746.1311, 746.1316, 746.1805, 746.3001, 746.3703, 746.5605, 746.5607, 746.5609, 746.5613, 746.5615, 746.5617, 746.5619, 746.5621, 746.5623, 746.5625.**

**Brief description of the applicable standards: Minimum standards for LCCCs, school-age, before-, and after-school programs, LCCHs, and RCCHs require providers to:**

**Obtain a parent or guardian's permission to transport the children in their care;  
Have a transportation policy;  
Prohibit alcohol, controlled substances, and smoking while transporting;  
Maintain vehicles in safe operating condition;  
Take safety precautions when loading and unloading children;  
Use passenger safety seat systems;  
Require the use of safety belts for caregivers and drivers;  
Carry a driver's license and documentation of the names of the children being transported;**

Carry emergency medical transport and treatment authorization forms for each child being transported;  
 Carry parent's names and telephone numbers and emergency telephone numbers for each child being transported;  
 Carry safety equipment, including a fire extinguisher and first-aid kit;  
 Have a plan to handle transportation emergencies;  
 Have communication requirements regarding the transport of children; and  
 Under certain circumstances, have an electronic child-safety alarm installed.

For LCCCs with a vehicle purchased or leased on or after December 31, 2013, the vehicle must be equipped with an electronic child-safety alarm if it is designed to seat eight or more individuals and the operation that uses the vehicle to transport is responsible for ensuring that the alarm is installed and maintained according to the manufacturer's instructions. The alarm must always be used whenever a vehicle is used to transport a child in care.

Child care homes are not required to have an electronic child-safety alarm installed. If the home transports children whose chronological or developmental age is younger than nine years old, two clock hours of annual transportation safety training is required for the primary caregiver and each employee before transporting a child.

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747.**  
 Standards: §§747.301, 747.605, 747.901, 747.1007, 747.1107, 747.1301, 747.1303, 747.1305, 747.1309, 747.1314, 747.1903, 747.2901, 747.3503, 747.5401, 747.5403, 747.5405, 747.5407, 747.5409, 747.5411, 747.5413, 747.5415, 747.5417, 747.5419, 747.5421.
- iii. All CCDF-eligible licensed in-home care. Provide the standard:  
☒ Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
 Standards: §§744.301, 744.501, 744.605, 744.901, 744.1301, 744.1303, 744.1309, 744.1311, 744.1317, 744.1403, 744.2301, 744.2603, 747.2901, 744.3801, 744.3803, 744.3805, 744.3807, 744.3809, 744.3811, 744.3813, 744.3815, 744.3817, 744.3819, 744.3821.

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

- a. Provide the standards, appropriate to the provider setting and age of children, that

address pediatric first aid for all staff for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746. Standards: §§746.1301, 746.1315, 746.1329, 746.1403, 746.3001, 746.3117, 746.3119.**

**Brief description of the applicable standards: For all providers eligible to receive CCDF, CCR minimum standards for LCCCs, school-age, before-, and after-school programs, LCCHs, and RCCHs require Pediatric First Aid and CPR training and recertification to adhere to the guidelines for cardiopulmonary resuscitation for laypersons established by the American Heart Association. Each caregiver and the child care center director must have a current certificate of training with an expiration or renewal date.**

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747. Standards: §§747.1007, 747.1107, 747.1209, 747.1301, 747.1303, 747.1305, 747.1309, 747.1313, 747.1327, 747.2901.**

- iii. All CCDF-eligible licensed in-home care. Provide the standard:

**[x]** Not applicable.

- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**

- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**

- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744. Standards: §§744.1301, 744.1303, 744.1309, 744.1311, 744.1315, 744.1331, 744.1403, 744.2301.**

- b. Provide the standards, appropriate to the provider setting and age of children, that address pediatric cardiopulmonary resuscitation for all staff for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746. Standards: §§746.1301, 746.1309, 746.1311, 746.1315, 746.1329, 746.1403, 746.3001, 746.3117, 746.3119.**

**Brief description of the applicable standards: For all providers eligible to receive CCDF, CCR minimum standards for LCCCs, school-age, before-, and after-school programs, LCCHs, and RCCHs require CPR training and recertification to adhere to the guidelines for cardiopulmonary resuscitation for laypersons established by the American Heart Association. Each caregiver and the child care center director must have a current certificate of training with an expiration or renewal date.**

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747.**

**Standards: §§747.1007, 747.1107, 747.1209, 747.1303, 747.1309, 747.1313, 747.1327, 747.2901.**

- iii. All CCDF-eligible licensed in-home care. Provide the standard:  
**[x] Not applicable.**
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **N/A**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
**Standards: §§744.1301, 744.1315, 744.1331, 744.1403, 744.2301.**

#### 5.3.11 Identification and reporting of child abuse and neglect health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the identification of child abuse and neglect for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746.**  
**Standards: §§746.501, 746.901, 746.1201, 746.1303, 746.1309, 746.1311.**

**Brief description of the applicable standards: CCR Minimum standards require employees to ensure that no child is abused or neglected while in the care of the center. All caregivers must report suspected abuse, neglect, or exploitation.**

**An overview of the policy on prevention, recognition, and reporting of child maltreatment must be covered in orientation and as part of annual training for all caregivers. Providers must also develop written policies and procedures on preventing and responding to abuse and neglect of children that include the following:**

**Requirements for annual training for employees;  
Methods for increasing employee and parent awareness of child abuse and neglect, including information on warning signs that a child may be a victim of abuse or neglect and factors that may indicate that a child is at risk;  
Strategies for coordination between the center and appropriate community organizations; and  
Actions that the parent of a child who is a victim of abuse or neglect should take to obtain assistance and intervention, including procedures for reporting child abuse or neglect.**

**CCR minimum standards require directors to ensure that:**

No child is abused or neglected;  
Employees report abuse and neglect; and  
Policies are provided to parents and include instructions on how to report abuse and neglect.

Directors must also ensure that employees are trained on the provider's policies about the prevention, recognition, and reporting of abuse or neglect, including:

Factors indicating that a child is at risk of abuse or neglect;  
Warning signs that a child might be a victim of abuse or neglect; procedures for reporting abuse or neglect; and  
Information about community organizations that have additional training on the topic.

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747.**  
Standards: §§747.1007, 747.1107, 747.1301, 747.1403.
  - iii. All CCDF-eligible licensed in-home care. Provide the standard:  
[x] Not applicable.
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard:  
**N/A**
  - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
  - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
Standards: §§744.901, 744.1201, 744.1303, 744.1309, 744.1311, 744.2109.
- b. Provide your standards, appropriate to the provider setting and age of children, that address the reporting of child abuse and neglect for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: **LCCCs, Chapter 746.**  
Standards: §§746.201, 746.307, 746.405, 746.901, 746.1201, 746.1303, 746.1309, 746.1311.  
  
Brief description of the applicable standards: The number for the Texas Abuse Hotline (1-800-252-5400) is required to be posted in a prominent area within the facility. Additional requirements include notification of all parents and guardians of children in care regarding any incident of abuse, neglect, or exploitation of a child.
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **RCCHs and LCCHs, Chapter 747.**  
Standards: §§747.207, 747.305, 747.403, 747.501, 747.1007, 747.1107, 747.1301, 747.1403, 747.1501.

- iii. All CCDF-eligible licensed in-home care. Provide the standard:  
☒ Not applicable.
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **N/A**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard:  
**N/A**
  - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **N/A**
  - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **School-Age and Before- or After-School Programs, Chapter 744.**  
**Standards: §§744.201, 744.307, 744.405, 744.501, 744.901, 744.1201, 744.1303, 744.1309, 744.1311.**
- c. Confirm if child care providers must comply with the [Lead Agency's](#) procedures for reporting child abuse and neglect as required by the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i):
- ☒ Yes, confirmed.
- ☐ No. If no, describe:

#### 5.3.12 Additional optional standards

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

☒ Yes.

☐ No. If no, skip to Section 5.4

If yes, describe the standard(s).

- i. Nutrition. Describe: **CCR Minimum standards include requirements for how often to provide snacks and meals. The meals and snacks served must follow the meal patterns established by the US Department of Agriculture (TDA) CACFP that is administered by the Texas TDA. LCCCs, school-age, before-, and after-school programs, LCCHs, and RCCHs must follow these patterns regardless of whether the operation participates in the program for reimbursement.**

**CCR minimum standards have specific requirements for feeding infants and specify the daily food needs of children by the age groups outlined by CACFP. Minimum standards prohibit serving fruit or vegetable juice to children younger than 12 months and specify the permissible amount of juice to serve to children in age groups 12 months through five and six years of age and**



older.

For an infant who is not yet ready for table food, providers must obtain and follow written feeding instructions that are signed and dated by the infant's parent or health care professional. These instructions must be updated every 30 days.

Annual training hours may include nutrition education, but there are no specific requirements.

- ii. Access to physical activity. Describe: CCR minimum standards for physical activity were updated to align with the best practices published in the fourth edition of Caring for Our Children. Minimum standards now require children ages 18 months and older be allowed 60 to 90 total minutes of outdoor time each day. Minimum standards include specific requirements for the types of activities provided for the following age groups: infants, toddlers, prekindergarten, and school-age.

Minimum standards require all children ages 18 months and older to be provided with the opportunity for outdoor play twice a day, weather permitting. Infants are required to have the opportunity for outdoor play at least once a day. The daily activity plan must contain a balance of active and quiet play that includes group and individual activities.

Withholding active play or keeping a child inside as a consequence for behavior, unless the child is exhibiting behavior during active play that requires a brief supervised separation or time-out, is prohibited.

Operational policies should include and address the promotion of indoor and outdoor physical activity and cover the following:

The benefits of physical activity and outdoor play;

The duration of both indoor and outdoor physical activity at the operation;

The type of physical activity (structured and unstructured) that children may engage in at the operation;

Each setting in which physical activity will take place;

The recommended clothing and footwear that allow children to participate freely and safely in physical activities; and

A plan to ensure physical activity occurs on days when extreme weather conditions prohibit or limit outdoor play.

Providers must ensure that screen time activity, if used:

Is related to planned activities that meet educational goals; is age-appropriate;

Does not exceed one hour per day;

Is not during mealtimes, snack times, nap times, or rest times; and

Does not include advertising or violence.

A school-age child may use screen time without restriction for homework.

Screens must be turned off when not in use.

Annual training hours may include instruction on physical activity, but there are no specific requirements.

- iii. Caring for children with special needs. Describe: CCR minimum standards require operations to ensure that children who need special care due to disabling or limiting conditions receive the care recommended by a health care professional or by qualified individuals affiliated with the local school district or early childhood intervention program. They must also have procedures for supporting inclusive services to children with special care needs.

Information about special needs requirements must be obtained at admission. These basic care requirements must be documented and on file for review at the child care center during operating hours.

Caregivers must provide care that is consistent with a child's special needs, including any special supervision needs and provide planned activities that integrate children with special care needs by adapting equipment and procedures as necessary. All activities must integrate all children with or without special care needs.

Annual training hours may include caring for children with special needs, but there are no specific requirements.

- iv. Any other areas determined necessary to promote child development or to protect children's health and safety. Describe: **Minimum standards include requirements for diapering, including how and when diapers must be changed, what equipment is required, and how to prevent the spread of germs when diapering children.**

Minimum standards prohibit the use of tobacco products in or on the grounds of an operation. Child care homes are prohibited from tobacco use only during operating hours. The only providers eligible to provide in-home care are individuals related to the child. Relative-only providers are exempt from these requirements.

Minimum standards require that operations be equipped with a working carbon monoxide detection system.

Minimum standards require annual fire inspections for centers. Fire inspections are not applicable to child care homes; however, local ordinances may require one. If care is provided for children above or below the ground floor of the child care home, written approval must be granted from the state or local fire marshal.

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

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

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

#### 5.4.1 Health and safety pre-service/orientation training requirements

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

	Is this standard addressed in the pre-service or orientation training?	Is the pre-service or orientation training on this standard appropriate to different settings and age groups?	Does the Lead Agency require staff to complete the training before caring for children unsupervised?
a. Prevention and control of infectious diseases (including immunizations)	[x]	[x]	[x]
b. SIDS prevention and use of safe sleep practices	[x]	[x]	[x]
c. Administration of medication	[x]	[x]	[x]
d. Prevention and response to food and allergic reactions	[x]	[x]	[x]
e. Building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic	[x]	[x]	[x]
f. Prevention of shaken baby syndrome, abusive head trauma and child maltreatment	[x]	[x]	[x]

g. Emergency preparedness and response planning and procedures	[x]	[x]	[x]
h. Handling and storage of hazardous materials and disposal of biocontaminants	[x]	[x]	[x]
i. Appropriate Precautions in transporting children, if applicable	[x]	[x]	[x]
j. Pediatric first aid and pediatric CPR (age-appropriate)	[x]	[x]	[x]
k. Child abuse and neglect recognition and reporting	[x]	[x]	[x]
l. Child development including major domains of cognitive, social, emotional, physical development and approaches to learning.	[x]	[x]	[x]

m. If the Lead Agency does not certify implementation of all the health and safety pre-service/orientation training requirements for staff in programs serving children receiving CCDF assistance, please describe: **N/A**

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

☐ No

☒ Yes. If yes, describe: **In LCCCs and school age and before- and after-school programs, pediatric first aid with rescue breathing certification is required before having unsupervised access. A new caregiver has up to 90 days to obtain a current certificate in pediatric CPR and may have unsupervised access to a child in care if the operation has at least one employee or caregiver on the premises, while children are in care, that has a current certificate in pediatric CPR.**

**In LCCCs and school age and before- and after-school programs, training in the developmental stages of children and preventing and controlling the spread of communicable diseases, including immunizations, is a pre-service requirement that must be completed within a caregiver's first 90 days of employment. In school age and before- and after-school programs these trainings are required before a caregiver can be counted in the ratio.**

Both child care centers and child care homes require at least one hour of pre-service and annual training on SIDS and the use of safe-sleep practices if the facility provides care for children younger than 24 months of age. In child care homes the primary caregiver must complete this training prior to receiving a permit.

## 5.5 Monitoring and Enforcement of Licensing and Health and Safety Requirements

### 5.5.1 Inspections for licensed CCDF providers

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

#### a. Licensed CCDF center-based providers

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

☒ Yes.

☐ No. If no, describe:

- ii. Identify the frequency of annual unannounced inspections for licensed center-based providers addressing compliance with health, safety, and fire standards:

☒ Annually.

☐ More than once a year. If more than once a year, describe:

☐ Other. If other, describe:

- iii. Does the Lead Agency implement a differential monitoring approach when monitoring licensed center-based providers?

☐ Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements.

☒ No. If no, describe: **CCR does not implement a differential monitoring approach.**

- iv. Identify which department or agency is responsible for completing the inspections for licensed center-based providers. **HHSC CCR.**

#### b. Licensed CCDF family child care providers

- i. Does your pre-licensure inspection for licensed family child care homes assess compliance with health standards, safety standards, and fire standards?

☒ Yes.

☐ No. If no, describe:

- ii. Identify the frequency of annual unannounced inspections for licensed family child care homes addressing compliance with health, safety, and fire standards:

☒ Annually.

- ☐ More than once a year. If more than once a year, describe:
- ☐ Other. If other, describe:
- iii. Does the Lead Agency implement a differential monitoring approach when monitoring licensed family child care providers?
- ☐ Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements.
- ☒ No. If no, describe: **CCR does not implement a differential monitoring approach.**
- iv. Identify which department or agency is responsible for completing the inspections for licensed family child care providers. **HHSC CCR.**
- c. Licensed in-home CCDF child care providers
- i. Does your Lead Agency license CCDF in-home child care (care in the child's own home) providers?
- ☐ No.
- ☒ Yes. If yes, does your pre-licensure inspection for licensed in-home providers assess compliance with health, safety, and fire standards?
- ☐ Yes.
- ☒ No. If no, describe: **Relative-only listed family homes that meet other eligibility requirements for CCDF are the only providers to which CCR may issue a permit that can provide care in the child's own home. CCR does not conduct inspections on any listed family homes. The Texas DFPS conducts investigations of allegations of abuse, neglect, or exploitation involving a listed family home.**
- ii. Identify the frequency of annual unannounced inspections for licensed in-home child care providers for compliance with health, safety, and fire standards completed:
- ☐ Annually.
- ☐ More than once a year. If more than once a year, describe:
- ☒ Other. If other, describe: **CCR does not conduct inspections on any relative-only listed family homes. The Texas DFPS conducts investigations of allegations of abuse, neglect, or exploitation involving a listed family home.**
- iii. Does the Lead Agency implement a differential monitoring approach when monitoring licensed in-home child care providers?
- ☐ Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements.
- ☒ No.
- iv. Identify which department or agency is responsible for completing the inspections for licensed in-home providers. **N/A**

#### 5.5.2 Inspections for license-exempt providers

Licensing inspectors must perform at least one annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety, and fire standards. Inspections for relative providers will be addressed in subsection 5.8.

Describe the policies and practices for the annual monitoring of:

- a. License-exempt CCDF center-based child care providers
  - i. Identify the frequency of inspections for compliance with health, safety, and fire standards for license-exempt center-based providers:
    - ☐ Annually.
    - ☐ More than once a year. If more than once a year, describe:
    - ☒ Other. If other, describe: **N/A**
  - ii. Does the Lead Agency implement a differential monitoring approach when monitoring license-exempt center-based providers?
    - ☐ Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements.
    - ☒ No.
  - iii. Identify which department or agency is responsible for completing the inspections for license-exempt center-based CCDF providers. **N/A**
- b. License-exempt CCDF family child care providers
  - i. Identify the frequency of the inspections of license-exempt family child care providers to determine compliance with health, safety, and fire standards:
    - ☐ Annually.
    - ☐ More than once a year. If more than once a year, describe:
    - ☒ Other. If other, describe: **N/A**
  - ii. Does the Lead Agency implement a differential monitoring approach when monitoring license-exempt family child care providers?
    - ☐ Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements.
    - ☒ No.
  - iii. Identify which department or agency is responsible for completing the inspections for license-exempt family child care providers. **N/A**

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

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

- a. Describe the requirements for the annual monitoring of CCDF license-exempt in-home child care (care in the child's own home) providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential



monitoring procedures are used. **N/A**

- b. List the entity(ies) in your State/Territory responsible for conducting inspections of license-exempt CCDF in-home child care (care in the child's own home) providers: **N/A**

#### 5.5.4 Posting monitoring and inspection reports

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

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

- a. Does the Lead Agency post:
- i. ☒ Pre-licensing inspection reports for licensed programs.
  - ii. ☒ Full monitoring and inspection reports that include areas of compliance and non-compliance for all non-relative providers eligible to provide CCDF services.
  - iii. ☐ Monitoring and inspection reports that include areas of non-compliance only, with information about all areas covered by a monitoring visit posted separately on the website (e.g., a blank checklist used by monitors) for all non-relative providers eligible to provide CCDF services. If checked, provide a direct URL/website link to the website where a blank checklist is posted:
  - iv. ☐ Other. Describe:
- b. Check if the monitoring and inspection reports and any related plain language summaries include:
- i. ☒ Date of inspection.
  - ii. ☒ Health and safety violations, including those violations that resulted in fatalities or serious injuries occurring at the provider. Describe how these health and safety violations are prominently displayed: **CCR prominently displays all violations for each provider in a summary broken down by risk level (high, medium-high, medium, medium-low, and low). Violations are displayed in list form and include a brief description of the minimum standard, the risk level associated with the minimum standard, and the narrative explaining the reason for the violation. Also displayed is a correction narrative for how the operation has come into compliance and whether TA was provided. As of 2020, five-year serious injury and fatality summaries are also available.**
  - iii. ☒ Corrective action plans taken by the Lead Agency and/or child care provider. Describe: **For each deficiency cited, CCR displays whether the deficiency was**

corrected at the time of the inspection, the deadline for correcting the deficiency, and the date the correction was verified. Additional information about corrections is included in the narrative that explains the violation, the technical assistance provided, and how the operation has come into compliance. There is also an indicator displayed when a provider is subject to a current adverse or corrective action.

- iv. ☒ A minimum of 3 years of results, where available.
- v. If any of the components above are not selected, please explain:
- c. Lead Agencies must post monitoring and inspection reports and/or any related summaries in a timely manner.
  - i. Provide the direct URL/website link to where the reports are posted:  
**[https://childcare.hhs.texas.gov/Child\\_Care/Search\\_Texas\\_Child\\_Care/default.asp](https://childcare.hhs.texas.gov/Child_Care/Search_Texas_Child_Care/default.asp)**
  - ii. Identify the Lead Agency's established timeline for posting monitoring reports and describe how it is timely: **CCR posts deficiencies to the public Search Texas Child Care web page after due process has been finalized. CCR notifies providers that if, upon receipt of the inspection report, the provider disagrees with the actions or decisions of CCR staff, the provider has 15 days to request due process via an administrative review. If the provider does not respond within 15 days or gives written notice that it waives the right to an administrative review, the deficiency is posted to the Search Texas Child Care web page the next day. Due process usually takes from 15 to 20 days after CCR cites the deficiency. If the provider requests an administrative review, the process takes approximately 76 days after CCR cites the deficiency.**
- d. Does the Lead Agency certify that the monitoring and inspection reports or the summaries are in plain language that is understandable to parents and other consumers?  
☒ Yes.  
☐ No. If no, describe:
- e. Does the Lead Agency certify that there is a process for correcting inaccuracies in the monitoring and inspection reports?  
☒ Yes.  
☐ No. If no, describe:
- f. Does the Lead Agency maintain monitoring and inspection reports on the consumer education website?  
☒ Yes.  
☐ No. If no, describe:

#### 5.5.5 Qualifications and training of licensing inspectors

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

Describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified and have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting. **CCR inspectors must complete a 14-week training program provided by CCR. The training program involves classroom, individual, and experiential learning activities designed to ensure that inspectors learn how to regulate for the health and safety requirements outlined in state law, rules, and agency policy.**

#### 5.5.6 Ratio of licensing inspectors

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

Provide the ratio of licensing inspectors to child care providers (i.e., number of inspectors per number of child care providers) and facilities in the State/Territory and include how the ratio is sufficient to conduct effective inspections on a timely basis. **CCR has created a weighted points system to assist with caseload management. Caseloads are based on the weighted points system that has been designed to consider the following factors:**

**Numbers and type of child care operations;  
Investigations (forecasted);  
Applications (forecasted); and  
All other inspections.**

**CCR derives forecasting formulas by using a weighted moving average model that is based on 10 years of historical data. CCR then uses the state's average time at inspections to determine the weight assigned to each factor to calculate the points correlated to a specific child care operation. CCR assigns each county points and divides workloads with a targeted set of points per inspector. CCR reassesses the data at least every other year to determine whether positions need to be relocated to other areas in the state to address statewide fluctuation in child care operations.**

### 5.6 Ongoing Health and Safety Training

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

#### 5.6.1 Required ongoing training of health and safety standards

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

- a. Licensed child care centers: **30 clock hours of annual training for directors; 24 clock hours of annual training for caregivers.**

**Standards: §§746.1301, 746.1309, 746.1311, 746.1315, 744.1301, 744.1309, and 744.1311**

Brief description of applicable standards: CCR minimum standards for licensed child care centers, school-age, before-, and after-school programs require all caregivers to receive annual training on the following health and safety topics:

- prevention, recognition, and reporting of child maltreatment;
- emergency preparedness;
- immunizations and preventing and controlling the spread of communicable diseases;
- administering medication;
- preventing and responding to emergencies due to food or an allergic reaction;
- understanding building and physical premises safety, including identification and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic; and
- handling, storing and disposing of hazardous materials

In addition to the required health and safety topics, caregivers and directors must have a current certificate of training with an expiration or renewal date in pediatric first aid and CPR; and

If a caregiver provides care for a child younger than 24 months, one hour of the annual training must include recognizing and preventing shaken baby syndrome and abusive head trauma, understanding and using safe sleep practices and preventing sudden infant death syndrome (SIDS), and understanding early childhood brain development. This training requirement also applies to a director if the center provides care for children younger than twenty-four months of age.

b. License-exempt child care centers: N/A

c. Licensed family child care homes: 30 clock hours of annual training for primary caregivers; 24 clock hours of annual training for substitute/assistant caregivers in LCCH who are counted in ratio on more than ten separate occasions in one training year; and 15 clock hours of annual training for substitute/assistant caregivers in a RCCH who are counted in ratio on more than 10 separate occasions in one training year.

Standards: §§747.1303, 747.1305, 747.1309, and 747.1313

Brief description of applicable standards:

CCR minimum standards for licensed and registered child care homes requires all caregivers to receive annual training on the following health and safety topics:

- prevention, recognition, and reporting of child maltreatment
- emergency preparedness
- immunizations and preventing and controlling the spread of communicable diseases
- administering medication
- preventing and responding to emergencies due to food or an allergic reaction
- understanding building and physical premises safety
- handling, storing and disposing of hazardous materials

In addition to the required health and safety topics, caregivers must have a current certificate of training with an expiration or renewal date in pediatric first aid and CPR; and If the home provides care for a child younger than 24 months, one hour of the annual training must include recognizing and preventing shaken baby syndrome and abusive head

**trauma, understanding and using safe sleep practices and preventing sudden infant death syndrome (SIDS), and understanding early childhood brain development.**

- d. License-exempt family child care homes: **N/A**
- e. Regulated or registered in-home child care: **N/A**
- f. Non-regulated or registered in-home child care: **N/A**

## 5.7 Comprehensive Background Checks

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

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

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

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

### 5.7.1 In-state criminal history check with fingerprints

- a. Does the Lead Agency conduct in-state criminal history background checks with fingerprints for all child care staff members (including prospective staff members) of licensed, regulated, or registered child care providers, regardless of CCDF participation?  
☒ Yes.  
☐ No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct in-state criminal background checks with fingerprints.
- b. Does the Lead Agency conduct in-state criminal history background checks with fingerprints for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers) other than relative providers?  
☒ Yes.  
☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct in-state criminal background checks with fingerprints.
- c. Does the Lead Agency conduct the in-state criminal background check with fingerprints

for all individuals age 18 or older who reside in a family child care home?

☒ Yes.

☐ No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive an in-state criminal background check with fingerprints.

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

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

☒ Yes.

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

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

☒ Yes.

☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct FBI criminal background checks.

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

☒ Yes.

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

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

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

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

☒ Yes.

☐ No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct NCIC NSOR name-based background checks.

- b. Does the Lead Agency conduct NCIC NSOR name-based background checks for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers)?

☒ Yes.

☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct NCIC NSOR name-based background checks.

- c. Does the Lead Agency conduct the NCIC NSOR name-based background check for all individuals age 18 or older who reside in a family child care home?

☒ Yes.

☐ No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive a NCIC NSOR name-based background check.

#### 5.7.4 In-state sex offender registry (SOR) check

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

☒ Yes.

☐ No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct in-state SOR background checks.

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

☒ Yes.

☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct in-state SOR background checks.

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

☒ Yes.

☐ No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive an in-state SOR background check.

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

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

☒ Yes.

☐ No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct CAN registry checks.

- b. Does the Lead Agency conduct CAN registry checks for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers)?

☒ Yes.

☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct CAN registry checks.

- c. Does the Lead Agency conduct the CAN registry check for all individuals age 18 or older who reside in a family child care home?

☒ Yes.

☐ No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive a CAN registry check.

#### 5.7.6 Interstate criminal history check

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

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

☒ Yes.

☐ No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct interstate criminal history background checks.

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

☒ Yes.

☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct interstate criminal history background checks.

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

☒ Yes.

☐ No. If no, describe why individuals age 18 or older that resided in other state(s) in the past 5 years who reside in a family child care home that do not receive an interstate criminal history background check.

#### 5.7.7 Interstate Sex Offender Registry (SOR) check

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

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



registered child care providers, regardless of CCDF participation?

☒ Yes.

☐ No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct interstate SOR checks.

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

☒ Yes.

☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct interstate SOR checks.

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

☒ Yes.

☐ No. If no, describe individuals age 18 or older that resided in other state(s) in the past 5 years who reside in a family child care home that do not receive an interstate SOR check.

#### 5.7.8 Interstate child abuse and neglect (CAN) registry check

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

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

☒ Yes.

☐ No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct interstate CAN registry checks.

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

☒ Yes.

☐ No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct interstate CAN registry checks.

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

☒ Yes.

☐ No. If no, describe individuals age 18 or older that resided in other state(s) in the past 5 years who reside in a family child care home that do not receive interstate CAN registry checks.

#### 5.7.9 Disqualifications for child care employment

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

- Refused to consent to a background check.
  - Knowingly made materially false statements in connection with the background check.
  - Are registered, or are required to be registered, on the State/Territory sex offender registry or repository or the National Sex Offender Registry.
  - Have been convicted of a felony consisting of murder, child abuse or neglect, crimes against children (including child pornography), spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault, or battery.
  - Have a violent misdemeanor committed as an adult against a child, including the following crimes: child abuse, child endangerment, sexual assault, or any misdemeanor involving child pornography.
  - Convicted of a felony consisting of a drug-related offense committed during the preceding 5 years.
- a. Does the Lead Agency disqualify the employment of child care staff members (including prospective staff members) by child care providers receiving CCDF subsidy payment for CCDF-identified disqualifying criteria?
- ☒ Yes.
- ☐ No. If no, describe the disqualifying criteria:
- b. Does the Lead Agency use the same criteria for licensed, regulated, and registered child care providers regardless of CCDF participation?
- ☐ Yes.
- ☒ No. If no, describe any disqualifying criteria used for licensed, regulated, and registered child care providers: **There are additional offenses that are a disqualifying offense for RCCHs than there are for LCCHs.**
- c. How does the Lead Agency use results from the in-state child abuse and neglect registry check?
- ☐ Does not use them to disqualify employment.
- ☒ Uses them to disqualify employment. If checked, describe: **When the in-state abuse/neglect registry search shows a match, Central Background Check Unit (CBCU) uses specifications in the Texas Administrative Code (TAC) and Child Care Regulation Handbook (CCRH) to determine if a person's abuse/neglect history results require further action. CBCU staff review the individual's history and compare to TAC minimum standards to determine whether the individual is an immediate threat to the health and safety of children, and whether the individual is eligible to be present at a regulated child care operation.**
- d. How does the Lead Agency use results from the interstate child abuse and neglect registry check?

☐ Does not use them to disqualify employment.

☒ Uses them to disqualify employment. If checked, describe: **When the interstate child abuse and neglect registry search shows a match, CBCU uses specifications in the TAC and CCRH to determine if a person's abuse/neglect history results require further action. CBCU staff review the individual's history and compare to TAC minimum standards to determine whether the individual is an immediate threat to the health and safety of children, and whether the individual is eligible to be present at a regulated child care operation.**

#### 5.7.10 Privacy

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

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

☒ Yes.

☐ No. If no, describe the current process of notification:

#### 5.7.11 Appeals processes for background checks

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

Does the appeals process:

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

☒ Yes.

☐ No. Describe:

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

☒ Yes.

☐ No. Describe:

- iii. Ensure the Lead Agency attempts to verify the accuracy of the information challenged by the individual, including making an effort to locate any missing disposition information related to the disqualifying crime.

☒ Yes.

☐ No. Describe:

- iv. Get completed in a timely manner.

☒ Yes.

☐ No. Describe:

- v. Ensure the affected individual receives written notice of the decision. In the case of a negative determination, the decision must indicate (1) the Lead Agency's efforts to verify the accuracy of information challenged by the individual, (2) any additional appeals rights available to the individual, and (3) information on how the individual can correct the federal or State records at issue in the case.

☒ Yes.

☐ No. Describe:

- vi. Facilitate coordination between the Lead Agency and other agencies in charge of background check information and results (such as the Child Welfare office and the State Identification Bureau), to ensure the appeals process is conducted in accordance with the Act.

☒ Yes.

☐ No. Describe:

#### 5.7.12 Provisional hiring of prospective staff members

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

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

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

- a. FBI criminal background check.

☒ Yes.

☐ No. If no, describe:

- b. In-state criminal background check with fingerprints.

☒ Yes.

☐ No. If no, describe:

- c. In-state Sex Offender Registry.

☒ Yes.

☐ No. If no, describe:

- d. In-state child abuse and neglect registry.

☒ Yes.

☐ No. If no, describe:

- e. Name-based national Sex Offender Registry (NCIC NSOR).

☒ Yes.

☐ No. If no, describe:

- f. Interstate criminal background check, as applicable.

☐ Yes.

☒ No. If no, describe: **Staff members with an incomplete interstate criminal background check are only provisionally eligible with the following conditions:**

**You are never in charge of the operation;**

**You are never alone with a child or group of children in the care of or enrolled in the operation, including during transportation;**

**You may only be supervised by a person with no conditions regarding his or her presence at the operation;**

**You never transport children in the care of or enrolled in the operation during hours of operation;**

**You are never responsible for financial transactions at the operation;**

**You never administer medication to children in the care of the operation, except for in a medical emergency to prevent the death or serious bodily injury of a child; and**

**You are never allowed to supervise caregivers, or volunteers or employees that have access to children.**

- g. Interstate Sex Offender Registry check, as applicable.

☐ Yes.

☒ No. If no, describe: **Staff members with an incomplete interstate criminal background check are only provisionally eligible with the following conditions:**

**You are never in charge of the operation;**

**You are never alone with a child or group of children in the care of or enrolled in the operation, including during transportation;**

**You may only be supervised by a person with no conditions regarding his or her presence at the operation;**

**You never transport children in the care of or enrolled in the operation during hours of operation;**

**You are never responsible for financial transactions at the operation;**

**You never administer medication to children in the care of the operation, except for in a medical emergency to prevent the death or serious bodily injury of a child; and**

**You are never allowed to supervise caregivers, or volunteers or employees that have access to children.**

- h. Interstate child abuse and neglect registry check, as applicable.

☐ Yes.

☒ No. If no, describe: **Staff members with an incomplete interstate criminal background check are only provisionally eligible with the following conditions:**

**You are never in charge of the operation;**

You are never alone with a child or group of children in the care of or enrolled in the operation, including during transportation;  
 You may only be supervised by a person with no conditions regarding his or her presence at the operation;  
 You never transport children in the care of or enrolled in the operation during hours of operation;  
 You are never responsible for financial transactions at the operation;  
 You never administer medication to children in the care of the operation, except for in a medical emergency to prevent the death or serious bodily injury of a child; and  
 You are never allowed to supervise caregivers, or volunteers or employees that have access to children.

- i. Does the Lead Agency require provisional hires to be supervised by a staff member who received a qualifying result on the comprehensive background check while awaiting results from the provisional hire's full comprehensive background check?

☒ Yes.

☐ No. If no, describe:

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

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

- a. Does the Lead Agency ensure background checks are completed within 45 days (after the date on which the provider submits the request)?

☒ Yes.

☐ No. If no, describe the timeline for completion for categories of providers, including which background check components take more than 45 days.

- b. Does the Lead Agency ensure child care staff receive a comprehensive background check when they work in your State but reside in a different State?

☒ Yes.

☐ No. If no, describe the current policy:

#### 5.7.14 Responses to interstate background check requests

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

- a. Does your State participate in the National Crime Prevention and Privacy Compact or National Fingerprint File programs?

☐ Yes.

☒ No.

- b. Describe how the State/Territory responds to interstate criminal history, Sex Offender Registry, and Child Abuse and Neglect Registry background check requests from another state. **The Texas Department of Public Safety (DPS) is the state criminal history repository**

**and all interstate requests from another state must go to DPS.**

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

☐ Yes. If yes, describe the current policy.

☒ No.

#### 5.7.15 Consumer education website links to interstate background check processes

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

- a. Provide the direct URL/website link that contains instructions on how child care providers and other States and Territories should initiate background check requests for prospective and current child care staff members: **The following link is for in-state child care providers and child care staff members to request interstate background checks from other states and territories: <https://www.hhs.texas.gov/providers/protective-services-providers/child-care-regulation/child-care-regulation-background-checks/fingerprinting>**

**The following link is for providers and child care staff members from other states and territories to request Texas child abuse and neglect registry checks for previous Texas residency: [https://www.dfps.texas.gov/Background\\_Checks/](https://www.dfps.texas.gov/Background_Checks/)**

**The following link is for providers and child care staff members from other states and territories to request Texas criminal history checks for previous Texas residency: <https://www.dps.texas.gov/section/crime-records>**

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

- b. Interstate criminal background check:

i. ☒ Agency name

ii. ☒ Address

iii. ☒ Phone number

iv. ☒ Email

v. ☒ Website

vi. ☒ Instructions

vii. ☒ Forms

viii. ☒ Fees

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

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

xi. If not all boxes above are checked, describe: **Texas is not an NFF or National Crime Prevention and Privacy Compact state.**

- c. Interstate sex offender registry (SOR) check:
- i. ☒ Agency name
  - ii. ☒ Address
  - iii. ☒ Phone number
  - iv. ☒ Email
  - v. ☒ Website
  - vi. ☒ Instructions
  - vii. ☒ Forms
  - viii. ☒ Fees
  - ix. If not all boxes above are checked, describe:
- d. Interstate child abuse and neglect (CAN) registry check:
- i. ☒ Agency name
  - ii. ☒ Is the CAN check conducted through a county administered registry or centralized registry?
  - iii. ☒ Address
  - iv. ☒ Phone number
  - v. ☒ Email
  - vi. ☒ Website
  - vii. ☒ Instructions
  - viii. ☒ Forms
  - ix. ☒ Fees
  - x. If not all boxes above are checked, describe:

#### 5.7.16 Background check fees

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

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

☒ Yes.

☐ No. If no, describe what is currently in place and what elements still need to be implemented:

#### 5.7.17 Renewal of the comprehensive background check

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

☒ Yes.

☐ No. If no, what is the frequency for renewing each component?



## 5.8 Exemptions for Relative Providers

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

### 5.8.1 Exemptions for relative providers

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

☐ No.

☒ Yes. If yes, which type of relatives do you exempt, and from what requirements (licensing requirements, CCDF health and safety standards, preservice/orientation training, ongoing training, inspections, and/or background checks) do you exempt them?

**Relative-only listed family homes must complete and meet the listed family home requirements for a listing. This includes completing safe sleep training as part of the application process and submitting and clearing background checks, though relative providers are exempt from a portion of background check requirements. Relative providers are only required to complete fingerprint-based criminal history checks and NCIC NSOR name-based checks if they have lived in another US State or Territory in the prior five years. Relative providers do not require interstate criminal history checks, interstate sex offender registry checks, or interstate child abuse and neglect registry checks if they have lived in another US state or territory in the prior five years.**

**Relative-only listed family homes are exempt from complying with all health and safety standards and training requirements. Relative-only listed family home providers are investigated by the DFPS for allegations related to abuse, neglect, or exploitation of children in care.**

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

A skilled child care workforce with adequate wages and benefits underpins a stable high-quality child care system that is accessible and reliable for working parents and that meets their needs and promotes equal access. Positive interactions between children and caregivers provide the cornerstone of quality child care experiences. Responsive caregiving and rich interactions support healthy socio-emotional, cognitive, and physical development in children. Strategies that successfully support the child care workforce address key challenges, including low wages, poor benefits, and difficult job conditions. Lead Agencies can help mitigate some of these challenges through various CCDF policies, including through ongoing professional development and supports for all provider types and embedded in the payment policies and practices covered in Section 4. Lead Agencies must have a framework for training, professional development, and post-secondary education. They must also incorporate health and safety training into their professional development. Lead Agencies should also implement policies that focus on improving wages and access to benefits for the child care workforce. When implemented as a cohesive approach, the initiatives support the recruitment and retention of a qualified and effective child care workforce,

and improve opportunities for caregivers, teachers, and directors to advance on their progression of training, professional development, and postsecondary education.

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

## 6.1 Supporting the Child Care Workforce

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

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

- a. Identify any Lead Agency activities related to strengthening workforce recruitment and retention of child care providers. Check all that apply:
  - i. ☒ Providing program-level grants to support investments in staff compensation.
  - ii. ☒ Providing bonuses or stipends paid directly to staff, like sign-on or retention bonuses.
  - iii. ☐ Connecting family child care providers and center-based child care staff to health insurance or supporting premiums in the Marketplace.
  - iv. ☐ Subsidizing family child care provider and center-based child care staff retirement benefits.
  - v. ☐ Providing paid sick, personal, and parental leave for family child care providers and center-based child care staff.
  - vi. ☐ Providing student loan debt relief or loan repayment for family child care providers and center-based child care staff.
  - vii. ☒ Providing scholarships or tuition support for center-based child care staff and family child care providers.
  - viii. ☐ Other. Describe:
- b. Describe any Lead Agency ongoing efforts and future plans to assess and improve the compensation of the child care workforce in the State or Territory, including increasing wages, bonuses, and stipends. **In FY22 and FY23, Boards used COVID stimulus funding to provide incentives (bonuses, stipends, or other wage supplements) for 8,588 staff at 907 Texas Rising Star-certified providers.**

Boards may use their regular CCDF child care quality funds to support child care workforce compensation. TWC publishes the Child Care Quality Strategic Planning and Expenditures Guide (<https://www.twc.texas.gov/sites/default/files/wf/docs/ccq-strategic-planning-and-expenditures-guide-twc.pdf>) which includes information on using child care quality improvement funding for wage supplementation as well as recruitment/retention bonuses.

**Some Boards provide funding to Texas Rising Star-certified providers for wage compensation or pay stipends or retention bonuses directly to the providers' staff. With**

many child care providers expressing a need for this type of support, TWC encourages Boards to implement this strategy as appropriate for the needs in their regions. Examples of wage supports provided in FY23 are as follows:

Alamo offered provider staff bonuses for teacher recruitment and retention and staff incentives for new Texas Rising Star-certified providers;  
Central Texas provided salary supplements;  
East Texas offered provider staff bonuses;  
Golden Crescent paid retention bonuses to all staff of Texas Rising Star-certified centers;  
North Central Texas offered one-time provider staff retention incentives for staff employed four months or longer;  
Tarrant County offered stipends for new Texas Rising Star-certified provider staff;  
Texoma offered employment retention incentives for early educators at Texas Rising Star-certified providers after attaining education goals (Child Development Associate (CDA®) Credential or degrees); and  
West Central offered one-time incentives at Texas Rising Star-certified provider staff.

The following Boards offered wage supports or one-time incentives for early educators for Texas Rising Star-certified providers in FY24:

Alamo;  
Capital Area;  
Dallas;  
Middle Rio;  
North Central Texas;  
Rural Capital;  
South Plains;  
Tarrant;  
Texoma; and  
West Central.

- c. Describe any Lead Agency ongoing efforts and future plans to expand access to benefits, including health insurance, paid sick, personal, and parental leave, and retirement benefits. **Texas Rising Star standards includes a measure relating to compensatory supports that a child care program provides to their staff. Based on the number of compensatory supports the program provides, which may include health benefits, paid leave, and retirement benefits, determines the number of points awarded for that measure which may potentially affect the child care program's overall certification.**
- d. Describe any Lead Agency ongoing efforts and future plans to support the mental health and well-being of the child care workforce. **TWC recognizes a need for mental health supports in the child care workforce and is exploring opportunities to provide supports. TWC is funding the AgriLife Extension Service to develop an Early Childhood Mental Health professional development series (10 hours) that will include training related to stress and self-care for teachers. TWC publishes the Child Care Quality Strategic Planning and Expenditures Guide which includes information for local Boards on using child care quality improvement funding for mental health and well-being of the child care workforce supports. The following Boards supported child care workforce mental health in BCY23 and BCY24:**

Alamo;  
Gulf Coast; and  
South Texas.

- e. Describe any other strategies the Lead Agency is developing and/or implementing to support providers' recruitment and retention of the child care workforce. **TWC uses CCDF quality funds for a variety of professional development activities that align with statewide system goals. For example, TWC funds the Texas Early Childhood Professional Development Scholarship program, which offers financial assistance to help child care providers and educators earn a CDA® Credential or enroll in college credit courses to obtain an associate's or bachelor's degree. It also includes the Early Childhood Educator Apprenticeship (ECEA) scholarship. This model will support ECEAs with on-the-job training, tuition, or course fees for students enrolled in a registered apprenticeship program (RAP). The program assists educators in achieving progressive educational and career advancement by helping them attain stackable credentials in early childhood development and education. Additionally, the program child care providers in retaining well-qualified staff and meeting Texas Rising Star staff qualifications.**

In 2022, TWC awarded three planning grants for entities to expand existing or create new RAPs. In 2023, TWC awarded six RAP planning grants. The RAPs help early childhood educators earn a minimum of a CDA® Credential but could also lead to an associate or bachelor's degree. Each grantee was required to register their RAP with the U.S. Department of Labor (DOL) before the end of the grant period. TWC is planning to release an additional grant opportunity to fund more RAP planning and implementation grants that will start in calendar year 2025.

#### 6.1.2 Strategies to support provider business practices

- a. Describe other strategies that the Lead Agency is developing and/or implementing to strengthen child care providers' business management and administrative practices. **Child Care Business Coaching & Training: Since the beginning of the COVID-19 pandemic, TWC has invested over \$50 million in free business coaching and training for child care owners, directors, and administrators. These programs have developed lasting materials (available in English and Spanish), including a free business training course and hundreds of free resources and videos. As these programs end in FY24, TWC plans to issue a request for applications to develop a smaller version of these programs to continue providing valuable support for improving business practices, including management training, budget development, and hiring and retaining staff. The training and resources previously developed will remain available for child care businesses.**

**Shared Services Alliances (SSA):** In June and July 2022, TWC awarded four grants totaling approximately \$5.7 million to plan and implement SSA. The grantees: AVANCE, Inc., Collaborative for Children, Pre-K 4 SA, and Texas Association for the Education of Young Children (TXAEYC) used approximately six months to plan their Alliance (including selecting the services they will offer and recruiting members) and approximately 18 months to implement their Alliance. The grantees are using the full grant period to create a sustainability plan. Each grantee is providing a different portfolio of services to different provider populations and geographic regions. The grantees offer various services,

including accounting support, marketing support, legal support, digital literacy support, human resources support, health benefits, and child care case management software.

TWC awarded approximately \$400,000 to Social and Environmental Entrepreneurs' Opportunities Exchange project (OppEx) to provide ongoing guidance and support to the SSA grantees. The goal of this initiative is for SSA to become self-sustaining, as the programs realize savings through the shared services model. One of the grantees, TXAEYC, is piloting access to health insurance. TWC plans to offer funding for one additional year to the SSA and TA grantees. This initiative focuses on quality improvement.

- b. Check the topics addressed in the Lead Agency's strategies for strengthening child care providers' administrative business practices. Check all that apply:
- i. ☒ Fiscal management.
  - ii. ☒ Budgeting.
  - iii. ☒ Recordkeeping.
  - iv. ☒ Hiring, developing, and retaining qualified staff.
  - v. ☒ Risk management.
  - vi. ☒ Community relationships.
  - vii. ☒ Marketing and public relations.
  - viii. ☒ Parent-provider communications.
  - ix. ☒ Use of technology in business administration.
  - x. ☒ Compliance with employment and labor laws.
  - xi. ☐ Other. Describe any other efforts to strengthen providers' administrative business:

### 6.1.3 Strategies to support provider participation

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

- a. Providers and staff with limited English proficiency: **Outreach (conferences, trainings, and professional development) is available as necessary to providers for whom English is not their first language. TWC requires Boards to provide translation and interpretation services to workforce customers. TWC and the Boards also provide informational materials to providers in Spanish and Vietnamese. Critical documents that are not available in Spanish include a Babel notice to inform customers how to access translation services. Boards with high concentrations of Spanish speakers also regularly provide Spanish-language options for providers who primarily speak Spanish. WD Letter 01-24, issued January 3, 2024, and titled Child Care Professional Development and Resources in Spanish requires Boards to ensure that professional development materials are available in Spanish.**
- b. Providers and staff who have disabilities: **TWC's TA Bulletin 287, issued January 17, 2018,**

and titled Training, Assistive Technology, and Accessibility provides Boards with guidance on serving individuals with disabilities. The guidance includes information about assistive technologies, people-first language, and TA resources. All resources that TWC provides online undergo an extensive review to ensure that they are accessible for individuals who are visually impaired.

## 6.2 Professional Development Framework

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

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

### 6.2.1 Updates and consultation

- a. Did the Lead Agency make any updates to the professional development framework since the FFY 2022-2024 CCDF Plan was submitted?

☒ Yes. If yes, describe the elements of the framework that were updated and describe if and how the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body was consulted: **Texas Early Childhood Professional Development System (TECPDS) updated both the Texas Early Child Education Career Pathways and the Texas Core Competencies. The updated Texas Early Childhood Education Career Pathways support those who identify as Practitioners (those serving as classroom teachers or assistants), Administrators (those serving as multi-site leaders or directors), Trainers (those who provide professional development services) and Coaches (those serving in mentoring roles). Additionally, there are three core competency documents for early childhood education professionals: Texas Core Competencies for Early Childhood Practitioners and Administrators, Texas Core Competencies for Trainers, and Texas Core Competencies for Coaches and Mentors.**

☐ No.

- b. Did the Lead Agency consult with other key groups in the development of their professional development framework?

☒ Yes. If yes, identify the other key groups: **TECPDS involved the TECPDS Advisory Committee, which is comprised of Board members, institutes of higher education, state agencies, advocacy groups, early childhood education trainers and consultants, and other early childhood organizations.**

☐ No.

### 6.2.2 Description of the professional development framework

- a. Describe how the Lead Agency's framework for training and professional development addresses the following required elements:

- i. Professional standards and competencies. For example, Lead Agencies can include information about which roles in early childhood education are included (such as teachers, directors, infant and toddler specialists, mental health consultants, coaches, licensors, QIS assessors, family service workers, home visitors). **TECPDS provides a framework for training and professional development in the state. The four components of TECPDS are as follows:**

**Core Competencies;  
Texas Trainer Registry (TTR);  
Texas Workforce Registry (TWR); and  
Early Childhood Career Pathways.**

**The Texas Core Competencies for Early Childhood Practitioners and Administrators define observable skills that, when achieved, demonstrate competency in the concepts, practices, and knowledge that early childhood practitioners and administrators must have to effectively facilitate children's growth and development.**

**Core competencies for practitioners are as follows:**

**Child growth and development;  
Responsive interactions and guidance;  
Learning environments, planning framework, curriculum, and standards;  
Supporting skills development;  
Observation and assessment;  
Diversity and dual-language learners;  
Families and community relationships;  
Health, safety, and nutrition; and  
Professionalism and ethics.**

**Levels of practice are as follows:**

**Beginning practitioners support early learning and development through adherence to program and regulatory policies;  
Intermediate practitioners support early learning and development by increasing independence and effectiveness; and  
Advanced practitioners support early learning and development through leadership in the development of program policy and practice and through their ability to enhance the knowledge and skills of others in the profession.**

**Core competencies for administrators are the following:**

**Establishing and maintaining an effective organization;  
Business and operations management;  
Human resource leadership and development;  
Maintaining a healthy and safe environment;  
Implementing developmentally appropriate curriculum and environment; and  
Instituting family and community-centered programming.**

Levels of practice are as follows:

Beginning administrators lead and support the program by adhering to laws governed by the state and program policies;

Intermediate administrators lead and support the program with increasing independence and effectiveness; and

Advanced administrators lead and support the program by providing strong leadership and high-quality program components that promote the well-being of children and families.

Texas Core Competencies for Practitioners and Administrators Training is designed for use by early childhood professionals to improve the quality of care and education that young children receive. The content and structure of the competencies are a framework for assessing knowledge and skills, guiding training and professional development opportunities, and monitoring progress.

- ii. Career pathways. For example, Lead Agencies can include information about professional development registries, career ladders, and levels. **The Texas Early Childhood Education Career Pathways is a tool within the TECPDS that allows early childhood professionals to relate training hours, education, work experience, and other factors to a position on the career pathway. Based on the level of education, and core competency training, that practitioners have achieved, they are designated as Level 1-6 on the practitioner Career Pathway.**

TWC and TEA created a document to support Local Education Agencies (LEAs) with Career and Technical Education (CTE) Early Learning programs of study help high school students earn a CDA® Credential before graduation. The document also includes information teachers and administrators can share with students on steps they can take into the early childhood field. The document is posted on the TEA website.

- iii. Advisory structure. For example, Lead Agencies can include information about how the professional development advisory structure interacts with the State Advisory Council on Early Childhood Education and Care. **Texas has a TECPDS Advisory Council, whose members include representatives from University of Health Science Center at Houston's Children's Learning Institute (CLI), TWC, TEA, Texas Head Start State Collaboration Office (THSSCO), CCR, and TXAEYC. The TECPDS Advisory Council members have diverse experience in the Texas early childhood sectors and provide guidance and support to TECPDS. CLI, who oversees and manages TECPDS, also serves on the state's TELC, and provides periodic updates to the Council on TECPDS. TWC, in collaboration with CLI, is exploring opportunities to continue to improve TECPDS services and solicit feedback from stakeholders.**
- iv. Articulation. For example, Lead Agencies can include information about articulation agreements, and collaborative agreements that support progress in degree acquisition. **The TELC developed and published the Higher Education Articulation Agreements Toolkit, which was updated in 2017. The project:**



Collected and reviewed data on articulation agreements;  
Analyzed data and developed recommendations on articulation agreements; and  
Created a higher education articulation agreement toolkit for communities.

Many Boards have formed partnerships with local community colleges to implement articulation agreements to move training participants from the CDA® Credential into associate and bachelor's degree programs.

With PDG B-5 funding, TWC is working with a vendor to hold sessions with institutions of higher education (IHEs) and local education agencies (LEAs) to explore different credit pathways they can create or improve to support the education of the child care workforce. TWC will provide public IHEs with funding to develop clear pathways for early childhood professionals that align the CDA® Credential, associate degrees, bachelor's degrees, or teacher certification options.

- v. Workforce information. For example, Lead Agencies can include information about workforce demographics, educator well-being, retention/turnover surveys, actual wage scales, and/or access to benefits. **The Child Care Workforce Strategic Plan included a director's survey for data collection specific to workforce demographics, retention, wage scales and benefits.**

The survey results show that, in Texas, women comprise the vast majority (96 percent) of early childhood educators in Texas. At child care centers, most educators are Hispanic (43 percent), followed by White (30 percent) and Black (19 percent) educators. Compared to child care centers, more home-based educators (those who do not own the child care business) are Black (28 percent) and fewer are Hispanic (35 percent); a similar proportion are White (29 percent). Among home-based child care owners, fewer are Hispanic (23 percent), and more are White (43 percent), with a similar percentage of Black owners as educators (27 percent).

The survey also looked at job experience. Almost half (46 percent) of home-based owners have 21 or more years of experience in early childhood, and less than five percent have five or fewer years of experience. Experience among center-based and home-based educators varies widely. More than half of the early childhood educator workforce has less than six years of experience, and one-quarter has six to 15 years of experience. Fourteen percent of early childhood educators have 16 or more years of experience.

According to the Director's Survey, most early childhood educators in Texas have no degree or certification beyond high school (58 percent). Child care business owners are typically high school educated (39 percent) or have a CDA or associate degree (39 percent). Overall, only 17 percent of the Texas ECE workforce holds a bachelor's degree or higher, including 22 percent of owners, 17 percent of home-based educators, and 14 percent of center-based educators. Approximately 17 percent, of all early childhood educators and owners attended some college but have not completed a degree. Similarly, 15 percent of the total early childhood

education workforce have completed a CDA or similar credential that directly aligns with evidence-based competencies for early childhood educators.

Patterns in center-based and home-based educator compensation show small increases with more educational attainment and years of experience.

According to the Director Survey, the median wage of an early childhood educator in Texas is \$12.00 per hour or \$24,000 a year, which is the equivalent of 52 percent of the SMI for a single individual and 40 percent of SMI for a family of two. In Texas' ECE workforce, an early childhood educator's compensation differs based on characteristics of the child care provider for which they work, as well the characteristics of the individual educator. Educators who work for a child care provider located in an urban-metropolitan county earn \$2.50 (25 percent) more an hour than educators who work in rural counties. Educators who work for child care provider that employs more than 10 educators earn \$2.00 (18 percent) more an hour than educators who work for child care providers that employ 10 or fewer educators. And in Texas, educators who work for child care providers that do not accept CCS earn \$1.00 (8 percent) more an hour than educators who work for child care providers that do.

Of the 431 directors surveyed, approximately 31 percent of center-based directors had access to health, dental and vision insurance, compared to six percent of home-based directs having access to health insurance and even fewer (3.5 percent) with access to dental and vision insurance. All directors surveyed were more likely to have paid vacation/holiday time (center-based 82.2 percent, home-based 43.4 percent) and paid sick leave (center-based 56.6 percent, home-based 25.8 percent). Only 2.7 percent of home-based directors had a retirement account, compared to 28.4 percent of center-based directors.

TWR is a web-based application that early childhood professionals may use to store and access their education and employment history, as well as the professional development hours that they have completed. Professionals with an account on TWR may also access the new Find My Career Lattice tool on TECPDS. As of January 2024, 115,263 practitioners had registered in TWR. Effective October 2021, at least one Texas Rising Star program administrator from each participating program is required to join TWR.

In 2024, TWC invested in a Usability Study for the TWR. The recommendations from the study support more efficiency in TWR usage, thus leading to better data and user experience.

TTR is a statewide system that approves early childhood trainers and their trainings. Trainers listed on TTR have undergone an approval process defined by qualifications that include early childhood expertise and experience, as well as knowledge of adult learning theories and principles. The training approval process is linked to core competencies, principles of adult learning, and other standards, such as early learning guidelines. As of January 2024, 753 trainers had registered in TTR.

In 2020 TWC began to require new statewide grantees providing CCDF-funded professional development activities to utilize TECPDS. This data collection will help TWC, Boards, and the grantees to better understand the reach and impact of these activities.

- vi. Financing. For example, Lead Agencies can include information about strategies including scholarships, apprenticeships, wage enhancements, etc. TECPDS is currently jointly financed with funds from TWC, TEA, THSSCO, and additional smaller partners such as TXAEYC's. In 2019- 2020, TWC also directed \$800,000 to CLI for statewide training and implementation activities to bring all Board areas and all Texas Rising Star programs on to TWR. In 2022-2023, TWC funded \$946,005 for continued work. In 2023, TWC directed an additional \$950,000.

TWC uses CCDF quality funds for a variety of professional development activities that align with statewide system goals. For example, TWC funds the Texas Early Childhood Professional Development Scholarship program, which offers financial assistance to help child care providers and educators earn a CDA® Credential™ or enroll in college credit courses to obtain an associate or bachelor's degree. It also includes the ECEA scholarship. This model will support ECEAs with on-the-job training, tuition, or course fees for students enrolled in a RAP. The program assists educators in achieving progressive educational and career advancement by helping them attain stackable credentials in early childhood development and education. Additionally, the program assists child care providers in retaining well-qualified staff and meeting Texas Rising Star staff qualifications.

Each year Boards must use at least four percent of their annual CCDF allocation for quality activities, and many fund professional development opportunities that leverage the state's framework through grants, contracts, and direct services. TWC publishes the Child Care Quality Strategic Planning and Expenditures Guide which includes information on using child care quality improvement funding for scholarships, apprenticeships, and wage supplementation including recruitment/retention bonuses.

TWC partners with TEA and other stakeholders in leveraging statewide resources to achieve professional development system goals. Boards have the option to partner with local independent school districts, regional education service centers, community colleges, and universities to jointly design professional development programs for practitioners.

In 2022, TWC awarded three planning grants for entities to expand existing or create new RAPs that helped early childhood educators earn a minimum of a CDA® Credential but could lead to associate or bachelor's degrees. Each grantee was required to register their RAP with the U.S. DOL before the end of the grant period. In 2023, TWC awarded six grants for entities to plan and/or implement RAPs with the same requirements of getting apprentices to a minimum of a CDA® Credential, including the original three grantees. TWC is planning to fund more planning and implementation grants that will start in 2025.

b. Does the Lead Agency use additional elements?

☒ Yes.

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

i. ☒ Continuing education unit trainings and credit-bearing professional development. Describe: **TWC and Boards offer continuing education units through conference sessions and other professional development opportunities.**

**Approximately 20 Boards offer scholarships to providers and educators to assist them in receiving CDA® Credentials or completing early education courses. Boards also deliver CDA training modules directly to educators and directors.**

ii. ☒ Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the Lead Agency's framework. Describe: **Boards are encouraged to work with local education and training providers to align professional development opportunities with Texas' framework. The TTR requires that trainers demonstrate how their offerings align to the core competencies for practitioners and/or administrators.**

iii. ☐ Other. Describe:

☐ No.

### 6.2.3 Impact of the Professional Development Framework

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

a. Professional standards and competencies. For example, do the professional standards and competencies reflect the diversity of providers across role, child care setting, or age of children served? **The Texas Core Competencies are individualized for four different roles in the early education profession: teacher, administrators, trainers, and coaches/mentors. For teachers and administrators, there are three levels of practice: beginner, intermediate, and advanced. For coaches and mentors, coaching skills are defined at three levels: foundational, supportive, and change-oriented.**

b. Career pathways. For example, has the Lead Agency developed a wage ladder that provides progressively higher wages as early educators gain more experience and credentials? What types of child care settings and staff roles are addressed in career pathways, such as licensed centers and family child care homes? **TWC and TEA created a document to support LEAs with CTE Early Learning programs of study that help high school students earn a CDA® Credential before graduation. The document also includes information that teachers and administrators can share with students on steps they can take upon entering the early childhood field. The document is posted to the TEA website. The practitioner career pathway is designed for those serving in roles that directly support young children in early childhood education classrooms. Typically identified as classroom teachers, assistants, or paraprofessionals, these individuals provide direct care and instruction to children ages 0 to 8.**

**Available in 2024, the administrator pathway is uniquely designed for those who serve in a role as directors, multi-site leaders, or other administrative personnel. This pathway is**

currently being developed to meet the needs of state licensing requirements and professional best practices when it comes to leading a team of early childhood educators.

The TTR offers an advancement pathway for those who specialize in delivering training to early childhood education professionals. Trainers may have a specific expertise in a specialized area such as literacy development, social emotional behaviors, or more. This pathway is currently being developed to allow those who deliver professional development to see how they can advance their own training skills and certificates.

The coach pathway is designed for early childhood specialists who serve as coaches or mentors to provide direct support to teachers, assistants, and administrators who support children. This pathway is currently being developed to allow coaches to advance in their practice as it will consider factors such as their number of years of experience, their education, and the number of competencies they have demonstrated.

- c. Advisory structure. For example, has the advisory structure identified goals for child care workforce compensation, including types of staff and target compensation levels? Does the Lead Agency have a Preschool Development Birth-to-Five grant and is part of its scope of work child care compensation activities? Are they represented in the advisory structure? In 2023, the ECIA Workgroup partnered with the TELC to update the Texas Early Learning Strategic Plan. Through PDG B-5 funding, TWC contracted with the Texas Institute for Child & Family Wellbeing at The Steve Hicks School of Social Work at The University of Texas at Austin to facilitate the process. One of the goals set through the process is that the early learning workforce is well-paid, trained and supported; can reach and obtain the professional development resources they need throughout their careers; and is large enough to meet Texans' needs.

To reach this goal, the TELC and ECIA developed four strategies and 24 actions to be taken with the plan period of 2024 to 2026.

**Strategy 2.1: Increase financial support of the early learning workforce, which includes taking the following actions to support child care educators:**

TWC will continue to fund scholarships and RAPs to cover the cost of CDA, associates, and bachelors' credentials or degrees;

TELC will develop and publish messaging that elevates the importance of the early learning workers as important members of the workforce and business owners who drive the Texas economy; and

TELC will explore forming public/private partnerships to support the workforce, including support for the workforce, through philanthropy and corporate support.

- d. Articulation. For example, how does the advisory structure include training and professional development for providers, including higher education, to assist in aligning training and education opportunities? The Texas Early Learning Strategic Plan, developed with the state's advisor council, TELC, contains strategies to support the child care workforce. One of the goals is that the early learning workforce is well-paid, trained and supported; can reach and obtain the professional development resources they need throughout their careers; and is large enough to meet Texans' needs.

To reach this goal, the TELC and ECIA developed four strategies and 24 actions to be taken with the plan period of 2024-2026. The two strategies and applicable actions to align training and education opportunities are as follows:

**Strategy 2.3: Expand the number of people entering the early learning workforce.**

TWC and TEA will connect high schools throughout the state to child care providers and offer work-based learning opportunities to students;

TWC will conduct and publish a landscape analysis of Institutions of Higher Education IHEs offering early childhood degrees and LEAs offering Early Learning CTE programs of study; and

TWC will publish guidance resulting from work sessions with IHEs on credit transfer.

**Strategy 2.4: Retain early learning workforce professionals in the field by providing educational and social support as follows:**

CLI will continue to improve the TECPDS system based on usability study findings;

TELC will provide support for workforce preparedness and skill by promoting:

Existing early learning competencies and skill sets (e.g., Texas Core Competencies for Early Childhood, Texas Home Visiting Core Competencies);

Existing everyday leadership and supportive supervision resources to early learning workforce managers and supervisors by current training, coursework, and opportunities (e.g., McCormick Early Childhood Leadership modules available at Texas colleges and universities);

TELC will identify and promote current training and coursework that provide professional development around behavioral problems, mental health, parent engagement, and inclusivity, leveraging existing inventories;

TWC and TEA will offer trainings for early learning professionals to address challenging behaviors, children with special health care needs, and child development and brain development;

TELC will publish, promote, and maintain a list of all statewide early learning conferences and events for providers;

TELC will leverage current peer-to-peer mentoring programs (such as ECI PEER Network, Texas Infant-Toddler Specialist Network) to expand peer mentoring opportunities for the early learning workforce; and

LEAs will explore networking with local child care providers to assess professional learning needs within their communities and provide professional learning opportunities for child care providers to attend, targeting those needs.

- e. Workforce information. For example, does the Lead Agency have data on the existing wages and benefits available to the child care workforce? Do any partners such as the Quality Improvement System, child care resource and referral agencies, Bureau of Labor Statistics, and universities and research organizations collect compensation and benefits data? Does the Lead Agency monitor child care workforce wages and access to benefits through ongoing data collection and evaluation? Can the data identify any disparities in the existing compensation and benefits (by geography, role, child care setting, race, ethnicity, gender, or age of children served)? **TWC publishes median, mean, entry, and experienced wages for all major industries and occupations, including child care. TWC**

publishes these data annually by Workforce Development Area and Metropolitan Statistical Area.

The Child Care Workforce Strategic Plan included a director's survey for data collection specific to workforce wage scales and benefits.

According to the Director's Survey, most early childhood educators in Texas have no degree or certification beyond high school (58 percent). Child care business owners are typically high school educated (39 percent) or have a CDA or associate degree (39 percent). Overall, only 17 percent of the Texas ECE workforce holds a bachelor's degree or higher, including 22 percent of owners, 17 percent of home-based educators, and 14 percent of center-based educators. Approximately 17 percent, of all early childhood educators and owners attended some college but have not completed a degree. Similarly, 15 percent of the total ECE workforce have completed a CDA or similar credential that directly aligns with evidence-based competencies for early childhood educators.

The survey also looked at job experience. Almost half (46%) of home-based owners have 21 or more years of experience in early childhood, and less than five percent have five or fewer years of experience. Experience among center-based and home-based educators varies widely. More than half of the early childhood educator workforce has less than six years of experience, and one-quarter has six to 15 years of experience. Fourteen percent of early childhood educators have 16 or more years of experience.

Patterns in center-based and home-based educator compensation show small increases with more educational attainment and years of experience.

According to the Director Survey, the median wage of an early childhood educator in Texas is \$12.00 per hour or \$24,000 a year, which is the equivalent of 52 percent of the SMI for a single individual and 40 percent of SMI for a family of two. In Texas' early childhood education workforce, an early childhood educator's compensation differs based on characteristics of the child care provider for which they work, as well the characteristics of the individual educator. Educators who work for a child care provider located in an urban-metropolitan county earn \$2.50 (25 percent) more an hour than educators who work in rural counties. Educators who work for child care provider that employs more than 10 educators earn \$2.00 (18 percent) more an hour than educators who work for child care providers that employ 10 or fewer educators. And in Texas, educators who work for child care providers that do not accept CCS earn \$1.00 (8 percent) more an hour than educators who work for child care providers that do.

Of the 431 directors surveyed, approximately 31 percent of center-based directors had access to health, dental and vision insurance, compared to six percent of home-based directs having access to health insurance and even fewer (3.5 percent) with access to dental and vision insurance. All directors surveyed were more likely to have paid vacation/holiday time (center-based 82.2 percent, home-based 43.4 percent) and paid sick leave (center-based 56.6 percent, home-based 25.8 percent). Only 2.7 percent of home-based directors had a retirement account, compared to 28.4 percent of center-based directors.

- f. Financing. For example, has the Lead Agency set a minimum or living wage as a floor for all child care staff? Do Lead Agency-provider subsidy agreements contain requirements for staff compensation levels? Do Lead Agencies provide program-level compensation grants to support staff base salaries and benefits? Does the Lead Agency administer bonuses or stipends directly to workers? **TWC does not set minimum wage requirements for private businesses outside of the state minimum wage. TWC allows Boards to provide child care program-level wage supports or stipends directly to staff. Currently, 13 Boards (as listed in 6.1.2) are administering some type of local wage supplement program for Texas Rising Star-certified providers.**

## 6.3 Ongoing Training and Professional Development

### 6.3.1 Required hours of ongoing training

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

- a. Licensed child care centers: **30 clock hours of annual training for directors; 24 clock hours of annual training for caregivers.**
- b. License-exempt child care centers: **N/A**
- c. Licensed family child care homes: **30 clock hours of annual training for primary caregivers; 24 clock hours of annual training for substitute/assistant caregivers in LCCH who are counted in ratio on more than ten separate occasions in one training year; and 15 clock hours of annual training for substitute/assistant caregivers in a RCCH who are counted in ratio on more than 10 separate occasions in one training year.**
- d. License-exempt family child care homes: **N/A**
- e. Regulated or registered in-home child care: **N/A**
- f. Non-regulated or registered in-home child care: **N/A**

### 6.3.2 Accessibility of professional development for Tribal organizations

Describe how the Lead Agency's training and professional development are accessible to providers supported through Indian tribes or Tribal organizations receiving CCDF funds (as applicable). **The Early Learning Guidelines, Professional Development Core Competencies, and the TECPDS Trainer and Workforce Registries, as well as the TEA training on the Pre-K guidelines, are available online to tribes and tribal organizations. The three Board areas with tribal organizations coordinate directly to communicate about relevant and appropriate activities including professional development activities.**

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

Describe how the Lead Agency's training and professional development requirements reflect the diversity of children, families, and child care providers participating in CCDF. To the extent practicable, how does professional development include specialized training or credentials for providers who care for infants or school-age children; individuals with limited English proficiency; children who are bilingual; children with developmental delays or disabilities; and/or Native



Americans, including Indians, as the term is defined in Section 900.6 in subpart B of the Indian Self-Determination and Education Assistance Act (including Alaska Natives) and Native Hawaiians? The infant/toddler and Pre-K guidelines address special needs, English language learners, and cultural diversity.

The infant/toddler guidelines define and discuss inclusive practices, including why the practices are important and ways to learn and assist with inclusive practices. The guidelines also offer resources for teachers and early learning programs. The infant/toddler guidelines address culturally appropriate practices. These include communicating with families to understand home life and traditions, recognizing children's home language, and honoring diversity and awareness as a concept and core value of society.

The Pre-K guidelines address English language learners' diverse needs, including recommendations for instruction and strategies for success. The guidelines also address issues regarding children with disabilities, how those children can be fully integrated into school and life, and what opportunities those children need to be successful. The guidelines discuss preparation and examples of strategies to implement in a classroom. The Texas Core Competencies reference diversity, dual-language learners, and family and community relationships.

Core Competency Area 6, Diversity and Dual Language Learners, addresses the following core concepts:

Children's cultural identity is developed within the family and community setting;  
Programs should work to maintain a child's cognitive, linguistic, and emotional connection to the home culture and language;  
Children can learn more than one language at the same time; and  
Children's language and literacy skills in their home language will transfer and support learning of a second language.

Core competency Area 7, Family and Community Relationships, addresses the following core concepts:

Families are the primary influence on a child's development;  
Family context and situations vary greatly in terms of living arrangements, goals and values, ethnicity, and culture;  
Programs and practitioners are better able to support children's development when they provide experiences and set expectations that are aligned with those of the family;  
Practitioners communicate frequently and positively with parents to ensure that parents are informed about their children's needs and interests while in care, collaborate and problem-solve when children are met with challenges, follow up on parent requests and joint decisions, and provide resources and referrals to appropriate aids and services;  
Early childhood programs and practitioners must be responsive to the unique contexts and situations created by interdependencies between family systems, social institutions, and communities; and  
Forming collaborative partnerships with community organizations, childhood advocates, businesses, and families increases the capacity of the program.

CCR minimum standards for caregivers provide the option of obtaining remaining training hours in

cultural diversity for children and families and care of children with special needs.

For caregivers providing care for children under 24 months of age, one hour of caregivers' annual training must cover the following topics:

Recognizing and preventing shaken baby syndrome and abusive head trauma;  
Understanding and using safe sleep practices and preventing SIDS;  
Understanding early childhood brain development; and  
TWC is funding the Texas Infant/Toddler Specialist Network through CLI, as discussed in Section 7.4.

#### 6.3.4 Child developmental screening

Describe how all providers receive, through training and professional development, information about: (1) existing resources and services the State/Territory can make available in conducting developmental screenings and providing referrals to services when appropriate for children who receive assistance under this part, including the coordinated use of the Early and Periodic Screening, Diagnosis, and Treatment program (42 U.S.C. 1396 et seq.) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and (2) how child care providers may utilize these resources and services to obtain developmental screenings for children who receive assistance and who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays: **As required by CCS rule §809.15 and described in Section D-1004.a of the CCS Guide, Boards are required to ensure that parents qualifying for a subsidy receive information on developmental screenings as part of the intake process. Boards have the flexibility to choose methods for disseminating developmental screening information to parents and child care providers, including providing information through Board websites and providing a link to the Early Childhood Texas Developmental Screenings.**

TWC/Texas provides child care providers with numerous resources, to include professional development opportunities through various initiatives:

The Texas Infant/Toddler Specialist Network through CLI, as discussed in Section 7.4, provides training and resources on supporting infant and toddler teachers and administrators of providers serving infants and toddlers on the use of developmental screenings;  
CLI Engage offers free online training related to developmental screening, as well as access to a free child progress monitoring tool;  
AgriLife Online Child Care Training provides numerous online child care training courses focused on child development;  
HHSC ECI provides training on developmental learning strategies, early brain development, and on screening for developmental delays;  
HHSC CCR Minimum Standards requires all child care provider staff to be trained on the developmental stages of children and understanding early brain development and must receive additional training hours annually in topics that include child growth and development, caring for children with special needs, and observation and assessment.

## 6.4 Early Learning and Developmental Guidelines

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

#### 6.4.1 Early learning and developmental guidelines

- a. Check the boxes below to certify the Lead Agency's early learning and developmental guidelines are:
  - i. ☒ Research-based.
  - ii. ☒ Developmentally appropriate.
  - iii. ☒ Culturally and linguistically appropriate.
  - iv. ☒ Aligned with kindergarten entry.
  - v. ☒ Appropriate for all children from birth to kindergarten entry.
  - vi. ☒ Implemented in consultation with the educational agency and the State Advisory Council on Early Childhood Education and Care or similar coordinating body.
  - vii. If any components above are not checked, describe:
- b. Check the boxes below to certify that the required domains are included in the Lead Agency's early learning and developmental guidelines.
  - i. ☒ Cognition, including language arts and mathematics.
  - ii. ☒ Social development.
  - iii. ☒ Emotional development.
  - iv. ☒ Physical development.
  - v. ☒ Approaches toward learning.
  - vi. ☒ Other optional domains. Describe any optional domains: **The Pre-K guidelines also include the following:**  
  
**Fine Arts domain: Art skills, Music skills, Dramatic Expression skills; and Technology Applications domain: Technology and Devices skills.**
  - vii. If any components above are not checked, describe:
- c. When were the Lead Agency's early learning and developmental guidelines most recently updated and for what reason? **Infant, Toddler, and Three-Year-Old Early Learning Guidelines (Little Texans, Big Futures) were published in 2013 CLI reviews the infant and toddler guidelines on an ongoing basis through research and projects that support quality infant and toddler care. Additionally, the state interagency team for early education and child care can make recommendations to TWC and CLI regarding revisions.**

The Pre-K guidelines were first released in 2008, and a major revision was published in 2022. TEA monitors the relevance of these guidelines and works with stakeholders to make revisions as appropriate.

- d. Provide the Web link to the Lead Agency's early learning and developmental guidelines. **Infant, Toddler, and Three-Year-Old Early Learning Guidelines (Little Texans, Big Futures):** <http://www.littletexans.org/>

**Texas Pre-K Guidelines:** <https://tea.texas.gov/academics/early-childhood-education/texas-prekindergarten-guidelines>

#### 6.4.2 Use of early learning and developmental guidelines

- a. Describe how the Lead Agency uses its early learning and developmental guidelines. **The Core Competencies for early childhood practitioners were designed in alignment with the state's early learning guidelines (Little Texans, Big Futures and Texas Pre-kindergarten Guidelines) to ensure a strong connection between goals for practitioners and what children need to know, understand, and be able to do.**

CLI hosts online trainings that support developing and implementing curriculum and learning activities based on the early learning guidelines and the related core competencies for practitioners.

Providers are made aware of the free, online training through outreach activities conducted by CLI, TWC, and Boards, including conferences such as the Texas Rising Star Early Educator Conference and the Texas School Ready Summer Institute. Boards also promote the online training through TA and mentoring services to providers, including providers working to become Texas Rising Star certified.

Texas Rising Star curriculum and teacher-child interaction measures are linked to the early learning guidelines and at minimum, the child care director must complete training on the early learning guidelines applicable to the ages the child care program serves prior to being Texas Rising Star certified. Texas Rising Star mentors provide technical assistance and guidance to providers on Texas Rising Star measures related to the early learning guidelines.

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

## 7 Quality Improvement Activities

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

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

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

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

### 7.1 Quality Activities Needs Assessment

#### 7.1.1 Needs assessment process and findings

- a. Describe the Lead Agency needs assessment process for expending CCDF funds on activities to improve the quality of child care, including the frequency of assessment, how a diverse range of parents and providers were consulted, and how their views are incorporated: **Local Quality Activities and Needs Assessments**  
**Four percent of Boards’ annual CCDF allocation is set aside for local activities that improve the quality of child care. To support Boards in their use of these funds, TWC issued the Child Care Quality Strategic Planning & Expenditures Guide. The guide helps Boards plan, execute, evaluate, and report on activities that are both allowable and impactful and to provide a framework and support for strategic, data-driven decision-making and program design. To support their design of local quality improvement activities, many Boards conduct local needs assessments. The scope and frequency of these assessments vary by Board area.**

**Boards are required to submit an annual plan as well as quarterly reports to TWC for their quality activities, and TWC in turn publishes this information regularly on its website. CC&EL staff regularly assesses local quality activities and collaborates with Boards to understand the needs they seek to address with their child care quality funds.**

### Statewide Survey and Stakeholder Meetings

TWC conducted a statewide survey and stakeholder input meetings during the State Plan development. TWC's 2025-2027 CCDF State Plan Stakeholder Survey was available via Survey Monkey from January 15, 2024, to February 12, 2024 in English and Spanish. The survey was posted to the TWC website and widely distributed to child care providers, parents, Boards, advocacy groups, community organizations, and employers. TWC received 5,481 responses from the following:

2,750 child care providers;  
2,193 parents;  
115 Board staff members;  
288 Early childhood care and education stakeholders; and  
135 Employers.

TWC analyzed survey results and used the data and comments to inform the development of the CCDF State Plan and quality improvement for the CCS program.

### Texas Rising Star Stakeholder Input

State statute (Government Code §2308.3155) requires that TWC conduct a regular review of the Texas Rising Star program standards. Pursuant to CCS rule §809.130(e), TWC must conduct a review of the Texas Rising Star Guidelines every four years and the review must consider input from stakeholders and must include at least one public hearing. During the four-year review, TWC convenes a workgroup comprised of child care providers, Board representatives, state agency staff, and other child care stakeholders.

The most recent four-year review began in July 2023. The workgroup met regularly for several months to develop a set of recommendations. TWC presented the workgroup's recommendations during the stakeholder meetings held in February 2024 (as described above), soliciting the public's input on the recommendations. TWC will consider this input in the development of the final proposed rule amendments, and in the updates to the Texas Rising Star Guidelines. The public will also have an additional opportunity to comment on the draft revisions to the guidelines and the proposed rule amendments arising from the recommendations.

TWC has the following goals for high-quality, subsidized child care in Texas:

Improve child care services by assisting child care providers in achieving quality standards such as Texas Rising Star certification and national accreditation Increase access to quality child care for families by increasing the number of Texas Rising Star-certified and nationally accredited facilities; and  
Improve the quality of teacher-child interactions and learning environments by increasing professional development opportunities for child care and Pre-K teachers who work in early childhood education.

Each month, TWC tracks the number and percent of the following for each level of Texas Rising Star:

Subsidized providers participating in Texas Rising Star;  
Subsidized children in Texas Rising Star-certified provider care;  
Texas Rising Star providers as a share of regulated providers; and  
Texas Rising Star providers by provider type (center-based, registered home, and licensed home).

This and other data can be found at the Child Care by the Numbers webpage at [https://ccbn.twc.texas.gov/childcarenumbers/Texas\\_Statewide\\_System\\_monthly.html](https://ccbn.twc.texas.gov/childcarenumbers/Texas_Statewide_System_monthly.html).

#### Statewide Early Childhood System Needs Assessment and Strategic Plan

As part of the PDG B-5 Renewal Grant, TWC contracted with University of Texas Health Science Center at Houston School of Public Health to conduct the 2023 Early Childhood System Needs Assessment in Texas. This builds upon the 2019 needs assessment conducted by the TELC. For the 2023 needs assessment, University of Texas Health Science Center at Houston consulted with state agencies (TWC, TEA, HHSC, DFPS and DSHS) and surveyed early childhood care and education providers and parents.

The results of this needs assessment, along with additional input from the TELC members, parents, and early childhood care and education providers, fed into the Texas Early Learning Strategic Plan 2024-2026. The Texas early learning system, including state agencies and organizations supporting young children, set the following four goals to meet its vision that every young child in Texas has the resources to build resiliency, adaptability, and autonomy to succeed:

Goal 1: Families can easily meet their basic needs and access the early learning services, programs, and resources they need, and are meaningfully engaged to provide feedback on services.

Goal 2: The early learning workforce is well paid, trained and supported; can reach and obtain the professional development resources they need throughout their careers; and is large enough to meet Texans' needs.

Goal 3: Local early learning systems are well-coordinated, appropriately resourced, and successfully support the children and families in their communities.

Goal 4: State early learning system entities are collaborating to make family and data informed decisions to improve services, programs and resources for children and their families.

- b. Describe the findings of the assessment, including any findings related to needs of different populations and types of providers, and if any overarching goals for quality improvement were identified: **Statewide Survey and Stakeholder Meetings: Findings Through the 2025-2027 CCDF State Plan Stakeholder Survey** and public stakeholder meetings TWC held, parents and early childhood programs across the state expressed their interest in TWC's policies and programs regarding:

Texas Rising Star;  
PKPs;  
Child Care for Children with Disabilities or Special Needs;  
Statewide FCCN;  
Capacity Expansion;

Employer Child Care Solutions;  
Business Coaching;  
Family Engagement; and  
Work-Based Learning Initiatives.

TWC will use this data to inform policy development and investments in quality improvement activities.

**Texas Rising Star Stakeholder Input: Findings**

Stakeholder-driven program revisions were presented to the Commission in April 2024 and are expected to be implemented effective September 1, 2024.

Some proposed revisions are as follows:

Revising the Initial and Certified Screening Form for consistency and reducing of barriers to certification;

Removing duplicative measures that are captured within CCR or other Texas Rising Star measures;

Revising measures to support consistency in scoring and provide scoring clarification;

Revising facility change protocols for certified programs to minimize financial impacts; and

Adding new measures to focus on high quality child progress monitoring and workforce registry participation.

The next four-year review will be slated for Summer of 2027.

**Statewide Early Childhood System Needs Assessment: Findings**

The Texas Early Learning Strategic Plan 2024-2026, informed by the 2023 Early Childhood System Needs Assessment in Texas, sets four goals to meet its vision that every young child in Texas has the resources to build resiliency, adaptability, and autonomy to succeed. Each goal includes strategies, actions, and measures of success. Below are selected actions and measures that pertain to improving the accessibility and quality of child care.

**Goal 1:** Families can easily meet their basic needs and access the early learning services, programs, and resources they need, and are meaningfully engaged to provide feedback on services.

**Action 1.1.1** TEA, THSSCO, and TWC will simplify application practices by launching a common eligibility screener.

**Measure:** Common eligibility screener is published.

**Action 1.2.5** TWC will continue funding Child Care Navigators at HHSC Child Care Regulation to increase high-quality child care provider access in Texas.

**Measure:** Increase of 4,500 Texas Rising Star Providers in FFY 2024-2026.

**Action 1.2.7** TWC will provide technical assistance to Texas employers to examine the child care needs of their employees, including strategies to increase the supply of available child care.

**Measure:** 100 Texas employers have received child care-related technical assistance by the end of 2026.



**Goal 2: The early learning workforce is well-paid, trained and supported; can reach and obtain the professional development resources they need throughout their careers; and is large enough to meet Texans' needs.**

**Action 2.3.1 TWC and TEA will connect high schools throughout the state to child care providers and offer work-based learning opportunities to students.**

**Measure: TWC and TEA have identified target numbers of high schools and child care provider connections to promote work-based learning opportunities to students by the end of 2024.**

**Action 2.3.2 TWC will conduct and publish a landscape analysis of Institutions of Higher Education offering early childhood degrees and local educational agencies offering Early Learning CTE programs of study.**

**Measure: An early childhood degree and program landscape analysis report has been published by the end of 2026.**

**Action 2.3.3 TWC will publish guidance resulting from work sessions with Institutions of Higher Education on credit transfer.**

**Measure: Guidance on credit transfer has been published by the end of 2026.**

**Action 2.3.4 TWC, through the 28 Boards, will assist early childhood programs by providing workforce development expertise and support, including job matching and employer supports.**

**Measure: TWC has provided early learning-related guidance and support to all 28 Boards in FFY 2024-2026.**

**Action 2.4.2 TWC will continue to offer child care business training and coaching and training about evidence-based staff retention strategies.**

**Measure: 210 child care providers have received child care business training about evidence-based staff retention strategies by the end of 2026.**

**Action 2.4.7 TWC and TEA will offer trainings for early learning professionals to address challenging behaviors, children with special health care needs, and child development and brain development. Training topics include restorative discipline, teacher-student interactions, and inclusive practices.**

**Measure: TWC and TEA have offered 30 trainings to early learning professionals to address challenging behaviors, children with special health care needs, and child development and brain development by the end of 2026.**

**Goal 3: Local early learning systems are well-coordinated, appropriately resourced, and successfully support the children and families in their communities.**

**Action 3.1.2 TWC and TEA will continue to support statewide staff working towards pre-kindergarten and child care partnerships.**

**Measure: 300 TWC-supported Pre-K and child care partnerships have been formed in the years 2024-2026.**

Action 3.1.6 TWC will explore how Boards can partner with their city, county, school district, and business leaders to support child care.  
No corresponding measure.

Goal 4: State early learning system entities are collaborating to make family- and data-informed decisions to improve services, programs and resources for children and their families.

Action 4.3.1 TEA, THSSCO and TWC will streamline early learning program eligibility screening and applications by developing a mechanism to notify families of other service and program eligibility.  
No corresponding measure.

Action 4.3.4 TEA, THSSCO and TWC will explore streamlining early learning program eligibility screening and applications to reduce redundancy in program applications.  
No corresponding measure.

## 7.2 Use of Quality Set-Aside Funds

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

### 7.2.1 Quality improvement activities

- a. Describe how the Lead Agency will make its Quality Progress Report (ACF – 218) and expenditure reports, available to the public. Provide a link if available. **TWC posts Quality Progress Reports at <https://www.twc.texas.gov/programs/child-care/data-reports-plans>.**
- b. Identify Lead Agency plans, if any, to spend CCDF funds for each of the following quality improvement activities. If an activity is checked “yes”, describe the Lead Agency’s current and/or future plans for this activity.

- i. Supporting the training and professional development of the child care workforce, including birth to five and school-age providers.

☐ No plans to spend in this category of activities at this time.

☒ Yes. If yes, describe current and future investments. **Local Professional Development Activities**

**Boards use a portion of their quality set aside funds to provide professional development opportunities to the child care workforce. Boards submit annual quality plans to TWC which TWC posts on its website.**

**Texas Early Childhood Professional Development Scholarships**

**Currently administered by the TXAEYC, this initiative provides professional development scholarships for early childhood educators who work in the licensed childcare settings across Texas. These comprehensive scholarships enable early childhood educators to take coursework leading to credentials and degrees at**

local community colleges and universities in Texas while continuing to work.

#### AgriLife Online Child Care Training

AgriLife provides a wide range of online child care training courses with certificates for the child care workforce looking to complete state-mandated training requirements, professional development, and CDA renewal requirements.

#### Child Care RAPs

TWC provides support for the development and implementation of new RAPs for child care. Apprentices receive classroom instruction and on-the-job training to help them advance professionally. Upon completion, apprentices receive a national, industry recognized credential.

#### Child Care Business Coaching and Training

TWC will develop a comprehensive project focused on both business coaching and business training. Services will include tailored one-on-one business coaching; assisting providers with general business support, which may include strategies for the management of their business, their financial policies and financial operations; education and training on financial stability; business management; personnel management; recruitment/retention of staff; communication, including family and community engagement; and providing information about the benefits of participating in TWC's subsidized child care program and the benefits of pursuing Texas Rising Star certification.

#### Texas Rising Star Early Educator Conference

TWC will provide two-day professional development conferences annually for Texas Rising Star early learning program staff and administrators to attend. This conference will support early learning educators in obtaining their required annual training hours, as well as gain new skills and understanding about current early childhood education trends, resources, and best practices.

#### Child Care Workforce Strategic Plan

HB 619, 87th Texas Legislature, Regular Session (2021), added §302.0062 to the Texas Labor Code, requiring TWC to prepare a child care workforce strategic plan for improving the quality of the infant, toddler, preschool, and school-age child care workforce in Texas and to update the strategic plan every three years. The bill requires the strategic plan to include recommendations and best practices, including how to improve, sustain, and support the child care workforce.

- ii. Developing, maintaining, or implementing early learning and developmental guidelines.

☒ No plans to spend in this category of activities at this time.

☐ Yes. If yes, describe current and future investments.

- iii. Developing, implementing, or enhancing a quality improvement system.

☐ No plans to spend in this category of activities at this time.

☒ Yes. If yes, describe current and future investments. **Texas invests heavily in**

our mandatory QRIS program. TWC has the following goals for high-quality, subsidized child care in Texas:

Improve child care services by assisting child care providers in achieving quality standards such as Texas Rising Star certification;  
Increase access to quality child care for families by increasing the number of Texas Rising Star-certified facilities; and  
Improve the quality of teacher-child interactions and learning environments by increasing professional development opportunities for child care and Pre-K teachers who work in early childhood education.

#### **Texas Rising Star Four-Year Review**

TWC reviews the Texas Rising Star program every four years per CCS rule §809.130(e). TWC is in the process of concluding its most recent review that began in July 2023. To help inform the review, TWC established the Texas Rising Star 2023 workgroup. The workgroup developed recommendations, which TWC shared with additional stakeholders through public stakeholder meetings held in the Spring 2024. Based on this input, TWC will develop recommendations for changes to the Texas Rising Star Guidelines, and for proposed rule changes. These recommendations were presented to the Commission in April 2024 and are expected to be finalized in September 2024. The next four-year review is scheduled for Summer of 2027.

#### **Mentoring Supports**

On June 13, 2023, TWC's three-member Commission approved an increase to the Texas Rising Star Staff Support budget for BCY'24 to \$27 million. This additional funding allows Boards to hire more Texas Rising Star mentors to support the implementation of HB 2607, 86th Texas Legislature, Regular Session (2019), which requires CCS providers to participate in the Texas Rising Star program. Mentors provide TA and coaching to support child care programs in obtaining and maintaining Texas Rising Star certification, which includes creating an online Continuous Quality Improvement Plan within the Texas Rising Star assessment platform, Engage. TWC will continue to provide dedicated mentor funding to the Boards to support increased mentoring supports for programs participating in Texas Rising Star, from Entry Level designation to certification.

#### **Centralized Assessors**

In July 2023, TWC competitively procured a Centralized Assessment Entity to oversee the Texas Rising Star assessment process. CLI was awarded the contract and began assessment functions October 1, 2023.

#### **Local Activities to Support Quality Improvement**

Boards use a portion of their quality set aside funds to provide quality improvement supports to the child care programs they mentor. Boards submit annual quality plans to TWC which TWC posts on its website.

- iv. Improving the supply and quality of child care services for infants and toddlers.

[ ] No plans to spend in this category of activities at this time.

☒ Yes. If yes, describe current and future investments. **Texas Infant Toddler Specialist Network (ITSN)**

In March 2020, TWC provided \$3 million through a competitive procurement process to establish a statewide infant and toddler specialist network. CLI was awarded the contract and has been implementing a network that provides teachers and administrators of infant and toddler programs with professional development, technical support, and opportunities to participate in professional learning communities. This continued work will help to enhance the quality of care provided to infants and toddlers across the state, as well as elevate the skills and competencies of the infant and toddler professionals who participate. TWC continues to monitor the effectiveness of this program and use that information to inform any future initiatives.

Effective January 15, 2024, each Board is required to designate an Infant Toddler Specialist to participate in the Texas ITSN. This specialist will be able to support the local child care providers in their area with improving the quality of care provided to infants and toddlers in those programs, as well as elevate the skills and competencies of the infant and toddler teachers.

#### **Statewide FCCN**

TWC will conduct a procurement to select an entity to develop a staffed program that supports a statewide network of family child care providers. The FCCN will provide specialized services and technical assistance to increase the availability and quality of FCC Providers. TWC intends to support child care providers seeking to become newly permitted or permitted at a higher level with CCR HHSC.

#### **Local Activities to Improve the Quality of Care for Infants and Toddlers**

Boards use a portion of their quality set aside funds to support activities that improve the quality and availability of child care for infants and toddlers. Boards submit annual quality plans to TWC which TWC posts on its website.

- v. Establishing or expanding a statewide system of CCR&R services.

☒ No plans to spend in this category of activities at this time.

☐ Yes. If yes, describe current and future investments.

- vi. Facilitating compliance with Lead Agency child care licensing, monitoring, inspection and health and safety standards.

☐ No plans to spend in this category of activities at this time.

☒ Yes. If yes, describe current and future investments. **As part of a larger supply building effort in 2022, TWC invested \$1 million to support a new Child Care Navigator team. The CCR Navigators are strategically placed in different parts of the state to help support new child care providers build and sustain their child care business. The Navigators partner with new child care applicants, assisting them through the application process, providing them with available resources in their community or region, and connecting them with their CCR representatives. TWC will continue this investment using PDG B-5 and CCDF funding.**

#### **Local Activities to Support Compliance with Health and Safety Standards**

**Boards may use a portion of their quality set aside funds to support compliance with state health and safety standards. Boards submit annual quality plans to TWC which TWC posts on its website.**

- vii. Evaluating and assessing the quality and effectiveness of child care services within the State/Territory.

☐ No plans to spend in this category of activities at this time.

☒ Yes. If yes, describe current and future investments. **Local Activities to Support Evaluation and Assessment**

**Boards may use a portion of their quality set aside funds for activities that evaluate and assess the quality and effectiveness of child care services in their local areas. Boards submit annual quality plans to TWC which TWC posts on its website.**

#### **Planning for Individualized Instruction**

**Through a statewide initiative, TWC grants funding to an entity that supports child progress monitoring and provider training on how to use the data to inform lesson plans and intentional learning activities.**

- viii. Accreditation support.

☐ No plans to spend in this category of activities at this time.

☒ Yes. If yes, describe current and future investments. **Local Activities to Support National Accreditation**

**Boards may use a portion of their quality set aside funds to provide mentoring to help child care providers attain national accreditation. Some Boards provide fee assistance for attaining national accreditation. Boards submit annual quality plans to TWC which TWC posts on its website.**

- ix. Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development.

☐ No plans to spend in this category of activities at this time.

☒ Yes. If yes, describe current and future investments. **TWC will use CCDF funding to implement Texas Rising Star program changes based on the 2023 Texas Rising Star 4-year Review workgroup recommendations. TWC will continue to provide funding to the CLI, who manages the Texas Rising Star online tool, to support enhancements and maintenance of the tool, including the continuous quality improvement plan generator.**

- x. Other activities determined by the Lead Agency to improve the quality of child care services and the measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry.

☐ No plans to spend in this category of activities at this time.

☒ Yes. If yes, describe current and future investments. **Prekindergarten Partnerships**

TWC supports a PKP program to assist Texas Rising Star programs with a three-star certification or higher to establish PKPs with local school districts and charter schools. TWC also collaborates with TEA to develop joint strategies to expand the development of PKPs throughout the state.

TWC's PKP program aims to increase the number of children enrolled in PKPs by generating interest and increasing the number of partnerships between child care providers and LEAs such as school districts and open-enrollment charter schools. PKP Specialists support the development of PKPs throughout the state by informing and engaging potential partners; supporting child care providers and LEAs during negotiations; identifying partnership models that best meet the unique needs of the programs and families; coordinating efforts with stakeholders; capacity building and systems development for the sustainability of partnerships. Through this program, TWC will provide eligible child care programs awards of up to \$25,000 for each new partnership classroom to assist with the costs associated with the new PKP classroom, including: teacher compensation, curriculum, furniture, equipment, and training materials. TWC is measuring the outcomes by examining the number of new PKP classrooms that receive funding awards, and whether those classrooms sustain PKP instructional services long-term in support of a more robust mixed-delivery system.

#### Shared Services Alliances

Since June 2022, TWC has funded support to plan and implement SSAs. The goal of this initiative is for SSAs to become self-sustaining, as the programs realize savings through the shared services model. Alliances may offer various services to member providers, such as: accounting support, marketing support, legal support, digital literacy support, human resources support, health benefits, and child care business management software. In FY'25, TWC will issue a new Request for Applications to solicit a grantee to administer this initiative. TWC will measure outcomes by monitoring child care provider participation and implementation of alliance sustainability plans.

#### Child Care Expansion Initiative

Originally funded with stimulus dollars, CCEI offers start-up funding to help expand the availability of child care. TWC will competitively procure an entity to administer this initiative in FY25. The renewed initiative will focus on capacity expansion in child care deserts as well as expansions that are employer-connected. TWC will measure CCEI outcomes by monitoring the number of providers who applied, and the amount of new child care seats proposed by focus area.

#### Wage Supplements

As described in Section 6.1, in FY22 and FY23, Boards used COVID stimulus funding to provide incentives (bonuses, stipends or other wage supplements) for 8,588 staff at 907 Texas Rising Star-certified providers.

Boards may use their regular CCDF child care quality funds to support child care workforce compensation, which may include providing funding to Texas Rising

Star-certified providers for wage compensation or pay stipends or retention bonuses directly to the providers' staff. TWC will measure outcomes by monitoring the number of child care subsidy providers and staff that receive the wage supplements.

#### Data Systems

TWC will make several systems improvements during FY25 through FY27. In FY24, TWC funded a website usability study of TECPDS. During the plan period, TWC will support improvements to the system in response to the recommendations from the study. TWC will look at usage metrics before and after the site improvements to measure impact.

In FY25, TWC will use PDG B-5 funding to procure a vendor to develop an online interagency Eligibility Screener to help parents determine their potential eligibility for programs that serve young children, such as CCDF, public Pre-K, and HS. The system will include functionality to capture usage metrics which TWC will use to measure impact.

TWC also plans to coordinate with the Texas Education Agency during this plan period on the development of an Early Childhood Integrated Data System (ECIDS). The ECIDS will be developed in accordance with the ECIDS Roadmap that was developed by the TELC in FY'23. Once developed, the ECIDS will support data-driven program improvements. This project is funded by PDG B-5.

## 8 Lead Agency Coordination and Partnerships to Support Service Delivery

Coordination and partnerships help ensure that the Lead Agency's efforts accomplish CCDF goals effectively, leverage other resources, and avoid duplication of effort. Such coordination and partnerships can help families better access child care, can assist in providing consumer education to parents, and can be used to improve child care quality and the stability of child care providers. Such coordination can also be particularly helpful in the aftermath of disasters when the provision of emergency child care services and the rebuilding and restoring of child care infrastructure are an essential part of ensuring the well-being of children and families in recovering communities.

This section identifies who the Lead Agency collaborates with to implement services, how match and maintenance-of-effort (MOE) funds are used, coordination with child care resource and referral (CCR&R) systems, and efforts for disaster preparedness and response plans to support continuity of operations in response to emergencies.

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

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

#### 8.1.1 Coordination with required and optional partners



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

The Lead Agency must coordinate with the following agencies:

- a. State Advisory Council on Early Childhood Education and Care or similar coordinating body (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe the coordination and results of the coordination: **The TELC serves as Texas' State Advisory Council on ECE and Care. Members of TELC, including Texas CCDF Administrator and TELC Chairperson Reagan Miller, are appointed by Governor Greg Abbott. The Council utilizes its breadth of stakeholder representation to increase coordination and collaboration across state agencies and local program and service providers to improve the quality of and access to early childhood services across Texas. TELC includes representatives from the following agencies and organizations:**

HHSC CCR;  
FSS (previously Texas DFPS);  
PEI;  
HHSC ECI;  
TEA ECE;  
THSCO;  
DFPS CPS;  
TECPDS;  
Texas DSHS Maternal Health and Substance Abuse;  
Greater East Texas Community Action Program;  
CLI of University of Texas Health Sciences Center at Houston;  
TXAEYC;  
Texans Care for Children;  
PNC Financial Services Group; and  
Texas Public Broadcasting Association.

TELC meets every other month. TWC regularly presents information to TELC and receives feedback on child care and early learning issues. Additionally, TELC provides significant input into the PDG B-5 work, particularly the 2023 statewide early childhood needs assessment and 2024-2026 strategic plan. TWC's coordination with TELC results in enhancing and aligning the quality of services for infants and toddlers through school-age children.

- b. Indian Tribe(s) and/or Tribal organization(s), at the option of the Tribe or Tribal organization. Describe the coordination and results of the coordination, including which Tribe(s) was (were) involved: **Boards connect with tribes located in their LWDAs (Borderplex, Deep East, and Middle Rio) to support them as needed. Boards share opportunities for free training and professional development with tribes. Other services to be coordinated will be based on the tribes' needs and the Boards' available resources.**

During the summer of 2023, TWC visited the Tribal CCDF administrators from the Alabama-Coushatta, Kickapoo, and Ysleta del Sur Pueblo tribes at their sites along with

representatives from the Boards, Office of Child Care, Tribal Capacity Building Center, and State Capacity Building Center. During these meetings, some areas were identified for potential program changes to better support both tribal and Board needs.

In August 2023, Kickapoo opened a new school that includes child care and HS classrooms. At this time, the Tribal CCDF Administrator does not see a need to become licensed or Texas Rising Star certified, as the school is funded by the tribe and only children in the tribe are eligible to attend. TWC and Workforce Solutions Middle Rio Grande will continue to meet with the Tribal CCDF Administrator regularly.

The Ysleta del Sur Pueblo is also in the process of building a new school with new child care classrooms. The tribe has one LCCH provider who participates in CCS and is Texas Rising Star certified. The Ysleta del Sur Pueblo is also in the process of becoming an accredited Montessori school. Based on this discussion and other requests, TWC is updating the list of recognized accreditation organizations to include Montessori accreditation bodies. This will create an easier path to Texas Rising Star certification should the tribe decide to pursue licensure, state subsidy and Texas Rising Star certification for their center in the future. TWC and Workforce Solutions Borderplex will continue meet with the Tribal CCDF Administrator regularly.

During TWC's visit with Alabama-Coushatta, tribal leadership expressed interest in opportunities to partner with the state to better serve tribal children. Further discussions are needed as we explore this option. TWC and Workforce Solutions Borderplex will continue to meet with the Tribal CCDF Administrator regularly.

TWC and each Tribal CCDF Administrator have committed to quarterly meetings with the Office of Child Care, Tribal Capacity Building Center, and State Capacity Building Center. TWC is pleased to further its relationships with each tribe and to identify more opportunities for coordination and collaboration.

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

- c. State/Territory agency(ies) responsible for programs for children with disabilities, including early intervention programs authorized under the Individuals with Disabilities Education Act. Describe the coordination and results of the coordination: **A TWC CC&EL Division representative is a member of the ECI Advisory Committee and works with ECI to give parents and providers information on state resources available for developmental screenings and other services for infants and toddlers with disabilities. ECI and TEA's Preschool Special Education program are also represented on the TELC. TWC is currently working with ECI to provide training for child care providers on child development, assessments, and strategies to support inclusion of infants and toddlers with special needs within their programs. ECI is also represented on the TELC and the ECIA Workgroup, a group of leaders from five state agencies serving young children to support coordination and collaboration among the agencies.**

Boards coordinate with local early childhood programs and ECI service providers to offer ECI services at child care facilities and conduct conferences and trainings for providers and parents about services for infants and toddlers with disabilities.

- d. State/Territory office/director for Head Start State collaboration. Describe the coordination and results of the coordination: **A TWC CC&EL Division representative sat on the THSSCO Advisory Board to support the development and activities of the annual needs assessment and strategic plan. The THSSCO Advisory Board disbanded in Fall 2023. THSSCO is also represented on the TELC.**

In January 2021, TWC added §809.22 to the CCS rules to facilitate greater coordination between child care and HS/EHS services and ensure full-day care for children enrolled in these programs. This section requires Boards to enroll eligible children in the CCS program who are also enrolled in and referred by a HS/EHS program. These children are also exempt from the Board's waiting list.

- e. State/Territory agency responsible for public health, including the agency responsible for immunizations. Describe the coordination and results of the coordination: **The DSHS operates under the HHSC enterprise. DSHS is represented on the TELC and the ECIA Workgroup, a group of leaders from five state agencies serving young children to support coordination and collaboration among the agencies.**

The Maternal and Child Health Unit at DSHS leads Help Me Grow (HMG) Texas. The HMG model helps states and communities leverage existing resources. With the model, communities can identify vulnerable children; link families to community-based services; and empower families to support their child's optimal development. As the lead fiscal agency for the PDG B-5, TWC coordinates with DSHS to support communities implementing or preparing to implement the HMG system model. TWC staff connect these communities to their local Boards and help them understand how CCS fit into the HMG model.

- f. State/Territory agency responsible for employment services/workforce development. Describe the coordination and results of the coordination: **TWC is the state agency responsible for employment services and workforce development. The CC&EL Division director meets weekly with directors from other TWC divisions.**
- g. State/Territory agency responsible for public education, including pre-Kindergarten. Describe the coordination and results of the coordination: **TEA is represented on the TELC and the ECIA Workgroup, a group of leaders from five state agencies serving young children to support coordination and collaboration among the agencies.**

#### **Public Education Information Management System Numbers**

Texas Labor Code §302.0043(c-1) requires TWC to coordinate with TEA to assign unique Public Education Information Management System numbers to children younger than six years of age who are enrolled in the TWC CCS program. This will allow for longitudinal analysis of information on children who receive subsidies by bridging their participation in early childhood programs to their participation in public education. TWC collaborated with TEA to develop an automated interface and began assigning numbers to children under six years of age enrolled in subsidized child care on September 1, 2020. With the functionality in place, TWC and TEA will develop a plan to analyze and share this cross-agency data.

#### **ECDataWorks and TXR3**

In 2018, TWC partnered with TEA to participate in ECDataWorks, a multiyear project

supported by the W.K. Kellogg Foundation and facilitated by the University of Pennsylvania's Consortium for Policy Research in Education in collaboration with leading experts in the field. The ECDataWorks project team works in a collaborative, outcome-driven manner to conceptualize and develop tools to facilitate the organization, delivery, and strategic use of existing early childhood data.

The web-based analytic tool Texas Ready Communities, Ready Schools, and Ready Students (TXR3) helps decision-makers visualize how well public school Pre-K, kindergarten, and Texas Rising Star programs are prepared to educate children. TXR3 provides insight into the professional development needs of communities and schools as equal partners in collaboratively educating and preparing children.

#### Prekindergarten Partnerships

TWC supports the development of partnerships between child care providers and public school Pre-K programs. Developing partnerships between child care providers and public school Pre-K programs is an important strategy used to improve school-readiness, support families, and strengthen the early childhood education workforce through TWC's CCS program.

In January 2021, TWC added §809.22 to the CCS rules to facilitate greater coordination between child care and Pre-K services and ensure full-day care for children enrolled in these programs. The rule requires Boards to enroll eligible children in the CCS program who are also enrolled in and referred by a PKP or LEA.

State law also requires coordination between TWC and TEA to support PKPs. Texas Labor Code §302.00436 requires each Board to inform the local school districts and open-enrollment charter schools in the workforce area regarding opportunities to partner with child care providers to expand access to and provide facilities for Pre-K programs. TWC supports Boards with sharing this information. HB 1615 (adding Texas Labor Code §302.0051) passed in May 2023 and formalizes the PKP that TWC began with stimulus funding in 2021.

TWC's PKP Specialists aim to increase the number of children enrolled in PKPs by generating interest and increasing the number of partnerships between child care providers and LEAs such as school districts and open-enrollment charter schools. PKP Specialists support the development of PKPs throughout the state by informing and engaging potential partners; supporting child care providers and LEAs during negotiations; identifying partnership models that best meet the unique needs of the programs and families; coordinating efforts with stakeholders; and capacity building and systems development for the sustainability of partnerships.

TWC gives eligible child care providers a one-time award of \$25,000 for each new PKP classroom. Child care providers can use the funding to assist with the costs associated with the new partnership classroom, including teacher compensation, instructional materials, classroom furniture, and equipment. Providers are eligible to apply for the funding if they are Texas Rising Star Three- or Four-Star certified, have an executed Memorandum of Understanding indicating a partnership with a school district or charter school with dually enrolled children, and have at least one new three- or four- year- old

PKP classroom. TWC has awarded providers approximately \$2 million for the 2023-2024 school year and continues to accept applications for the upcoming school year.

- h. State/Territory agency responsible for child care licensing. Describe the coordination and results of the coordination: **HHSC's CCR division is represented on the TELC and the ECIA Workgroup, which is a group of leaders from five state agencies that serve young children to support coordination and collaboration among the agencies.**

TWC works closely with HHSC's CCR division to ensure that child care providers serving children participating in the CCS program meet the health and safety requirements of the CCDF Final rule. In addition to meeting with CCR representatives in several interagency groups and monthly Region VI meetings, TWC seeks input from CCR on Texas Rising Star reviews, the effects of natural disasters and COVID-19, and other issues that arise.

In 2022, TWC invested over \$11 million of stimulus funding to support CCR with computer system enhancements and to support five Child Care Navigator positions. The system enhancements include improvements to the Search Texas Child Care website to enhance its value to Texas families. These improvements also require changes to CCR's CLASS system, data exchange processes with TWC, and new data exchanges with TEA. The improvements will modernize the technology, make the site more mobile friendly, and will include several system enhancements.

The CCR Navigators are strategically placed in different parts of the state to help support new child care providers build and sustain their child care business. The Navigators partner with new child care applicants, assist them through the application process, provide them with available resources in their community or region, and connect them with their CCR representatives.

TWC and CCR share data on all regulated child care providers. TWC will continue to work closely with CCR to support child care providers and parents seeking CCS.

- i. State/Territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination and results of the coordination: **TWC coordinates with the Texas TDA, which is the agency responsible for CACFP, to participate in efforts to address children's health and nutrition. TWC coordinated with TDA and TWC's business coaching contractor to develop a guide for child care businesses interested in starting the CACFP.**
- j. McKinney-Vento State coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons. Describe the coordination and results of the coordination: **TWC works with the Texas Department of Housing & Community Affairs to coordinate services for individuals and families experiencing homelessness. TEA's State McKinney-Vento Coordinator and a representative of TWC's CC&EL Division serve together on the ECI State Advisory Council.**

Boards coordinate with local homeless shelters and organizations serving homeless families. Boards also work with ISDs to identify and provide outreach to homeless children served by public schools. This coordination is in conjunction with workforce services to

homeless families through the Workforce Innovation and Opportunity Act.

During this plan period, TWC will work with the ECI Workgroup to enhance the [earlychildhood.texas.gov](http://earlychildhood.texas.gov) website to provide information and resources specially geared to families experiencing homelessness that have young children.

- k. State/Territory agency responsible for the TANF program. Describe the coordination and results of the coordination: **TWC and the Boards administer the Choices employment program for TANF recipients. Boards prioritize child care subsidies for parents who are receiving TANF as well as participating in Choices.**
- l. State/Territory agency responsible for Medicaid and the State Children's Health Insurance Program. Describe the coordination and results of the coordination: **TWC works extensively with HHSC, the agency responsible for the Children's Health Insurance Program, and the Medicaid program. Boards also provide customers with referrals to these programs.**
- m. State/Territory agency responsible for mental health services. Describe the coordination and results of the coordination: **TWC coordinates with HHSC, DFPS, and DSHS, which are the agencies responsible for addressing children's mental health issues. Representatives from these agencies serve together on the TELC, and ECIA Workgroup. TWC also collaborates with these agencies on PDG B-5 funded projects to support infant and early childhood mental health. Boards provide customers with referrals to local mental health programs.**
- n. Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Describe the coordination and results of the coordination: **Boards and their child care contractors provide many child care resource and referral services. Boards may contract with local resource and referral organizations and providers of early childhood education training and professional development.**
- o. Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination and results of the coordination: **TXPOST participated in TWC's Texas Rising Star four-year review Workgroup. TWC is collaborating with the TXPOST to discuss its needs for school-aged children outside the classroom.**
- p. Agency responsible for emergency management and response. Describe the coordination and results of the coordination: **On December 7, 2020, TWC met with representatives from the Texas Division of Emergency Management, DSHS, and CCR to review and update the state's Child Care Disaster Preparedness and Recovery Plan. Throughout the COVID-19 pandemic, TWC worked closely with the Texas Division of Emergency Management to address the needs of the child care industry, including distribution of cleaning and PPE supplies.**
- q. The following are examples of optional partners a Lead Agency might coordinate with to provide services. Check which optional partners the Lead Agency coordinates with and describe the coordination and results of the coordination.
  - i. ☐ State/Territory/local agencies with Early Head Start – Child Care Partnership grants. Describe:
  - ii. ☒ State/Territory institutions for higher education, including community colleges.

Describe: TWC works with CLI at the University of Texas Health Science Center at Houston and Texas A&M AgriLife Extension to coordinate training opportunities. TWC meets quarterly with several IHEs, including community colleges, during TELC meetings. TWC works with Rice University's Texas Policy Lab to analyze administrative and demographic data related to key policy questions.

TWC is also using PDG B-5 funding to work with two-year and four-year institutions to develop effective articulation or transfer agreements that recognize students' prior learning. These pathways may include credit for work experience or based on competency evaluations to help current early childhood professionals reduce the number of college classes they need to take, the time they have to dedicate to classwork, and the cost required to earn their degree.

TWC is working with Dallas College to conduct an Early Childhood Education Teacher Pipeline Project. Dallas College is designing and developing an online competency-based assessment, the Texas Core Curriculum that is geared toward the early childhood education workforce. Newly recognized industry credentials will be awarded to approximately 500 early childhood educators employed in Texas Rising Star rated centers. After the initial group of students earn their credentials, Dallas College will enroll additional early childhood educators employed in Texas Rising Star-certified centers who will work toward the industry recognized credentials. Students that successfully complete each semester will be eligible for tuition waivers and scholarships to cover the standard per semester credit hour tuition. The materials developed under TWC funding will be open sourced and accessible to other institutions across Texas. Dallas College will also develop a comprehensive early childhood workforce data system.

- iii. ☒ Other federal, State, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services. Describe: TWC is a member of the ECI Advisory Committee. ECI is a statewide program for families with children from birth to three years old who have disabilities and developmental delays. ECI provides support to families to help their children reach their potential through developmental services.

TWC is partnering with ECI to provide training on developmental learning strategies, early brain development, and inclusion to child care providers; training and supporting child care providers on screening for developmental delays; and building the capacity of ECI personnel to support social-emotional wellness.

- iv. ☒ State/Territory agency responsible for implementing the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) programs grant. Describe: **Effective September 1, 2024, DFPS PEI is moving from DFPS to HHSC as FSS. PEI/FSS represented on the TELC and ECIA Workgroup, a group of leaders from five state agencies serving young children to support coordination and collaboration among the agencies.**

HHSC's FSS oversees the Texas Home Visiting program. FSS is a member of the TELC and ECIA Workgroup. In addition, Boards coordinate services with local Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grantees to identify

potential families who may benefit from the program.

TWC uses PDG B-5 funding to partner with FSS to provide Early Childhood Systems Building grants to their existing Healthy Outcomes through Prevention & Early Support and MIECHV grantees. These grants allow community coalitions to:

Implement, or work towards the implementation of, the HMG Systems Model;  
Conduct family and community outreach;  
Establish or enhance a central intake and referral system;  
Conduct health care provider outreach; perform data collection and analysis;  
Create, maintain, or expand an existing Family Resource Center, including hiring a parent navigator;  
Implement the National Family Support Network's Standards of Quality professional development opportunities to increase family engagement and leadership; and  
Implement Parent Cafes to facilitate peer-to-peer conversation to promote awareness and strengthening within families, develop parent connection, build community, and engage parents as partners in initiatives, programs, and services.

- v. ☐ Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment Program. Describe:
- vi. ☒ State/Territory agency responsible for child welfare. Describe: **TWC works with DFPS to fund child care services for children in protective care. Boards also coordinate with local DFPS offices to authorize care for children needing protective services.**
- vii. ☒ Child care provider groups or associations. Describe: **TWC regularly meets with child care providers who are members of TELC and the Texas Rising Star four-year review workgroup.**

In February 2024, TWC hosted five in-person stakeholder meetings and one virtual stakeholder meeting to invite child care providers and other early childhood stakeholders to provide input on the 2025-2027 CCDF State Plan. Approximately 340 stakeholders, including several representing provider groups, participated in these meetings. Providers were also encouraged to take the Stakeholder Survey in January 2024. This input informs TWC's decisions on program policies and investments. In total, 2,750 providers participated in the Stakeholder Survey, with 603 (22 percent) of providers self-identifying as representing a child care home. TWC will continue to meet with groups of child care providers periodically.

- viii. ☒ Parent groups or organizations. Describe: **TWC leverages existing parent advisory councils with partner agencies to seek input on the CCDF program. In February 2024, TWC hosted five in person stakeholder meetings and one virtual stakeholder meeting to invite parents, child care providers and other early childhood stakeholders to provide input on the 2025-2027 CCDF State Plan. Parents were also encouraged to take the Stakeholder Survey in January 2024. This input informs TWC's decisions on program policies and investments. In total, 2,193 parents participated in the Stakeholder Survey, with 1,236 (56 percent) self-identifying as receiving child care subsidies or having received them in the past.**



- ix. ☐ Title IV B 21<sup>st</sup> Century Community Learning Center Coordinators. Describe:
- x. ☒ Other. Describe: **TWC regularly meets with organizations that advocate for children, families, and child care providers. Several of these groups, including Texans Care for Children, TXAEEYC, and Children at Risk, are members of TELC and/or the Texas Rising Star four-year review workgroup. In February 2024, TWC hosted five in-person stakeholder meetings and one virtual stakeholder meeting to invite parents, child care providers and other early childhood stakeholders to solicit their input on the 2025-2027 CCDF State Plan. Parents were also encouraged to take the Stakeholder Survey in January 2024. This input informs TWC's decisions on program policies and investments. In total, 538 early childhood care and education stakeholders, who did not identify as parents or child care providers, participated in the Stakeholder Survey.**

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

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

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

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

### 8.2.1 Combining funding for CCDF services

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

☐ No. (If no, skip to question 8.2.2)

☒ Yes.

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

☒ Title XX (Social Services Block Grant, SSBG)

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

☒ State- or Territory-only child care funds

☐ TANF direct funds for child care not transferred into CCDF

☒ Title IV-B funds (Social Security Act)

☒ Title IV-E funds (Social Security Act)

☐ Other. Describe:

- ii. If yes, what does the Lead Agency use combined funds to support, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care, or developing the supply of child care for vulnerable populations? **Title IV-B, Title IV-E, Title XX, and state general revenue funds are combined with CCDF funds to enhance and align child care services for children receiving protective services.**

#### 8.2.2 Funds used to meet CCDF matching and MOE requirements

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

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

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

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

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

☒ Yes. If yes, describe which funds are used: **In addition to the state general revenue funds that Texas certifies for match, the 28 Boards receive public match funds from public entities including local governments and public colleges and universities.**

☐ No.

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

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

- i. ☒ Donated directly to the state.

- ii. ☒ Donated to a separate entity(ies) designated to receive donated funds. If checked, identify the name, address, contact, and type of entities designated to receive private donated funds: **Each of the 28 Boards may receive privately donated funds to meet match requirements. A Board directory, which includes addresses and contact information, is available on TWC's website.**

☐ No.

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

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

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

☒ Yes.

☐ No. If no, describe:

### 8.3 Coordination with Child Care Resource and Referral Systems

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

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

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

- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the State and, as appropriate, coordinate their activities with the activities of the Lead Agency and local agencies that administer funds made available through CCDF.

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

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

☒ No. The Lead Agency does not fund a system or network of local or regional CCR&R organization(s) and has no plans to establish one.

☐ No, but the Lead Agency has plans to develop a system or network of local or regional CCR&R organization(s).

☐ Yes. The Lead Agency funds a system or network of local or regional CCR&R organization(s) with all the responsibilities outlined above. If yes, describe the activities outlined above carried out by the CCR&R organization(s), as directed by the Lead Agency:

### 8.4 Public-Private Partnerships

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

#### 8.4.1 Lead Agency public-private partnerships

Identify and describe any public-private partnerships encouraged by the Lead Agency to leverage public and private resources to further the goals of CCDF: **Local Workforce Development Boards**

**Local Match: Boards leverage local public expenditures in their LWDAs as match for federal CCDF matching funds. Boards work with public IHEs, ISDs, and local governments to certify local public expenditures for direct child care services to low-income families and for child care quality improvement activities. Boards use the federal CCDF matching funds resulting from the public certifications to increase direct child care services to CCDF-eligible families in their LWDAs. The funds are also used to expand quality improvement activities in the LWDAs.**

**Child Care Investment Partnerships: This program allows Boards to leverage local industry cash donations with CCDF state funds to build public-private partnerships that support early childhood programs and systems and to expand and support activities that improve early learning and child care. Boards partnering with a corporation and/or foundation may apply to TWC detailing how they would like to invest these funds in local efforts to expand and improve the quality of child care. The purpose of this oversight is to ensure that the funds are spent on meaningful strategies that have long-term benefits. TWC used stimulus funding to provide 100 percent matching funds to support the following quality improvement activities:**

**Child care apprenticeships;**

Home-based child care;  
Public-private PKPs;  
Business support for child care programs;  
Child care worker wage supports;  
Emergency response/recovery;  
Expansion of child care;  
Research studies; and  
Other quality improvement activities.

#### Texas Early Learning Council

The TELC serves as Texas' State Advisory Council on Early Childhood Education and Care. Members of TELC, including Texas CCDF Administrator and TELC Chairperson Reagan Miller, are appointed by Governor Greg Abbott. This group includes representatives from state agencies, school districts, colleges, HS, child care providers, early childhood advocacy organizations, and the private sector. TELC meets every other month. TWC regularly presents information to TELC and receives feedback on child care and early learning issues. TELC provides significant input into the PDG B-5 work, particularly the 2023 statewide early childhood needs assessment and 2024-2026 strategic plan. TWC's coordination with TWLC results in enhancing and aligning the quality of services for infants and toddlers through school- age children. More information is available [here](#).

#### Prekindergarten Child Care Partnership

TWC supports the development of partnerships between child care providers and public Pre-K programs. Developing partnerships between child care providers and public-school Pre-K programs is an important strategy to improve school-readiness, support families, and strengthen the ECE workforce through TWC's CCS program.

To facilitate greater coordination between child care and Pre-K services and ensure full-day care for children enrolled in these programs, in January 2021, TWC added §809.22 to the CCS rules requiring Boards to enroll eligible children in the child care subsidy program who are also enrolled in and referred by a Pre-K partnership or LEA.

State law also requires coordination between TWC and TEA to support PKPs. Texas Labor Code §302.00436 requires each Board to inform the local school districts and open-enrollment charter schools in the workforce area regarding opportunities to partner with child care providers to expand access to and provide facilities for Pre-K programs. TWC supports Boards with sharing this information. HB 1615 (adding Texas Labor Code §302.0051) passed in May 2023 and formalizes the PKP program that TWC began with stimulus funding in 2021.

TWC's PKP Specialists aim to increase the number of children enrolled in PKPs by generating interest and increasing the number of partnerships between child care providers and local education agencies LEAs such as school districts and open-enrollment charter schools. PKP Specialists support the development of PKPs throughout the state by informing and engaging potential partners; supporting child care providers and LEAs during negotiations; identifying, partnership models that best meet the unique needs of the programs and families; coordinating efforts with stakeholders; and capacity building and systems development for the sustainability of partnerships.

TWC gives eligible child care providers a one-time award of \$25,000 for each new PKP classroom.

Child care providers can use the funding to assist with the costs associated with the new partnership classroom, including teacher compensation, instructional materials, classroom furniture, and equipment. Providers are eligible to apply for the funding if they are Texas Rising Star Three- or Four-Star certified, have an executed Memorandum of Understanding indicating a partnership with a school district or charter school dually enrolled children, and have at least one new three- or four- year- old PKP classroom. TWC has awarded providers approximately \$2 million for the 2023-2024 school year and continues to accept applications for the upcoming school year.

#### Employer-Connected Child Care

TWC is developing an Employer Child Care TA program to assist employers who want to develop site-based child care to meet the child care needs of their employees. This project uses public-private partnerships to improve the supply of child care in underserved areas and access to affordable child care for working parents.

Employer Child Care Solutions is designed to increase the supply of child care and increase access to affordable high-quality child care in underserved areas by providing TA to help employers identify how best to support their employees child care needs. TA contractors will provide free assistance, such as employee needs assessments, community child care landscape analyses, and feasibility studies to help employers determine if they could open an on-site or near-site child care center, partner with local child care providers, or provide other child care benefits. TA contractors may also help employers create a strategic plan to implement the option that best fits their needs.

CCEI: TWC launched the CCEI to build the supply of high-quality child care across Texas. The initiative was funded with stimulus dollars and provided support to child care providers creating a new child care capacity. This funding assists with offsetting costs incurred during launch and the first few months of operation. Both home based and center based businesses were eligible to apply for funding if they planned to expand the capacity of their existing child care business or open a new business on or after March 1, 2022 and were required to expanding their capacity in a child care desert, increase the number of infant slots, or operate in a documented partnership with an employer or consortium of employers to provide care for their employees' children.

TWC is exploring continuing and funding the CCEI for child care deserts and employer-connected child care during the plan period, with CCDF quality set aside dollars.

## 8.5 Disaster Preparedness and Response Plan

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

### 8.5.1 Statewide Disaster Plan updates

- a. When was the Lead Agency's Child Care Disaster Plan most recently updated and for what reason? **The Texas Statewide Child Care Emergency Preparedness and Disaster Response Plan's most recent update was in June 2021. The disaster plan was updated to incorporate lessons learned since the last publication in 2018, including lessons learned from the response to COVID.**

- b. Please certify compliance by checking the required elements the Lead Agency includes in the current State Disaster Preparedness and Response Plan.
- i. The plan was developed in collaboration with the following required entities:
- ☒ State human services agency.
  - ☒ State emergency management agency.
  - ☒ State licensing agency.
  - ☒ State health department or public health department.
  - ☒ Local and State child care resource and referral agencies.
  - ☒ State Advisory Council on Early Childhood Education and Care or similar coordinating body.
- ii. ☒ The plan includes guidelines for the continuation of child care subsidies.
- iii. ☒ The plan includes guidelines for the continuation of child care services.
- iv. ☒ The plan includes procedures for the coordination of post-disaster recovery of child care services.
- v. The plan contains requirements for all CCDF providers (both licensed and license-exempt) to have in place:
- ☒ Procedures for evacuation.
  - ☒ Procedures for relocation.
  - ☒ Procedures for shelter-in-place.
  - ☒ Procedures for communication and reunification with families.
  - ☒ Procedures for continuity of operations.
  - ☒ Procedures for accommodations of infants and toddlers.
  - ☒ Procedures for accommodations of children with disabilities.
  - ☒ Procedures for accommodations of children with chronic medical conditions.
- vi. ☒ The plan contains procedures for staff and volunteer emergency preparedness training.
- vii. ☒ The plan contains procedures for staff and volunteer practice drills.
- viii. If any of the above are not checked, describe:
- ix. If available, provide the direct URL/website link to the website where the Statewide Child Care Disaster Plan is posted:  
<https://www.twc.texas.gov/programs/child-care/data-reports-plans>

## 9 Family Outreach and Consumer Education

CCDF consumer education requirements facilitate parental choice in child care arrangements, support parents as child care consumers who need information to make informed choices regarding the services that best suit their family's needs, and the delivery of resources that can



support child development and well-being. Lead Agency consumer education activities must provide information for parents receiving CCDF assistance, the general public, and, when appropriate, child care providers. Lead Agencies should use targeted strategies for each group to ensure tailored consumer education information and take steps to ensure they are effectively reaching all individuals, including those with limited English proficiency and those with disabilities.

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

## 9.1 Parental Complaint Process

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

### 9.1.1 Parental complaint process

- a. Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process: **The Statewide Intake division of the Texas DFPS is available for parents to report abuse, neglect, or exploitation of children, as well as violations of minimum standards in child care operations. Individuals may report abuse by using the following methods:**

**Texas Abuse Hotline: 1-800-252-5400; and**

**Non-emergency reports may be submitted at <http://www.txabusehotline.org>.**

**Both the hotline and website are available 24 hours a day, seven days a week, across the United States.**

**The DFPS Statewide intake division receives and routes the following types of allegations regarding operations that are subject to regulation by CCR:**

**All reports that allege abuse, neglect, or exploitation of children in care (routed to the Child Care Investigations division of DFPS); and**

**Some, but not all, reports that allege violations of CCR statute, administrative rules, or minimum standards at child day care operations (routed to CCR).**

**Parents can also make reports that allege violations of CCR statute, administrative rules, or minimum standards to their local licensing office. The list of local child care regulation offices is posted on the HHS website by regional areas in Texas. CCR also has an information line, 1-800-862-5252, and a centralized email inbox, [CCRQuestions@hhs.texas.gov](mailto:CCRQuestions@hhs.texas.gov), where parents can contact CCR with questions or concerns.**



Effective February 18, 2024, consumer complaints can also be made through the Search Texas Child Care website.

CCR requires child care operations to post the Texas Abuse Hotline and local licensing office telephone numbers in a prominent place in the operation for parents to see.

CCR requires that operational policies for licensed facilities and registered homes include instructions on how a parent may contact the local Licensing office, access the Texas Abuse and Neglect Hotline, and access the HHSC website.

- b. Describe how the parental complaint process ensures broad access to services for families that speak languages other than English: **The child care consumer information on the CCR website is available in both English and Spanish.**
- c. Describe how the parental complaint process ensures broad access to services for persons with disabilities: **All CCR web content meets accessibility standards. HHSC has a dedicated accessibility department that works with new computer systems to ensure the widest possible access to individuals with disabilities. The new systems use the Web Content Accessibility Guidelines 2.0, and specialized accessibility testing occurs during the development life cycle.**
- d. For complaints about providers, including CCDF providers and non-CCDF providers, does the Lead Agency have a process and timeline for screening, substantiating, and responding to complaints, including information about whether the process includes monitoring?

**[x] Yes. If yes, describe: DFPS investigates reports of abuse, neglect, or exploitation that allege a child in care of an operation was or may be harmed because of an act or omission by an individual working under the supervision of a child care operation. Such harm must meet the definitions of abuse, neglect, or exploitation as described in the Texas Family Code and Texas Administrative Code. (DFPS also investigates reports of exploitation that allege an individual working under the auspices of an operation engaged in illegal or improper use of a child or used a child's resources for monetary or personal benefit, profit, or gain.) The operation where the alleged abuse, neglect, or exploitation occurred may also be violating statutes, administrative rules, or minimum standards.**

**CCR investigates reports, including self-reports made by the operation, that allege statute, administrative rules, or minimum standards have been or are in violation when no allegation of abuse, neglect, or exploitation is involved. Self-reports made by the operation include incidents involving an employee or child at an operation contracting a communicable disease; a disaster or emergency causing an operation to close or rendering part of the operation unsafe or unsanitary; or a minor accident involving a child in care.**

**The timeline for responding to and resolving complaints depends on the priority of the investigation. DFPS must respond to a report of an allegation of abuse or neglect within the first 24 or 72 hours of receiving the complaint, and the investigation must be resolved within 30 days unless there is good cause for an extension. At the child care operation, DFPS may conduct on-site visits and interviews, gather information, and observe areas pertaining to the priority 1 or priority 2 allegation of abuse, neglect, or**

exploitation.

The initial investigation of a report that alleges statute, administrative rules, or minimum standards have been or are in violation must occur within 5 to 15 days and resolved within 30 to 60 days, depending on priority. The timeline for resolution may be extended if there is good cause.

All investigations of reports that allege statute, administrative rules, or minimum standards have been or are in violation, assigned a priority of 1, 2, 3, or 4, require CCR staff to conduct an unannounced, on-site inspection of the operation. During the inspection, CCR staff evaluates compliance with the minimum standards related to the allegation and any plain-view observations. CCR does not conduct an on-site inspection for investigations assigned a priority 5, which are self-reports of minor violations of minimum standards or a serious injury.

After any investigation (including DFPS abuse, neglect, or exploitation investigation) a written report is given to the operation and agency staff members discuss deficiencies with the individual in charge. This report is required to be posted at the operation and, once due process has been exhausted for any deficiencies, is available for review on the Search Texas Child Care website, a searchable website maintained by CCR. If a provider disagrees with a deficiency, the provider may request an administrative review. Licensing staff follows up on all deficiencies to ensure that they are corrected. If deficiencies are of such a serious nature that the health and safety of the children are threatened, enforcement actions such as administrative penalties, probation, suspension, and permit denial or revocation may be warranted.

If DFPS makes the determination of Reason to Believe that abuse, neglect, or exploitation occurred to a child in care, then the alleged perpetrator is notified of the finding and his or her due process rights. The alleged perpetrator is registered in the Central Registry of Abuse, Neglect, or Exploitation. The Centralized Background Check Unit will notify the alleged perpetrator of his or her eligibility to remain at the operation depending on the results of the risk evaluation process.

[ ] No.

- e. For substantiated parental complaints, who maintains the record for CCDF and non-CCDF providers? **Records of abuse, neglect, or exploitation investigations are maintained by DFPS in the Information Management Protecting Adults and Children in Texas (IMPACT) system.**

**Records of complaints regarding providers are maintained in CLASS, the automated system that CCR uses to document all inspections and investigations. CLASS records go back to 2002.**

- f. Describe how information about substantiated parental complaints is made available to the public; this information can include the consumer education website discussed in subsection 9.2: **Information about complaints is available to the public through the Search Texas Child Care website, a searchable website maintained by CCR. The public can review a provider's Five-Year Inspection Summary and compliance history, which includes**

complaints. An individual may also contact HHSC or the local CCR office for complaint information.

Public records of complaints are featured prominently on the CCR website. Parents can also easily find public records of complaints and other violations through a simple Google search that involves key terms such as Texas child care. The first result for this search is the Search Texas Child Care site noted above where they can search the specific child care operation in which they are interested.

## 9.2 Consumer Education Website

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

- Include information to assist families in understanding the Lead Agency's policies and procedures, including licensing child care providers;
- Include monitoring and inspection reports for each provider and, if available, the quality of each provider;
- Provide the aggregate number of deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings;
- Include contact information for local CCR&R organizations to help families access additional information on finding child care; and
- Include information on how parents can contact the Lead Agency and other organizations to better understand the information on the website.

### 9.2.1 Consumer-friendly website

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

- Provide the URL for the Lead Agency's consumer education website homepage:  
<https://childcare.hhs.texas.gov/Public/childcaresearch>  
<https://earlychildhood.texas.gov/>  
<https://texaschildcaresolutions.org>
- Does the Lead Agency certify that the consumer education website ensures broad access to services for families who speak languages other than English?  
☒ Yes.  
☐ No. If no, describe:
- Does the Lead Agency certify that the consumer education website ensures broad access to services for persons with disabilities?  
☒ Yes.  
☐ No. If no, describe:

### 9.2.2 Additional consumer education website links

Provide the direct URL/website link for the following:

- i. Provide the direct URL/website link to how the Lead Agency licenses child care providers: <https://www.hhs.texas.gov/providers/protective-services-providers/child-care-regulation/child-day-care-provider/become-a-child-care-center-based-provider>
- ii. Provide the direct URL/website link to the processes for conducting monitoring and inspections of child care providers::  
<https://www.hhs.texas.gov/providers/protective-services-providers/child-care-regulation/become-a-child-care-home-provider>
- iii. Provide the direct URL/website link to the policies and procedures related to criminal background checks for staff members of child care providers:  
<https://www.hhs.texas.gov/providers/protective-services-providers/child-care-regulation/child-care-regulation-background-checks>
- iv. Provide the direct URL/website link to the offenses that prevent individuals from being employed by a child care provider:  
<https://www.hhs.texas.gov/providers/protective-services-providers/child-care-regulation/criminal-history-requirements-charts>

#### 9.2.3 Searchable list of providers

- a. The consumer education website must include a list of all licensed providers searchable by ZIP code.
  - i. Does the Lead Agency certify that the consumer education website includes a list of all licensed providers searchable by ZIP code?  
☒ Yes.  
☐ No. If no, describe:
  - ii. Provide the direct URL/website link to the list of child care providers searchable by ZIP code:  
[https://childcare.hhs.texas.gov/Child\\_Care/Search\\_Texas\\_Child\\_Care/default.asp](https://childcare.hhs.texas.gov/Child_Care/Search_Texas_Child_Care/default.asp)  
<https://find.childcare.texas.gov/>
  - iii. In addition to the licensed child care providers that must be included in the searchable list, are there additional providers included in the Lead Agency's searchable list of child care providers? Check all that apply:  
☐ License-exempt center-based CCDF providers.  
☐ License-exempt family child care CCDF providers.  
☒ License-exempt non-CCDF providers.  
☐ Relative CCDF child care providers.  
☐ Other (e.g., summer camps, public pre-Kindergarten). Describe:
- b. Identify what additional (optional) information, if any, is available in the searchable results by ZIP code. Check the box when information is provided.

Provider Information Available in Searchable Results
--

	All licensed providers	License-exempt CCDF center-based providers	License-exempt CCDF family child care home providers	License-exempt non-CCDF providers	Relative CCDF providers
Contact information	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Enrollment capacity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Hours, days, and months of operation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Provider education and training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Languages spoken by the caregiver	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality information	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monitoring reports	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to accept CCDF certificates	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ages of children served	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specialization or training for certain populations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care provided during nontraditional hours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

c. Identify any other information searchable on the consumer education website for the child care provider type listed below and then, if checked, describe the searchable information included on the website.

- i. ☒ All licensed providers. Describe: **Director name;**  
**Provider website;**  
**Type of issuance;**  
**Issuance date;**  
**Permit renewal date;**  
**Conditions on permit;**  
**Number of admin penalties;**  
**Corrective and adverse action status;**  
**Temporary closure status;**  
**Five year inspection and compliance summary (including inspections, reports, assessments);**  
**Weights of the standard deficiencies;**  
**Five year serious injury and fatality summary; and**

**History of number of employees who left employment in previous years.**

- ii. ☐ License-exempt CCDF center-based providers. Describe:
- iii. ☐ License-exempt CCDF family child care providers. Describe:
- iv. ☒ License-exempt, non-CCDF providers. Describe: **Type of issuance;**  
**Issuance date;**  
**Conditions on permit;**  
**Number of admin penalties;**  
**Corrective and adverse action status;**  
**Temporary closure status;**  
**Five year inspection and compliance summary (including inspections, reports, assessments);**  
**Weights of the standard deficiencies; and**  
**Five year serious injury and fatality summary.**
- v. ☐ Relative CCDF providers. Describe:
- vi. ☐ Other. Describe:

**9.2.4 Provider-specific quality information**

Lead Agencies must identify specific quality information on each child care provider for whom they have this information. Provider-specific quality information must only be posted on the consumer education website if it is available for the individual child care provider.

- a. What specific quality information does the Lead Agency provide on the website?
  - i. ☒ Quality improvement system.
  - ii. ☒ National accreditation.
  - iii. ☐ Enhanced licensing system.
  - iv. ☐ Meeting Head Start/Early Head Start Program Performance Standards.
  - v. ☐ Meeting pre-Kindergarten quality requirements.
  - vi. ☐ School-age standards.
  - vii. ☐ Quality framework or quality improvement system.
  - viii. ☒ Other. Describe: **Available slots by age group are available on the TX3C Availability Portal, if the provider enters the information. Providers can also provide information about the curriculum they use on the Availability Portal. The CCR consumer information website links directly to the Availability Portal provider data and vice versa.**
- b. For what types of child care providers is quality information available?
  - i. ☒ Licensed CCDF providers. Describe the quality information: **Texas Rising Star is a quality-based rating system of child care providers participating in TWC's subsidized child care program. All child care providers that participate in the program are now required to participate in Texas Rising Star program, beginning at the Entry Level designation. Once designated as Entry Level, the child care and early learning program will have a maximum of 24 months to attain star-level**

certification in Texas Rising Star. Entry Level programs are offered TA, resources, materials, and mentoring to support them in attaining Texas Rising Star certification. Texas Rising Star offers three levels of certification (Two-Star, Three-Star, and Four-Star) to encourage providers to attain progressively higher levels of quality. This data is included on CCR's Search Texas Child Care website and on the Texas Child Care Availability Portal.

CCR's Search Texas Child Care website includes provider's self-reported information regarding their national accreditation status.

- ii. ☐ Licensed non-CCDF providers. Describe the quality information:
- iii. ☒ License-exempt center-based CCDF providers. Describe the quality information: **Providers operated by the US DoD are required to meet high-quality standards established and monitored by DoD. Therefore, DoD-operated facilities automatically receive an initial Four-Star certification without a full on-site assessment.**
- iv. ☐ License-exempt FCC CCDF providers. Describe the quality information:
- v. ☐ License-exempt non-CCDF providers. Describe the quality information:
- vi. ☐ Relative child care providers. Describe the quality information:
- vii. ☐ Other. Describe:

#### 9.2.5 Aggregate data on serious injuries, deaths, and substantiated abuse

Lead Agencies must post aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year on the consumer education website. This aggregate data must include information about any child in the care of a provider eligible to receive CCDF, not just children receiving subsidies.

This aggregate information on serious injuries and deaths must be separated by category of care (e.g., centers, family child care homes, and in-home care) and licensing status (i.e., licensed or license-exempt) for all eligible CCDF child care providers in the State/Territory. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. Information must also include the total number of children in care by provider type and licensing status, so that families can better understand the data presented on serious injuries, deaths, and substantiated cases of abuse.

- a. Certify by checking below that the required elements are included in the Aggregate Data Report on serious incident data that have occurred in child care settings each year.
  - i. ☒ The total number of serious injuries of children in care by provider category and licensing status.
  - ii. ☒ The total number of deaths of children in care by provider category and licensing status.
  - iii. ☒ The total number of substantiated instances of child abuse in child care settings.
  - iv. ☒ The total number of children in care by provider category and licensing status.

- v. If any of the above elements are not included, describe: **CCR will begin publishing the number of children in care by provider category or licensing status on the Serious Injuries Report for FY24.**
- b. Certify by providing:
  - i. The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care and describe how the Lead Agency obtains the aggregate data from the entity: **CCR requires providers to report serious injuries and deaths of children occurring in regulated child care operations. CCR does not regulate license-exempt providers eligible for CCDF and therefore does not have reporting requirements for those providers. Regulated providers may report serious injuries or deaths of children:**

**By phone 24 hours a day to the Texas Abuse and Neglect Hotline (1-800-252-5400); or**  
**24 hours a day via the Texas Abuse and Neglect Hotline online reporting system.**

**If a report is made to the Texas Abuse and Neglect Hotline (online or by phone), DFPS, which manages the hotline, enters the report into. IMPACT routes reports related to child care operations to the licensing system, CLASS.**

**CCR is a division of the Texas HHSC and the HHSC Regulatory Services Division Analytics team currently supports CCR's data and reporting needs.**
  - ii. The definition of "substantiated child abuse" used by the Lead Agency for this requirement: **An allegation of abuse, neglect, or exploitation is substantiated if, based on the preponderance of evidence gathered during an investigation, the DFPS investigator concludes that the alleged abuse or neglect occurred. Abuse and neglect are defined in Texas Family Code §261.001.**
  - iii. The definition of "serious injury" used by the Lead Agency for this requirement: **Serious injury is defined as any physical injury to a child that requires medical treatment and resulted or may result in impairment to the child's overall health or well-being. This does not include:**

**Near fatal injuries;**  
**Injuries for which a child is evaluated by a professional as a precaution;**  
**Injuries for which first aid is administered at the operation, but no further treatment by a medical professional is warranted; or**  
**Medical events due to routine, ongoing medical issues, such as asthma or seizures.**

**Also see impairment:**  
**Impairment: In most instances, an impairment prevents the injured person from performing one or more of their usual and customary daily activities or makes the task of daily activities more difficult.**
- c. Provide the direct URL/website link to the page where the aggregate number of serious injuries, deaths, and substantiated child abuse, and the total number of children in care by



provider category and licensing status are posted:  
[https://childcare.hhs.texas.gov/Child\\_Care/Search\\_Texas\\_Child\\_Care/default.asp](https://childcare.hhs.texas.gov/Child_Care/Search_Texas_Child_Care/default.asp)  
<https://find.childcare.texas.gov/>

#### 9.2.6 Contact information on referrals to local child care resource and referral organizations

The Lead Agency consumer education website must include contact information on referrals to local CCR&R organizations.

- a. Does the consumer education website include contact information on referrals to local CCR&R organizations?
- ☒ Yes.
- ☐ No.
- ☐ Not applicable. The Lead Agency does not have local CCR&R organizations.
- b. Provide the direct URL/website link to this information: **TWC developed Texas Child Care Solutions (<https://texaschildcaresolutions.org/>), the purpose of which is to provide parents and child care providers access to resources and information to assist them in making informed choices to meet their child care and family needs. Texas Child Care Solutions connects parents with information on choosing quality child care, accessing financial assistance and how to contact local Workforce Solutions Offices to apply for child care assistance.**

The ECIA Workgroup supports a new website for Texas parents of young children (<https://earlychildhood.texas.gov/>). The goal of the website is to give parents of young children one place to get information about healthy child growth and development and about services available from the following state agencies:

TWC;  
TEA;  
DSHS;  
DFPS; and  
HHSC.

**During the plan period, TWC will lead the development of a new Eligibility Screener tool. The screener will allow parents to find out what public programs their child may be eligible for such as child subsidies, public school Pre-K, and HS.**

#### 9.2.7 Lead Agency contact information for parents

The Lead Agency consumer and provider education website must include information on how parents can contact the Lead Agency or its designee and other programs that can help the parent understand information included on the website.

- a. Does the website provide directions on how parents can contact the Lead Agency or its designee and other programs to help them understand information included on the website?
- ☒ Yes.

☐ No.

- b. Provide the direct URL/website link to this information: **Parents can contact their Board for assistance with understanding the information provided on the Texas Child Care Solutions website:** <http://texaschildcaresolutions.org/contact-us/>.

The following CCR web page for parents include a link to a list of local CCR offices:  
<https://www.hhs.texas.gov/services/safety/child-care/contact-child-care-regulation>.

The [earlychildhood.texas.gov](https://earlychildhood.texas.gov) website also provides contact information for parents that need more information: [https://earlychildhood.texas.gov/about\\_us.html](https://earlychildhood.texas.gov/about_us.html).

9.2.8 Posting sliding fee scale, co-payment amount, and policies for waiving co-payments

The consumer education website must include the sliding fee scale for parent co-payments, including the co-payment amount a family may expect to pay and policies for waiving co-payments.

- a. Does the Lead Agency certify that their consumer education website includes the sliding fee scale for parent co-payments, including the co-payment amount a family may expect to pay and policies for waiving co-payments?

☒ Yes.

☐ No.

- b. Provide the direct URL/website link to the sliding fee scale.  
<https://www.twc.texas.gov/sites/default/files/ccel/docs/fffy-2025-psoc-calculator-twc.xlsx>

### 9.3 Increasing Engagement and Access to Information

Lead Agencies must collect and disseminate information about the full range of child care services to promote parental choice to parents of children eligible for CCDF, the general public, and child care providers.

9.3.1 Information about CCDF availability and eligibility

Describe how the Lead Agency shares information with eligible parents, the general public, and child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible. The description should include, at a minimum, what is provided (e.g., written materials, the website, and direct communications) and what approaches are used to tailor information to parents, the general public, and child care providers. **Boards must promote informed child care choices by providing consumer education information to the following:**

**Parents who are eligible for CCS (child care scholarships for eligible children);**  
**Parents who are placed on a Board's waiting list;**  
**Parents who are no longer eligible for CCS; and**  
**Applicants who are not eligible for CCS.**

**Information is provided electronically through each Board's website.**

As required in CCS rule §809.15, Boards must ensure that consumer education information is provided through a Board's website and contains, at a minimum, the following:

Information about the Texas Information and Referral Network (2-1-1 Texas); and  
The website and telephone number for CCR so that parents can obtain health and safety requirements, including information on:

The prevention and control of infectious diseases (including immunizations);  
Building and physical premises safety;  
Minimum health and safety training appropriate to the provider setting; and  
The regulatory compliance history of child care providers.

A description of the full range of eligible child care providers; and  
A description of programs available in the LWDA relating to school readiness and quality rating systems, including:

Texas Rising Star provider criteria; and  
Integrated school readiness models, pursuant to Texas Education Code §29.160.

A list of child care providers that meet quality indicators, pursuant to Texas Government Code §2308.3171; and

A link to the website for the official statewide Child Care Availability Portal (<https://childcare.twc.texas.gov/find/welcome>).

9.3.2 Information about child care and other services available for parents

Does the Lead Agency certify that it provides information described in 9.3.1 for the following required programs?

- Temporary Assistance for Needy Families (TANF) program.
- Head Start and Early Head Start programs.
- Low Income Home Energy Assistance Program (LIHEAP)
- Supplemental Nutrition Assistance Program (SNAP).
- Women, Infants, and Children Program (WIC) program.
- Child and Adult Care Food Program (CACFP).
- Medicaid and Children's Health Insurance Program (CHIP).
- Programs carried out under IDEA Part B, Section 619 and Part C.

☒ Yes.

☐ No. If no, describe:

9.3.3 Consumer statement for parents receiving CCDF services

Lead Agencies must provide parents receiving CCDF services with a consumer statement in hard copy or electronically that contains general information about the CCDF program and specific information about the child care provider they select.

Please certify if the Lead Agency provides parents receiving CCDF services a consumer statement that contains the following 8 requirements:

1. Health and safety requirements met by the provider
2. Licensing or regulatory requirements met by the provider
3. Date the provider was last inspected
4. Any history of violations of these requirements
5. Any voluntary quality standards met by the provider
6. How CCDF subsidies are designed to promote equal access
7. How to submit a complaint through the hotline
8. How to contact a local resource and referral agency or other community-based organization to receive assistance in finding and enrolling in quality child care

Does the Lead Agency provide to families, either in hard copy or electronically, a consumer statement that contains the required information about the provider they have selected, including the eight required elements above?

☒ Yes.

☐ No. If no, describe:

#### 9.3.4 Informing families about best practices on child development

Describe how the Lead Agency makes information available to parents, providers, and the general public on research and best practices concerning children's development, including physical health and development, and information about successful parent and family engagement. At a minimum, the description should include what information is provided; how the information is provided; any distinct activities for sharing this information with parents, providers, the general public; and any partners in providing this information. **Parent education, provider information, and health and development information are all provided in the following websites:**

[https://texaschildcaresolutions.org/https://childcare.hhs.texas.gov/Child\\_Care/Search\\_Texas\\_Child\\_Care/default.aspxhttps://earlychildhood.texas.gov/](https://texaschildcaresolutions.org/https://childcare.hhs.texas.gov/Child_Care/Search_Texas_Child_Care/default.aspxhttps://earlychildhood.texas.gov/).

**There are also child care resources available on TWC's website at <https://www.twc.texas.gov/programs/child-care/for-parents>.**

#### 9.3.5 Unlimited parental access to their children

Does the Lead Agency have procedures to ensure that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds:

☒ Yes.

☐ No. If no, describe:

#### 9.3.6 Informing families about best practices in social and emotional health

Describe how the Lead Agency shares information with families, providers, and the general public regarding the social-emotional and behavioral and mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age: **Parent education, provider information, and health and development information are included in the following websites:**

<https://texaschildcaresolutions.org/>  
<https://childcare.hhs.texas.gov/Public/childcaresearch>  
<https://earlychildhood.texas.gov/>

**Additional child care resources are available on TWC's website at**  
<https://www.twc.texas.gov/programs/child-care/for-parents>.

#### 9.3.7 Policies on the prevention of the suspension and expulsion of children

- a. The Lead Agency must have policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds. Describe those policies and how those policies are shared with families, providers, and the general public: **Section 746.501 of the CCR Minimum Standards requires child care centers to develop written operational policies that must address the suspension and expulsion of children. Failing to demonstrate a written policy results in a Medium-High deficiency.**

Texas Rising Star assessments include two structural measures (met/not met) under the Program Administration ☐ Family Involvement category to assess Director/Parent/Teacher Collaboration Regarding Challenging Behavior:

- Program has a written policy/process for addressing challenging behaviors of children. The policy/process includes teacher and/or director having ongoing conversations with parents to express concerns and discuss strategies in addressing challenging behaviors. Conversations are framed around the objective of the program. Parents are kept informed of their child's progress.
- The director and teachers should be able to provide evidence that they are working together with the parents about decisions regarding the child's experience, which may include written reports for children and a parent communication log.

Ensuring that providers have policies to address challenging behaviors, specifically how the program determines what behaviors lead to suspension or expulsion from the program, and that parents are aware of those policies keeps families informed and holds programs accountable to follow their policies.

- b. Describe what policies, if any, the Lead Agency has to prevent the suspension and expulsion of school-age children from child or youth care settings receiving CCDF funds: **Section 744.501 of the CCR Minimum Standards require providers to develop written operational policies that must address the suspension and expulsion of children. Failing to demonstrate a written policy results in a Medium-High deficiency.**

Texas Rising Star assessments include two structural measures (met/not met) under the Program Administration ☐ Family Involvement category to assess Director/Parent/Teacher Collaboration Regarding Challenging Behavior:

- Program has a written policy/process for addressing challenging behaviors of children. The policy/process includes teacher and/or director having ongoing conversations with parents to express concerns and discuss strategies in addressing challenging behaviors. Conversations are framed around the objective of the program. Parents are kept informed of their child's progress.
- The director and teachers should be able to provide evidence that they are working together with the parents about decisions regarding the child's experience, which may include written reports for children and a parent communication log.

Ensuring that providers have policies to address challenging behaviors, specifically how the program determines what behaviors lead to suspension or expulsion from the program, and that parents are aware of those policies keeps families informed and holds programs accountable to follow their policies.

## 9.4 Providing Information on Developmental Screenings

Lead Agencies must provide information on developmental screenings to parents as part of the intake process for families participating in CCDF and to child care providers through training and education. This information must include:

- Existing resources and services that the State can make available in conducting developmental screenings and providing referrals to services when appropriate for children who receive child care assistance, including the coordinated use of the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under Title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C; and,
- A description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays.

Information on developmental screenings, as in other consumer education information, must be accessible for individuals with limited English proficiency and individuals with disabilities.

### 9.4.1 Developmental screenings

Does the Lead Agency collect and disseminate information on the following:

- a. Existing resources and services available for obtaining developmental screening for parents receiving CCDF, the general public, and child care providers.  
☒ Yes.  
☐ No. If no, describe:
- b. Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program—carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.)—and developmental screening services available under Part B, Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.).  
☒ Yes.

☐ No. If no, describe:

- c. Developmental screenings to parents receiving a subsidy as part of the intake process.

☒ Yes. If yes, include the information provided, ways it is provided, and any partners in this work: **As required by CCS rule §809.15 and described in Section D-1004.a of the CCS Guide, Boards are required to ensure that parents qualifying for a subsidy receive information on developmental screenings as part of the intake process. Boards have the flexibility to choose methods for disseminating developmental screening information to parents, including providing information through Board websites and providing a link to the Early Childhood Texas Developmental Screenings page.**

☐ No. If no, describe:

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

☒ Yes.

☐ No. If no, describe:

## 10 Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. As stewards of federal funds, Lead Agencies must ensure strong and effective internal controls to prevent fraud and maintain continuity of services to meet the needs of children and families. In order to operate and maintain a strong CCDF program, regular evaluation of the program's internal controls as well as comprehensive training for all entities involved in the administration of the program are imperative. In this section, Lead Agencies will describe their internal controls and how those internal controls effectively ensure integrity and accountability. These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors and should apply to all CCDF funds.

### 10.1 Effective Internal Controls

Lead Agencies must ensure the integrity of the use of CCDF funds through effective fiscal management and must ensure that financial practices are in place. Lead Agencies must have effective fiscal management practices in place for all CCDF expenditures.

#### 10.1.1 Organizational structure to support integrity and internal controls

Describe how the Lead Agency's organizational structure ensures the oversight and implementation of effective internal controls that promote and support program integrity and accountability. Describe: **Assignment of authority and responsibilities related to program integrity**  
**The Texas State Legislature designated TWC as the lead agency for CCDF in 1995 when the agency was formed. Included in that legislation was also the current structure for the administration of programs by 28 Boards. TWC provides oversight of the Boards, who contract out service delivery, including the management of CCS.**

**TWC's Commission has policy-making authority for the agency, including the child care program. New and changed policies are considered by the Commission in open public meetings where**

commenters have opportunity to weigh in.

TWC's ED assigns the responsibility of CCDF Administrator to the Division Director of TWC's CC&EL Division. CC&EL manages the development and execution of the state plan, administrative rules, and program guidance pursuant to policies set by the Commission. CC&EL, in collaboration with other TWC divisions, oversees the administration of CCDF by Boards and other subrecipients. CC&EL also provides guidance and monitors the activities of sister agencies carrying out portions of the CCDF program.

#### Delegation of duties

In addition to the CC&EL Division, several other Divisions within TWC contribute to the implementation of CCDF. The CC&EL Division's Grants & Contracts team develops and manages contracts administered by other non-Board entities. The Workforce Board Grants department is responsible for developing and managing contracts for CCDF funds administered by the 28 Boards and for overseeing contractual compliance and use of allocated funds. The Business Operations Division oversight of procurement, contracting and grant services to ensure compliance with federal and state requirements.

The Division of Information, Innovation and Insight (I|3) Division manages and analyzes TWC's data and calculates Board performance, including for child care contracted performance measures. The Finance Division oversees annual allocations, and Board and grantee financial reporting. FDCM Division is responsible for detecting and deterring fraud, waste, abuse, and to monitor the effectiveness, efficiency and integrity of TWC programs, including CCS.

#### Coordination of activities

CC&EL has standing meetings with all internal and external groups involved in the administration or oversight of CCDF funding. For example, CC&EL coordinates with the I|3 Division to produce and provide data on the CCS program, publishing data on TWC's website. This includes monthly meetings of the ECIA Workgroup, which is comprised of representatives from TWC, TEA, HHSC, and DSHS.

#### Communication between fiscal and program staff

CC&EL staff regularly meet with Finance (at least monthly) and Workforce Board Contracts (weekly) staff. CC&EL coordinates with TWC's Finance Division on the allocation of CCDF funds to the 28 Boards. Finance produces monthly expenditure reports that are provided to CC&EL and to the Workforce Board Grants Department. CC&EL meets monthly with Workforce Board Grants to review expenditure information for each of the 28 Boards, for the CCS program in addition to quality improvement activities.

#### Segregation of duties

CCDF oversight duties are distributed across multiple TWC Divisions:

**CC&EL Division:** programmatic oversight of CCDF, including policy guidance, grant and contract oversight of state quality initiatives, and QRIS implementation.

**Finance Division:** fiscal oversight of CCDF, including the development of annual Board CCDF allocations, and producing monthly reports on the expenditure of CCDF funds.



**Workforce Division’s Board Grants Department:** oversight of the Board’s administration of CCDF, including any corrective actions, or deobligation/reallocation of funds.

**Business Operations Division, Procurement and Contract Services:** oversight of procurement, contracting and grant services to ensure compliance with federal and state requirements.  
**FDCM:** monitoring and fraud detection.

**I|3 Division:** data and performance management, including producing data on Boards’ monthly performance, and publishing data on the CCS program, which is posted on TWC’s website.

At the Board level, services are contracted out and oversight is provided by Boards’ fiscal and monitoring staff. Boards hold their contractors accountable for contract compliance, including ensuring allowable use of funds. Improper payments that result from contractor error must be repaid by the contractor with nonfederal funds.

**Establishment of checks and balances to identify potential fraud risks**  
TWC’s FDCM Division and SRM department monitor all Board child care operations and use risk assessment and fraud detection tools to determine specific areas of Board operations that may require additional scrutiny.

At the local level, Boards ensure contractors have quality control processes in place to provide secondary review/verification of eligibility determinations and payments. Boards also employ local monitors that conduct case reviews at the service contractor level.

TWC’s Office of Internal Audit also periodically reviews state level child care operations and related state level activities. CCDF program activities are subject to audit by the State Auditor’s Office.

In December 2024, TWC will implement Integrity Central, a new automated tool to proactively identify potential fraud and operational anomalies. Integrity Central uses data from TWC’s new case management system, TX3C, and algorithm-based indicators to flag areas of concern. Boards will use the data to identify areas for further investigation and potential fraud fact-finding. TWC is considering the integration of other data sources such as UI data, to enhance Integrity Central’s capabilities.

Include the following elements in your description:

1. Assignment of authority and responsibilities related to program integrity.
2. Delegation of duties.
3. Coordination of activities.
4. Communication between fiscal and program staff.
5. Segregation of duties.
6. Establishment of checks and balances to identify potential fraud risks.
7. Other activities that support program integrity.

#### 10.1.2 Fiscal management practices

Describe how the Lead Agency ensures effective fiscal management practices for all CCDF expenditures, including:

- a. **Fiscal oversight of CCDF funds, including grants and contracts. Describe: TWC's Finance department oversees the allocation of CCDF funds to Boards. Finance determines the allocation amount for each LWDA and provides an automated cash draw system to allow Boards to access allotted funds as needed and to report expenditures. The system does not allow Boards to spend more than the amount allocated or budgeted. Finance also provides the resources necessary for completing the ACF-696 Financial Report.**

The same cash draw system is also utilized by statewide initiative subrecipients. Grant managers on the CC&EL Grants and Contracts team oversee these grants in partnership with CC&EL program staff, monitoring grant activities and expenditures and meeting monthly to jointly review. For service contracts, the Business Operations division contract managers monitor performance in partnership with CC&EL staff and verify contract deliverables are met prior to authorizing invoice payment.

SRM tests fiscal controls, cash management, and financial monitoring at all 28 Boards on an annual basis. SRM includes testing of child care expenditures at each Board. SRM also conducts targeted reviews of statewide initiative subrecipients based on an annual risk assessment of all grantees.

- b. **Tracking systems that ensure reasonable and allowable costs and allow for tracing of funds to a level of expenditure adequate to establish that such funds have not been used in violation of the provision of this part. Describe: During the process of developing solicitations, grant agreements, and service contracts, TWC staff reviews the budget categories and amounts to determine reasonableness of the costs and compliance with allowable costs. TWC Finance and Legal Counsel staff offer guidance and clarification as needed.**

For contractors, TWC's Enterprise Contracting and Procurement System is used by staff to track all statewide initiative contracts, including their deliverables, invoices, and payments. TWC staff, including from the contracting unit, reviews submitted invoices before payment to ensure compliance with the approved budget. Purchase Orders for the contracts are reviewed by multiple approvers, including by Finance staff, to ensure payments do not exceed available funds, and separation of duties among contract developers, contract managers, program staff reviewing deliverables, budget analysts, and accounts payable staff.

For subrecipients, in addition to tracking the agreement deliverables and financial information, TWC's Cash Draw and Expenditure Reporting system allows subrecipients to draw down grant funds and to report expenditures. Subrecipients are required to submit budget adjustment requests for TWC staff review to determine allowability and alignment with the initiative. The Cash Draw and Expenditure Reporting system limits cash draws to the funds available. SRM includes testing of child care expenditures at each Board to ensure that expenditures are for allowable program expenses. Based on risk assessment, SRM also includes conducting audits of subrecipients' grant awards.

- c. **Processes and procedures to prepare and submit required state and federal fiscal**

reporting. Describe: **TWC's Finance Division prepares all required fiscal reports. The financial reports are prepared using information submitted by the 28 Local Workforce Development Boards on their CCDF expenditures, as well as other CCDF expenditures by TWC and other grantees and contractors.**

d. Other. Describe:

#### 10.1.3 Effectiveness of fiscal management practices

Describe how the Lead Agency knows there are effective fiscal management practices in place for all CCDF expenditures, including:

- a. How the Lead Agency defines effective fiscal management practices. Describe: **It is TWC's policy that effective control and accountability must be maintained for all funds, property, and other assets. Assets must be adequately safeguarded and used solely for authorized purposes. Internal controls must provide reasonable assurance of compliance with grant requirements, reliable reporting, and effective, efficient operations. The TWC Financial Manual for Grants and Contracts states that to be allowable under a federal or state award, a cost must meet the general allowability criteria established by the Uniform Guidance, and/or the Texas Grant Management Standards, as applicable.**
- b. How the Lead Agency measures and tracks results of their fiscal management practices. Describe: **SRM tests fiscal controls, cash management, and financial monitoring at all 28 Boards on an annual basis. SRM includes testing of child care expenditures at each Board. SRM also conducts targeted reviews of statewide initiative subrecipients based on an annual risk assessment of all grantees.**

**TWC's Office of Internal Audit annually conducts performance audits and non-audit services as well as follow-up reviews.**

**The Office of Internal Audit allocates its resources in a manner that is consistent with TWC's mission and goals. To support TWC's mission, audit coverage is considered across the agency. The audit plan is designed to provide coverage of key business processes over a reasonable period of time, depending on staff capacity.**

**TWC's annual plans and reports are posted on its website.**

**TWC is also included in the Texas State Auditor's Office's Statewide Single Audit. The Texas Comptroller's Fiscal Management Division conducts post-payment audits of agencies' expenditures to ensure compliance with applicable laws, rules, and policies.**

- c. How the results inform implementation. Describe: **TWC is dedicated to continuous improvement. Results from audits are used to identify weaknesses and improve policies and fiscal management practices to ensure fiscal responsibility of state and federal funds. Workforce Board Grants also provides technical assistance to Boards on fiscal management.**
- d. Other. Describe:

#### 10.1.4 Identifying risk

Describe the processes the Lead Agency uses to identify risk in the CCDF program including:

- a. Each process used by the Lead Agency to identify risk (including entities responsible for implementing each process). Describe: **SRM prepares a risk assessment of the 28 Boards at the beginning of every fiscal year that covers the CCDF program. SRM considers the previous year's fiscal and program monitoring review in scoring the risk. Similarly, SRM also develops an annual monitoring plan for statewide initiative grantees based on a risk assessment of agency statewide grantees.**

**TWC's Internal Audit Division also conducts annual risk assessments to determine its areas of focus. Internal Audit staff have full, free, and unrestricted access to all agency records, property, and personnel. Recently, the Internal Audit Division conducted a review of TWC's implementation of ARPA Stabilization funding administered through the CCRF. TWC's Risk and Security Management department also coordinates with agency Divisions to complete an annual risk assessment that focuses on continuity of operations, data privacy and security.**

- b. The frequency of each risk assessment. Describe: **Annually.**
- c. How the Lead Agency uses risk assessment results to inform program improvement. Describe: **SRM identifies high risk areas for monitoring and any issues noted in the monitoring review are corrected by Audit Resolution. CC&EL reviews all SRM reports to determine if additional TA is needed for the Board in their oversight of CCS. CC&EL also reviews child care Internal Audit reports to determine whether additional program modifications are needed.**
- d. How the Lead Agency knows that the risk assessment processes utilized are effective. Describe: **TWC's SRM annual monitoring reviews routinely find issues that require remediation. Issues identified are corrected by Audit Resolution and/or TA provided by the CC&EL TA team.**
- e. Other. Describe:

#### 10.1.5 Processes to train about CCDF requirements and program integrity

Describe the processes the Lead Agency uses to train staff of the Lead Agency and other agencies engaged in the administration of CCDF, and child care providers about program requirements and integrity.

- a. Describe how the Lead Agency ensures that all staff who administer the CCDF program (including through MOUs, grants, and contracts) are informed and trained regarding program requirements and integrity.
  - i. Describe the training provided to staff members around CCDF program requirements and program integrity: **TWC issues WD Letter policy guidance, FDCM policy guidance letters, TWC's CCS Guide updates, and TA Bulletins. These directives are sent to all Boards, and to individuals that subscribe to TWC's GovDelivery service.**

**FDCM maintains a SharePoint library of information that Boards use to oversee and identify potential fraud, waste, and abuse. FDCM posts training materials and desk aids on child care fraud deterrence and compliance.**

TWC provides Boards and Board contractors with training through on-site instruction, webinars, desk aids, TA Bulletins, conferences, and regional training sessions. TWC's Child Care TA department conducts regular visits (virtual and in person) to consult with Boards on program requirements and policy implementation. Boards also invite TWC to present and participate in their quarterly Child Care Network and Quality Assurance Network meetings.

CC&EL provides new grantees/contractors with a detailed orientation to review the terms and conditions for administering CCDF funds. CC&EL meets monthly with grantees/contractors to review grant/contract deliverables and ensure that activities align to CCDF program requirements.

- ii. Describe how staff training is evaluated for effectiveness: **By testing compliance with CCDF rules at all 28 Boards, SRM ensures that the Boards understand program requirements. If any issues are noted, the TWC can provide TA. TWC solicits feedback from Boards through the quarterly Child Care Network meeting, and Quality Assurance Network Meeting.**
  - iii. Describe how the Lead Agency uses program integrity data (e.g., error rate results, risk assessment data) to inform ongoing staff training needs: **If any issues are noted, the lead agency will provide TA to the Board to correct the issue and ensure Board and contractor staff are fully trained on the applicable policies. TWC will also consider Board feedback on policies and adjust practices where needed to ensure program integrity.**
- b. Describe how the Lead Agency ensures all providers for children receiving CCDF funds are informed and trained regarding CCDF program requirements and program integrity:
- i. Describe the training for providers around CCDF program requirements and program integrity: **Pursuant to TWC's CCS Guide section F-103, Boards must ensure that processes are in place to train eligible child care providers about CCDF program requirements and integrity.**

Boards may accomplish this by providing an orientation to new providers, informing providers about the requirements included in the provider agreement, and offering training to child care providers. Some examples include the following:

Annual trainings;  
Tip sheets for new providers;  
Provider handbooks; and  
Periodic informational sessions for current and new providers.

TWC's CCS Guide section F-201 requires Boards to ensure that child care providers are given written notice of and agree to their responsibilities, reporting requirements, and requirements for reimbursement, as well as complete any required Board training prior to enrolling a child.

- ii. Describe how provider training is evaluated for effectiveness: **Boards and Board contractors conduct provider monitoring to ensure compliance with child care policies and procedures. SRM annually monitors Boards and their local providers**

to ensure that the funds are spent in accordance with applicable federal and state statutes, regulations, and rules.

- iii. Describe how the Lead Agency uses program integrity data (e.g., error rate results, risk assessment data) to inform ongoing provider training needs: **If any issues are noted, the lead agency will provide TA to the Board to correct the issue and ensure Board and contractor staff are fully trained on the applicable policies. TWC will consider Board feedback on policies and adjust practices where needed to ensure program integrity.**

#### 10.1.6 Evaluate internal control activities

Describe how the Lead Agency uses the following to regularly evaluate the effectiveness of Lead Agency internal control activities for all CCDF expenditures.

- a. Error rate review triennial report results (if applicable). Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls: **All results of the triennial error rate review are shared with each Board. Each Board receives a letter with the results of the review. Any overpayments identified are collected from the Boards by the lead agency. TA is provided to the Boards with improper payments and policy changes are made if necessary to minimize future errors.**
- b. Audit results. Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls: **The lead agency conducts annual monitoring of all 28 Boards for CCDF funds and targeted reviews of other subrecipients. The lead agency conducts financial testing of CCDF expenditures and looks at program eligibility. The results are issued in a written monitoring report that is issued to each Board/subrecipient and our federal partners. Any issues are resolved through TWC's Audit Resolution section and TA and training is provided by CC&EL, if needed.**
- c. Other. Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls:

#### 10.1.7 Identified weaknesses in internal controls

Has the Lead Agency or other entity identified any weaknesses in its internal controls?

- a. ☐ No. If no, describe when and how it was most recently determined that there were no weaknesses in the Lead Agency's internal controls.
- b. ☒ Yes. If yes, what were the indicators? How did you use the information to strengthen your internal controls? **TWC's Internal Audit Division reviewed the ARPA Stabilization grant which TWC implemented through the CCRF. Based on this review, TWC enhanced its internal controls.**

**Finance was requested to conduct an independent quality control review to ensure formulas were applied consistently to calculate award amounts.**

**The process for updating the award amount in the CCRF system was automated, which streamlines the process and reduces the potential for errors and incorrect payments.**

Procedures effective June 2022 required CC&EL to submit a mailing address change to Vendor Services in Finance, along with a screen shot of the provider's updated information in HHS CCR database to ensure the correct mailing addresses are keyed into TINS. Prior to this change, mailing address changes were updated in the CCRF system based on monthly updates from HHS CCR and accepted or rejected by CC&EL staff.

## 10.2 Fraud Investigation, Payment Recovery, and Sanctions

Lead Agencies must have the necessary controls to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process and other review processes, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition.

### 10.2.1 Strategies used to identify and prevent program violations

Check the activities the Lead Agency employs to ensure program integrity, and for each checked activity, identify what type of program violations the activity addresses, describe the activity and the results of these activities based on the most recent analysis.

- a. **[x]** Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

- i. **[x]** Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **To identify parents that may be over income or no longer participating in any work activity, TWC matches child care program data with data from the state's UI program and state wage records. The data match identifies parents receiving child care who have filed for UI. Boards receive reports which prompt case workers to seek additional information about a parent's status. If the parent is determined to no longer be participating in any work, education, or training activity at any level, they are placed on a three-month activity interruption/job search period. If the parent is determined to be participating in an appropriate work, training, or education activity, no action is taken by the Board.**

The UI data match also looks at quarterly wage records submitted by employers, and flags parents that may be over 85 percent of SMI. Boards receive reports that prompt case workers to seek additional information about a parent's employment income. If the income is from an irregular fluctuation (such as extra hours worked during a seasonal period), no action is taken. If the Board determines that the parent exceeds the income eligibility threshold, it will take action to end CCS by providing appropriate notice to the parent and provider.

If a Board identifies potential fraud while reviewing a parent's employment status, the Board initiates fraud fact-finding in accordance with FDCM Letter 01-24 and subsequent issuances. If fraud is substantiated, the parent is subject to

recoupment of subsidies provided when they were not eligible due to the intentional program violation.

**Results:** Reports are sent to each of the 28 Board areas who then research each case and reach out to the client to inquire about the report and work to resolve the issue. These activities have increased accountability and integrity by ensuring CCDF is only expended on eligible families.

#### **Child Care and UI Early Warning Report**

**Purpose and Discussion:** The Child Care and UI Early Warning Report is a tool to assist Boards in the oversight of CCDF funds. SRM sends this report to Boards twice a month, normally on the first and third Wednesdays of each month. The report seeks to identify and assess customers who may have experienced a non-temporary change in work activities because they filed a UI claim advising TWC that they are not working. The objective is to prevent child care overpayments by identifying customers before their three-month job search period expires.

Customers identified in the report are not necessarily ineligible for services. Potential child care eligibility issues are resolved by verifying customers' employment or training status using current local procedures. This also provides an opportunity for child care contractors to verify that customers have reported their UI benefits income for child care eligibility.

**Results:** Boards connect unemployed parents with other workforce services. These activities help parents re-engage in work or education so they can continue their eligibility for subsidized child care beyond the three months of continued care. Identifying and assisting parents who become unemployed helps to ensure that limited funds are used to serve only eligible families and to promote their self-sufficiency.

#### **Child Care Income Report**

**Purpose and Discussion:** The Child Care Income Report is a tool to assist Boards in the oversight of CCDF funds. SRM sends this report to Boards quarterly. The report seeks to identify and assess customers who are potentially ineligible due to parental/custodial changes or underreporting of income. A customer identified in the report is not necessarily ineligible for services. The issue of eligibility can be established only after a thorough review of the customer's case file and may involve contacting the customer for further information.

**Results:** Boards review the report and contact clients to review their reported income to identify if family income exceeds 85 percent SMI. If family income has increased over 85 percent of SMI while allowing for temporary and irregular fluctuations, the client's child care is ended. These activities ensure that CCS are only paid for eligible children.

- ii. **[x] Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: TWC matches child care program data with data from the state's UI program and state wage records. Program**



violations identified may be intentional or unintentional.

**Results:** Reports are sent to each of the 28 Board areas who then research each case and reach out to the client to inquire about the report and work to resolve the issue. These activities have increased accountability and integrity by ensuring CCDF is only expended on eligible families.

- iii. **[x]** Agency errors. Describe the activities, the results of these activities, and how they inform better practice:: **TWC matches Social Security Numbers (SSN) voluntarily provided for children and families against the Social Security Administration's records to identify mismatches, which are often due to data entry errors.**

**Results:** TWC shares the SSN Mismatch Report with Boards for follow up. Boards then communicate with the parent if needed, to correct and data errors.

#### **Child Care Cases/Clients with the SSN Report**

The child care cases with the Same SSN Report lists parent/guardian duplicated SSNs that have a payment in more than one workforce area in the same service month. The child care clients with the Same SSN Report lists children's duplicated SSNs that have a payment in more than one workforce area in the same service month. Note: An SSN is not required but may be voluntarily provided by the parent.

**Results:** Boards review the reports and contact clients to determine if the SSN provided is correct. Boards will take action to resolve and correct data entry errors and may initiate fact-finding for potential fraud if appropriate. These activities help ensure CCS are only paid for eligible children and increases integrity of program data.

- b. **[x]** Run system reports that flag errors (include types).
  - i. **[x]** Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **TWC provides Boards Child Care Fraud Detection Report Tools to help Boards detect potential fraud.**

Boards use the new TX3C Integrity Central application to proactively identify key indicators that suggest potential program violations of TWC's attendance tracking policies. Although TWC policy requires Boards to reimburse providers based on enrollment authorization (except for relative providers), anomalies in attendance tracking can reveal both intentional and unintentional program violations related to parents' requirements to meet TWC attendance standards. Investigation of Integrity Central indicators may result in fact-finding by the Board. If fraud is substantiated, the provider or parent responsible is subject to recoupment of funds authorized based on fraudulent information.

**Results:** These reports have helped Texas identify and investigate potential fraud and fraud detection activities have also led to the substantiation of fraud. From September 1, 2022, to the end of State Fiscal Year 2023 (August 31, 2023), Texas'

28 Boards opened 704 cases for fact-finding and closed 472. Of the 472 cases closed, \$1,101,122 in overpayments were established.

- ii. **[x]** Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **Boards use the new TX3C Integrity Central application to proactively identify key indicators that suggest potential program violations of TWC's attendance tracking policies. Although TWC policy requires Boards to reimburse providers based on enrollment authorization (except for relative providers), anomalies in attendance tracking can reveal both intentional and unintentional program violations related to parents' requirements to meet TWC attendance standards. Investigation of Integrity Central indicators may result in fact-finding by the Board. If fraud is substantiated, the provider or parent responsible is subject to recoupment of funds authorized based on fraudulent information.**

**Results:** These reports have helped Texas identify and investigate potential unintentional program violations and identify areas where parent or provider communication can be improved.

- iii. **[x]** Agency errors. Describe the activities, the results of these activities, and how they inform better practice: **Board staff will review the following reports from TX3C to identify and correct internal errors:**

#### **Children with Multiple Providers**

This report lists the children who have multiple schedules with different providers as of a specified effective date.

#### **WPI Override Report**

There are certain events that the system will either warn about, prevent entirely, or ignore, depending on the WPI (Warn, Prevent, Ignore) settings. If an event is set to Warn and Log, the operator can override the warning, but that override will be logged in the system. This report displays overrides that occurred during the specified period.

#### **Hours Claimed Discrepancy**

This report lists clients who claimed too many or too few hours over or under the authorized number during the specified period. If the discrepancy is greater than the limit specified in the region's Hours Claimed Discrepancy setting, it will be shown on this report. Optionally, the report can be limited to specific workers who approved the payments.

#### **Manual Payment Details**

This report provides details for payments that were paid between the specified Start and End Dates. The following is displayed in red: Overridden payments, split week from a previous payment, payment adjustments, additional payments, and payment capped at RMC.

#### **Payment Details**

This report returns payment detail information for paid payments that were made

during the date range specified. The following are displayed in red: Overridden payments, split week from a previous payment, payment adjustments, and additional payments.

#### Payment Override

This report returns a list of overridden payments where the date of the override falls between the start and end dates specified. It shows both the operator who originated the payment and the one who overrode it.

#### Payment Summary

This report returns summary information for payments that were paid during the date range specified. The following are displayed in red: overridden payments, split week from a previous payment, payment adjustments, and additional payments.

- c. **[x]** Review enrollment documents and attendance or billing records.

- i. **[x]** Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **Boards ensure that attendance is reviewed with each billing cycle. Boards also ensure that staff members conduct quality assurance reviews of enrollment documents and billing records. Records are also reviewed by Boards' independent audit providers and SRM staff.**

**Results:** If local or independent monitoring activities discover any issues, Boards investigate and resolve the issues by reaching out to the client or completing additional reviews based on identified issues. This may involve a fraud investigation. Additionally, when SRM staff complete monitoring activities, findings are relayed to the Board for further training and any identified improper payments are recovered by TWC. These activities help ensure that CCS are only paid for eligible children, payments are accurate, and help; to increase integrity of program data.

- ii. **[x]** Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **Boards ensure that attendance is reviewed with each billing cycle. Boards also ensure that staff members conduct quality assurance reviews of enrollment documents and billing records. Records are also reviewed by Boards' independent audit providers and SRM staff.**

**Results:** If local or independent monitoring activities discover any issues, Boards investigate and resolve the issues by reaching out to the client or completing additional reviews based on identified issues. This may involve a fraud investigation. Additionally, when SRM staff complete monitoring activities, findings are relayed to the Board for further training and any identified improper payments are recovered by TWC. These activities help ensure CCS are only paid for eligible children, payments are accurate, and help to increase integrity of program data.

- iii. **[x]** Agency errors. Describe the activities, the results of these activities, and how they inform better practice: **Boards ensure that attendance is reviewed with each billing cycle. Boards also ensure that staff members conduct quality assurance**

reviews of enrollment documents and billing records. Records are also reviewed by Boards' independent audit providers and SRM staff.

**Results:** If local or independent monitoring activities discover any issues, Boards investigate and resolve the issues by reaching out to the client or completing additional reviews based on identified issues. This may involve a fraud investigation. Additionally, when SRM staff complete monitoring activities, findings are relayed to the Board for further training and any identified improper payments are recovered by TWC. These activities help ensure CCS are only paid for eligible children, payments are accurate, and help to increase integrity of program data.

d. **[x]** Conduct supervisory staff reviews or quality assurance reviews.

- i. **[x]** Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **Boards ensure that Board or contractor staff conducts quality assurance reviews before eligibility determination, in response to risks identified through reports or other means and as random spot checks.**

**Results:** If issues are discovered, Board's review with staff and resolve issues through internal processes or by contacting the client for additional information before eligibility can be determined. These activities help ensure CCS are only paid for eligible children and that payments are accurate.

- ii. **[x]** Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **Boards ensure that Board or contractor staff conducts quality assurance reviews before eligibility determination, in response to risks identified through reports or other means and as random spot checks.**

**Results:** If issues are discovered, Board's review with staff and resolve issues through internal processes or by contacting the client for additional information before eligibility can be determined. These activities help ensure CCS are only paid for eligible children and that payments are accurate.

- iii. **[x]** Agency errors. Describe the activities, the results of these activities, and how they inform better practice: **Boards ensure that Board or contractor staff conducts quality assurance reviews before eligibility determination, in response to risks identified through reports or other means and as random spot checks.**

**Results:** If issues are discovered, Board's review with staff and resolve issues through internal processes or by contacting the client for additional information before eligibility can be determined. These activities help ensure CCS are only paid for eligible children and that payments are accurate.

e. **[x]** Audit provider records.

- i. **[x]** Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **SRM conducts ACF Improper Payment testing every three years by looking at provider attendance records,**

**provider billing, and ensuring that the provider is licensed and not on a corrective action plan.**

- ii. **[x] Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: SRM conducts ACF Improper Payment testing every three years by looking at provider attendance records, provider billing, and ensuring that the provider is licensed and not on a corrective action plan.**
  - iii. **[x] Agency errors. Describe the activities, the results of these activities, and how they inform better practice: SRM conducts ACF Improper Payment testing every three years by looking at provider attendance records, provider billing, and ensuring that the provider is licensed and not on a corrective action plan.**
- f. **[x] Train staff on policy and/or audits.**
- i. **[x] Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: TWC provides training and TA on program policies. Boards ensure that Board and contractor staff receive training locally and/or participate in TWC training and TA. TWC and the Boards also participate in a statewide Quality Assurance Network that meets quarterly to receive training, share best practices, and learn about quality assurance issues.**

**Results: Training and TA activities help to increase accountability at the local level which in turn increases the integrity of the child care program by preventing staff errors, ensuring that funds are only expended upon eligible children, and that payment amounts are accurate.**

- ii. **[x] Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: TWC provides training and TA on program policies. Additionally, Boards ensure that Board and contractor staff receive training locally and/or participate in TWC training and TA. TWC and the Boards also participate in a statewide Quality Assurance Network that meets quarterly to receive training, share best practices, and learn about quality assurance issues.**

**Results: Training and TA activities help to increase accountability at the local level which in turn increases the integrity of the child care program by preventing staff errors, ensuring that funds are only expended upon eligible children, and that payment amounts are accurate.**

- iii. **[x] Agency errors. Describe the activities, the results of these activities, and how they inform better practice: TWC provides training and TA on program policies. Additionally, Boards ensure that Board and contractor staff receive training locally and/or participate in TWC training and technical assistance. TWC and the Boards also participate in a statewide Quality Assurance Network that meets quarterly to receive training, share best practices, and learn about quality assurance issues.**

**Results: Training and TA activities help to increase accountability at the local level which in turn increases the integrity of the child care program by preventing staff errors, ensuring that funds are only expended upon eligible children and that**

**payment amounts are accurate.**

- g. ☐ Other. Describe the activity(ies):
  - i. ☐ Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice:
  - ii. ☐ Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice:
  - iii. ☐ Agency errors. Describe the activities, the results of these activities, and how they inform better practice:

#### 10.2.2 Identification and recovery of misspent funds

Lead Agencies must identify and recover misspent funds that are a result of fraud, and they have the option to recover any misspent funds that are a result of unintentional program violations or agency errors.

- a. Identify which agency is responsible for pursuing fraud and overpayments (e.g., State Office of the Inspector General, State Attorney): **TWC ensures investigation of fraud allegations is conducted. For recovery of improper payments from parents or providers are managed by the Boards. After a debt is final with no appeals or appeals have exhausted, the Board notifies TWC to place a warrant hold on debtor's account with the State of Texas Comptroller.**
- b. Check and describe all activities, including the results of such activity, that the Lead Agency uses to investigate and recover improper payments due to fraud. Consider in your response potential fraud committed by providers, clients, staff, vendors, and contractors. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Activities can include, but are not limited to, the following:
  - i. ☒ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis: **If a repayment plan is in place, and a payment is missed with a current amount due of \$100 or more, Boards wait 30 days and send final debt to TWC Collections for a warrant hold on the debtor's account with the State of Texas Comptroller.**
  - ii. ☒ Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities and the results of these activities based on the most recent analysis: **TWC's Office of Investigations coordinates with local law enforcement agencies and refers substantiated cases of fraud for prosecution.**

**Results: From September 1, 2022, to the end of SFY23 (August 31, 2023), Texas' 28 Boards opened 704 cases for fact-finding and closed 472. Of the 472 cases closed, \$1,101,122 in overpayments were established.**

- iii. ☒ Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: **TWC and Board staff use the Program Integrity Reporting and Tracking System (PIRTS) to manage repayment**

plans due to fraud.

**Results:** These activities help track fraud investigations at the local level and recover any improper payments which increases the accountability and integrity in the child care program.

**From September 1, 2022, to the end of State Fiscal Year 2023 (August 31, 2023), Texas' 28 Boards opened 704 cases for fact-finding and closed 472. Of the 472 cases closed, \$1,101,122 in overpayments were established.**

- iv. ☐ Reduce payments in subsequent months. Describe the activities and the results of these activities based on the most recent analysis:
- v. ☐ Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis:
- vi. ☐ Recover through other means. Describe the activities and the results of these activities based on the most recent analysis:
- vii. ☒ Establish a unit to investigate and collect improper payments and describe the composition of the unit. Describe the activities and the results of these activities based on the most recent analysis: **TWC's Office of Investigations investigates and prosecutes potential fraud and assists the Boards with fact-finding efforts. Specific guidance on reporting and fact-finding fraud is addressed in WD Letter 21-16, Change 2, issued October 10, 2019, entitled Requirements for Reporting and Fact-Finding for Suspected Fraud, Waste, Theft, Program Abuse Cases, and Recovery of Improper Payments-Update. TWC's Office of Investigations has developed a Fact-Finder's Desk Aid to provide Boards with a framework for determining fraud.**

**From September 1, 2022, to the end of State Fiscal Year 2023 (August 31, 2023), Texas' 28 Boards opened 704 cases for fact-finding and closed 472. Of the 472 cases closed, \$1,101,122 in overpayments were established.**

- viii. ☐ Other. Describe the activities and the results of these activities:
- c. Does the Lead Agency investigate and recover improper payments due to unintentional program violations?

☐ No.

☒ Yes.

If yes, check and describe below any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity.

- i. ☐ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis:
- ii. ☐ Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities

and the results of these activities based on the most recent analysis:

- iii. ☒ Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: **TWC and Board staff use PIRTS to manage repayment plans due to administrative error.**

**Results: As described in Section 8.1.6.b.iii, from September 1, 2022, to the end of SFY23 (August 31, 2023), Texas' 28 Boards opened 704 cases for fact-finding and closed 472. Of the 472 cases closed, \$1,101,122 in overpayments were established.**

- iv. ☒ Reduce payments in subsequent months. Describe the activities and the results of these activities based on the most recent analysis: **TWC's child care case management system allows Boards to correct some administrative errors and overpayments within the system and automatically adjusts future reimbursement payments accordingly.**
- v. ☐ Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis:
- vi. ☐ Recover through other means. Describe the activities and the results of these activities based on the most recent analysis:
- vii. ☒ Establish a unit to investigate and collect improper payments and describe the composition of the unit. Describe the activities and the results of these activities based on the most recent analysis: **As described in Section 8.1.6.c.vii, TWC's Office of Investigations assists Boards with fact-finding efforts and repayment collection for improper payments.**
- viii. ☐ Other. Describe the activities and the results of these activities:

- d. Does the Lead Agency investigate and recover improper payments due to agency errors?

☐ No.

☒ Yes.

If yes, check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

- i. ☐ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis:
- ii. ☐ Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities and the results of these activities based on the most recent analysis:
- iii. ☒ Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: **TWC and Board staff use the PIRTS to manage repayment plans due to unintentional program violations.**

**Results: As described in Section 8.1.6.b.iii, From September 1, 2022, to the end of**



SFY23 (August 31, 2023), Texas' 28 Boards opened 704 cases for fact-finding and closed 472. Of the 472 cases closed, \$1,101,122 in overpayments were established.

- iv. ☒ Reduce payments in subsequent months. Describe the activities and the results of these activities based on the most recent analysis: **TWC's child care case management system allows boards to correct some errors related to unintentional program violations within the system and automatically adjusts future reimbursement payments accordingly.**
  - v. ☐ Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis:
  - vi. ☐ Recover through other means. Describe the activities and the results of these activities based on the most recent analysis:
  - vii. ☒ Establish a unit to investigate and collect improper payments and describe the composition of the unit. Describe the activities and the results of these activities based on the most recent analysis: **TWC's Office of Investigations investigates and prosecutes potential fraud and assists the Boards with fact-finding efforts. Specific guidance on reporting and fact-finding fraud is addressed in WD Letter 21-16, titled Requirements for Reporting and Fact-Finding for Suspected Fraud, Waste, Theft, Program Abuse Cases, and Recovery of Improper Payments. TWC's Office of Investigations has developed a Fact-Finder's Desk Aid to provide Boards with a framework for determining fraud. From September 1, 2022, to the end of SFY23 (August 31, 2023), Texas' 28 Boards opened 704 cases for fact-finding and closed 472. Of the 472 cases closed, \$1,101,122 in overpayments were established.**
  - viii. ☐ Other. Describe the activities and the results of these activities:
- e. What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to intentional program violations or fraud? Check and describe all that apply:
- i. ☒ Disqualify the client. Describe this process, including a description of the appeal process for clients who are disqualified. Describe the activities and the results of these activities based on the most recent analysis: **CCS rule §809.113(b)(2) requires Boards to prohibit future eligibility for subsidized child care if a parent owes repayments due to a fraud determination (provided that the prohibition does not result in a Choices or SNAP E&T participant becoming ineligible for child care).**

A parent may request an appeal pursuant to TWC Chapter 823 Integrated Complaints, Hearings, and Appeals rules. Chapter 823 requires that parents request an appeal within 14 calendar days of the adverse action. Boards must provide an opportunity for informal resolution of a complaint or appeal. If no final informal resolution is reached, Boards must provide an opportunity for a hearing to resolve an appeal or complaint. If the adverse action is upheld, the parent may request an appeal to TWC Appeals.

**Results:** These activities help ensure CCS are only expended on eligible children

**and increases program integrity by increasing recoupment of improper payments.**

- ii. **[x] Disqualify the provider. Describe this process, including a description of the appeal process for providers who are disqualified. Describe the activities and the results of these activities based on the most recent analysis: CCS rule §809.113(a)(5) lists actions a Board may take to address provider violations, including prohibiting future eligibility for subsidized child care if a provider is found to have committed fraud.**

**A provider may request an appeal pursuant to TWC's Chapter 823, Integrated Complaints, Hearings, and Appeals rules. Chapter 823 requires that providers request an appeal within 14 calendar days of the adverse action. Boards must provide an opportunity for informal resolution of a complaint or appeal. If no final informal resolution is reached, Boards must provide an opportunity for a hearing to resolve an appeal or complaint. If the adverse action is upheld, the provider may request an appeal to TWC Appeals.**

**Results: These activities help ensure that child care subsidies are only paid to eligible providers for allowable services and increases program integrity by increasing recoupment of improper payments.**

- iii. **[x] Prosecute criminally. Describe the activities and the results of these activities based on the most recent analysis: As described in Section 8.1.6.b.ii, TWC's Office of Investigations investigates potential fraud and refers substantiated cases for prosecution by law enforcement and during the timeframe of September 1, 2022, to the end of SFY23 (August 31, 2023) no cases were referred for prosecution.**
- iv. **[ ] Other. Describe the activities and the results of these activities based on the most recent analysis:**

## Appendix 1: Lead Agency Implementation Plan

The Appendix will be available for Lead Agencies to use in CARS after the Plan approval letter is issued.

For each non-compliance, Lead Agencies must describe the following:

- **Action Steps:** List the action steps needed to correct the finding (e.g., update policy manual, legislative approval, IT system changes, etc.). For each action step list the:
  - ***Responsible Entity:*** Indicate the entity (e.g., agency, team, etc.) responsible for completing the action step.
  - ***Expected Completion Date:*** List the expected completion date for the action step.
- **Overall Target Date for Compliance:** List date Lead Agency anticipates completing implementation, achieving full compliance with all aspects of the findings. (Note: Compliance will not be determined until the FFY 2025-2027 CCDF Plan is amended and approved).

## Appendix 1: Form

[Plan question with non-compliance and associated provision will pre-populate based on preliminary notice of non-compliance]

A. Action Steps for Implementation	B. Responsible Entity(ies)	C. Expected Completion Date
Step 1:		
Step 2 (as necessary):		
[Additional steps added as necessary]		
Overall Target Date for Compliance:		