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Child Care and Development Fund (CCDF) Plan
For
State/Territory:
FFY 2014-2015

This Plan describes the CCDF program to be administered by the State/Territory for the period 10/1/2013 – 9/30/2015. 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 printed herein of applicable laws and regulations are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The Lead Agency acknowledges its responsibility to adhere to them regardless of these modifications.

Public reporting burden for this collection of information is estimated to average 162.5 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

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

**Form ACF-118 Approved OMB Number expires**

# Table of Contents

**Part 1: Administration**

**1.1. Contact Information**

**1.2. Estimated Funding**

**1.3. CCDF Program Integrity and Accountability**

**1.4. Consultation in the Development of the CCDF Plan**

**1.5. Coordination Activities to Support the Implementation of CCDF Services**

**1.6. Child Care Emergency Preparedness and Response Plan**

**Part 2: CCDF Subsidy Program Administration**

**2.1. Administration of the Program**

**2.2. Family Outreach and Application Process**

**2.3. Eligibility Criteria for Child Care**

**2.4. Sliding Fee Scale and Family Contribution**

**2.5. Prioritizing Services for Eligible Children and Families**

**2.6. Parental Choice in Relation to Certificates, Grants or Contracts**

**2.7. Payment Rates for Child Care Services**

**Part 3: Health and Safety and Quality Improvement Activities**

**3.1. Activities to Ensure the Health and Safety of Children in Child Care (Component #1)**

**3.2. Establishing Voluntary Early Learning Guidelines (Component #2)**

**3.3. Creating Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)**

**3.4. Pathways to Excellence for the Workforce – Professional Development Systems and Workforce Initiatives (Component #4)**

**Amendments Log**

**Appendix 1: Quality Performance Report**

**Appendix 2: CCDF Program Assurances and Certifications**

# PART 1

# ADMINISTRATION

This section provides information on how the CCDF program is administered, including the designated Lead Agency, funding information, the administrative structure, program integrity and accountability policies and strategies, coordination efforts, and emergency preparedness plans and procedures.

**1.1 Contact Information**

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E)

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

Identify the Lead Agency and Lead Agency’s Chief Executive Officer designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals and disallowance notifications to the designated contact identified here. (658D(a), §98.10)

Name of Lead Agency:

**The Department of Human Services (DHS), Division of Family Development (DFD), is the designated agency of the State responsible for the overall administration of the Child Care and Development Fund Services Program**

Address of Lead Agency:

**New Jersey Department of Human Services**

**P.O. Box 700**

**Trenton, New Jersey 08625-0700**

**New Jersey Department of Human Services**

**New Jersey Division of Family Development**

**PO Box 716**

**Trenton, New Jersey 08625-0716**

Name and Title of the Lead Agency’s Chief Executive Officer:

**Jennifer Velez, Commissioner**

**Department of Human Services**

Phone Number: **609-292-3717**

Fax Number: **609-292-3824**

E-Mail Address: **Jennifer.Velez@dhs.state.nj.us**

Web Address for Lead Agency (if any): **http://www.state.nj.us/humanservices**

### 1.1.2. Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, with responsibility for administering the State/Territory’s CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. **If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information. (§§98.16(a) and (c)(1))**

a) **Contact Information for CCDF Administrator:**

Name of CCDF Administrator:

**Jeanette Page-Hawkins**

**Margaret Milliner**

Title of CCDF Administrator:

**Jeanette Page-Hawkins, Director, Division of Family Development**

**Margaret Milliner, Assistant Director, Division of Family Development**

Address of CCDF Administrator:

**Division of Family Development**

**6 Quakerbridge Plaza, P.O. Box 716**

**Trenton, N.J. 08625-0716**

Phone Number: **(609) 588-2401 and (609)588-2163**

Fax Number: **(609)588-3369 and (609)588-3051**

E-Mail Address: Margaret.Milliner@dhs.state.nj.us

Phone Number for CCDF program information (for the public) (if any):

**New Jersey Child Care Helpline 1-800-332-9227**

Web Address for CCDF program (for the public) (if any): **http://www.state.nj.us/humanservices/dfd/programs/child/**

Web address for CCDF program policy manual: (if any): **N/A**

Web address for CCDF program administrative rules: (if any): **N/A**

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

Name of CCDF Co-Administrator: **N/A**

Title of CCDF Co-Administrator: **N/A**

Address of CCDF Co-Administrator: **N/A**

Phone Number: **N/A**

Fax Number: **N/A**

E-Mail Address: **N/A**

Description of the role of the Co-Administrator: **N/A**

## 1.2 Estimated Funding

### 1.2.1. What is your expected level of funding for the first year of the FY 2014 – FY 2015 plan period?

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period from October 1, 2013 through September 30, 2014. (§98.13(a)).

FY 2012 Federal CCDF allocation (Discretionary, Mandatory and Matching): **$113.2M**

Federal TANF Transfer to CCDF: $**76.9M**

Direct Federal TANF Spending on Child Care: $**0.0M**

State CCDF Maintenance-of-Effort Funds: $**26.4M**

State Matching Funds: $**50.4M**

**Reminder** – Lead Agencies are reminded that not more than 5 percent of the aggregate CCDF funds, including federal funds and required State Matching funds, shall be expended on administration costs (§98.52) once all FY2014 funds have been liquidated. State Maintenance-of-Effort funds are not subject to this limitation.

### 1.2.2. Which of the following funds does the Lead Agency intend to use to meet the CCDF Matching and maintenance-of-effort (MOE) requirements described in 98.53(e) and 98.53(h)?

Check all that apply. Territories not required to meet CCDF Matching and MOE requirements should mark [ ]  N/A here.

**Note:** The Lead Agency must check at least public and/or private funds as matching, even if pre-kindergarten (pre-k) funds also will be used.

[x]  Public funds to meet the CCDF Matching Fund requirement. Public funds may include any general revenue funds, county or other local public funds, State/Territory-specific funds (tobacco tax, lottery), or any other public funds.

If checked, identify source of funds: **State General Fund**

If known, identify the estimated amount of public funds the Lead Agency will receive: $ **50.4M**

[ ]  Private donated funds to meet the CCDF Matching Funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes. (98.53(f))

If checked, are those funds:

[ ]  donated directly to the State?

[ ]  donated to a separate entity(ies) designated to receive private donated funds?

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

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

[x]  State expenditures for pre-k programs to meet the CCDF Matching Funds requirement. If checked,

Provide the estimated percentage of Matching Fund requirement that will be met with pre-k expenditures (not to exceed 30%): **9%**

If percentage is more than 10% of the Matching fund requirement, describe how the State will coordinate its pre-k and child care services:

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for Matching Funds requirement: $

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

**Our state rate provides for 10 hours of care for NJ’s child care assistance programs.**

**NJ also provides additional child care services, known as WRAP-AROUND services in collaboration with DOE in the 31 neediest school distrticts for pre-k programs. WRAP-AROUND supplement educational hours, affording working parents child care services beyond the 6 hours school day.** .

**DHS has a long standing relationship and commitment with the child care community, including those contracted by DOE preschool state funded program (6 hour program)**

[ ]  State expenditures for pre-k programs to meet the CCDF Maintenance of Effort (MOE) requirements. If checked,

[ ]  The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.53(h)(1).

Estimated percentage of MOE Fund requirement that will be met with pre-k expenditures (not to exceed 20%):

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

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

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

### 1.2.3 Describe the activities for which quality funds (including targeted quality funds for infants and toddlers, school-age children, and resource and referral) will be used in FY 2014 - 2015.

In as much detail possible, list the activities that will be funded, the estimated amount of CCDF quality funds that will be used for each activity, and how these activities relate to the Lead Agency’s overall goal of improving the quality of child care for low-income children.

| **Activity** | **Estimated Amount of CCDF Quality Funds (check which targeted funds will be used, if any)** | **Purpose** | **Projected Impact and Anticipated Results (if possible)** |
| --- | --- | --- | --- |
| **Child Care Resource and Referral** | **3.5 million** Check if targeted funds for this activity:[ ]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[x]  Quality Expansion | **1.Provide parents with information on available child. 2.Facilitate access to appropriate child care services. 3.Provide parents with education about quality indicators in child care providers, training and technical to improve the quality of eary care and education in all types of settings.** | **Help parents locate affordable child care. The improved quality of care provided and parents increased knowledge of what quality child care looks like.** |
| **Strengthening Families Initiative** | **521,000** Check if targeted funds for this activity:[ ]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[ ]  Quality Expansion | **To identify risk factors and significantly reduce harmful behaviors so social competencies and school performance can be improved.** | **To strengthen parental bonds and parenting skills.****To standardize provider practices.****To improve family engagement.** |
| **Professional Development** | **990,000**Check if targeted funds for this activity:[ ]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[ ]  Quality Expansion | **1.To promote and coordinate systems for the educational development of early childhood and primary education practitioners statewide.****2.To maintain workforce management system.****3. To develop core competency standards for early childhood practitioners.** | **1.To increase the quality of care through advanced education.****2.To improve the consistency and coordination of professional development delivery.****3. Alignment of early learning standards across early learning education programs.** |
| **Family Daycare Registration** | **3.0 million**Check if targeted funds for this activity:[ ]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[ ]  Quality Expansion | **To increase the number of registered family child care providers statewide.** | **1.Provide regulated quality child care.****2. Increase access to regulated family child care.** |
| **CARI Unit** | **630,000**Check if targeted funds for this activity:[ ]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[ ]  Quality Expansion | **To conduct child abuse investigation background check and maintain a registry for all child care providers including approved homes.** | **To ensure safety of children in this setting type.** |
| **Family Worker Outreach** | **3.3 million**Check if targeted funds for this activity:[ ]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[ ]  Quality Expansion | **To provide social support and community referrals to families enrolled in the DOE preschool programs.** | **To increase parent education and family resilience.** |
| **Infant Toddler Warmline** | **329,000**Check if targeted funds for this activity:[x]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[ ]  Quality Expansion | **To provide medical and health information and referral services to providers statewide.** | **To promote the healthy development of New Jersey’s infants, toddlers and young children in child care settings.** |
| **New Jersey Coalition of School Age Programs (NJSACC)** | **273,000**Check if targeted funds for this activity:[ ]  Infant/Toddler Targeted Funds[x]  School-Age/Child Care Resource and Referral Targeted Funds[ ]  Quality Expansion | **To provide training and technical assistance to new and existing school age child care (SACC) programs and centers.** | **Increase collaboration with community partners to support school age programming.** |
| **New Jersey Child Care Training Program** | **247,000**Check if targeted funds for this activity:[ ]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[ ]  Quality Expansion | **1.To provide high quality professional development trainings for all center based, home based and Head Start program staff.****2. To provide dual language program curriculum and mentoring training** | **Increased knowledge and understanding of early childhood professional standards.** |
| **Parent Education Campaign** | **2.1 million**Check if targeted funds for this activity:[ ]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[x]  Quality Expansion | **To promote the availability of child care services in each county and to increase public awareness.** | **Increased awareness of child care availability and quality indicators.** |
| **CDA Assessment****Scholarships** | **875,000**Check if targeted funds for this activity:[ ]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[x]  Quality Expansion | **To provide financial assistance for practitioners to pursue their CDA** | **Increased number of early care and education professionals to obtain their CDA credential.** |
| **First Steps Infant Training Initiative** | **1.5 million**Check if targeted funds for this activity:[x]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[ ]  Quality Expansion | **To provide training and technical assistance, consultation and mentoring to centers serving infants and toddlers.** | **Targeted training to staff serving infants and toddlers and increased post scores on environmental rating assessment tools.** |
| **Statewide Parent Advocacy Network (SPAN)** | **142,000**Check if targeted funds for this activity:[ ]  Infant/Toddler Targeted Funds[x]  School-Age/Child Care Resource and Referral Targeted Funds[ ]  Quality Expansion | **To provide training and technical assistance to child care providers serving children with special needs.**  | **Greater ability to provide an inclusive environment for children with special needs.** |
| **Strenthening Family Associates** | **341,000**Check if targeted funds for this activity:[x]  Infant/Toddler Targeted Funds[ ]  School-Age/Child Care Resource and Referral Targeted Funds[ ]  Quality Expansion |  |  |

### 1.2.4 Will the Lead Agency distribute quality funds to counties or local entities?

Note: This question is to obtain information on whether the Lead Agency retains decision making responsibilities regarding the quality dollars at the State/Territory level or if funds are distributed to local entities

Does the State maintain decisions at the State level, or are funds distributed to locals that have some decisions on how funds are spent.

[ ]  No, the Lead Agency will not distribute any quality funds directly to local entities

[x]  Yes, all quality funds will be distributed to local entities

[x]  Yes, the Lead Agency will distribute a portion of quality funds directly to local entities. Estimated amount or percentage to be distributed to localities **Approximately 28% of all Quality contracts are contracted out within N.J.**

[ ]  Other. Describe.

## 1.3. CCDF Program Integrity and Accountability

Program integrity is defined to include efforts that ensure effective internal controls over the administration of CCDF funds. The Lead Agency is responsible for monitoring programs and services, ensuring compliance with the rules of the program, promulgating rules and regulations to govern the overall administration of the plan and oversee the expenditure of funds by sub-grantees and contractors. (§ 98.11(b)) Accountability measures should address administrative error, which includes unintentional agency error, **as well as address** program violations, both unintentional and intentional, that may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

### 1.3.1. Describe the strategies the Lead Agency will utilize to ensure effective internal controls are in place.

The **description** of internal controls may include, but is not limited to a description of processes to ensure sound fiscal management, to identify areas of risk or to establish regular evaluation of control activities.

**To streamline the eligibility process and strengthen internal controls, DFD eliminated 7500 contracted slots. Now DFD directly contracts with 15 “Child Care Resource and Referral” (CCR&R) agencies to determine eligibility.**

**Where contracts are in place, a prescriptive list of requirements to which the CCR&Rs providers are held accountable ensures that the grantee complies with all policies and procedures set forth by the Division. DFD meets on a quarterly basis with all CCR&Rs and have monthly conference calls to clarify and review policies, identify new issues, and provide TA for newly released policies, etc.**

**Program staff in DFD provide a periodic review and set the standards/parameters for operation of all aspects of child care services and related programs of CCR&Rs. All licensed child care centers and registered family child care providers in the State are inspected and held accountable to specific requirements by the DCF Office of Licensing or the appropriate CCR&R sponsoring agency.**

**The Division conducts periodic monitoring of all CCR&Rs and CBC child care centers to ensure that policy and procedures are followed. The monitoring actitivies include but are not limited to:**

* **Developed targeted technical assistance and training**
* **Established policy workgroups in conjunction with CCR&Rs**
* **Fiscal Management Team meets with the fiscal officers quarterly.**
* **Host joint policy reviews and provide policy clarification**
* **Updating Child Care Operations Manual.**
* **Developed targeted monitoring that focuses on operational procedures and processes at the CCR&R.**

### 1.3.2 Describe the processes the Lead Agency will use to monitor all sub-recipients.

Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements (98.11 (a) (3))

**Definition**: A sub-recipient (including a sub-contractor and or sub-grantee) is a non-Federal entity that expends Federal awards (contract or grant) received from another entity to carry out a Federal program, but does not include a vendor nor does it include an individual who is a beneficiary of such a program. OMB Circular A-133 Section 210 provides additional information on the characteristics of a **sub-recipient** and **vendor** (<http://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2010>).

The description of monitoring may include, but is not limited to, a discussion of written agreements, fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified, and establishing performance indicators or measures related to improper payments.

**Program staff in DFD provide a periodic review and set the standards/parameters for operation for all aspects of child care services and related programs including all providers, and a monthly monitoring of CCR&Rs. All CCR&Rs are required to submit copies of all outside audits to DFD as part of their contract requirements. All licensed child care centers and registered family child care providers in the State are inspected and held accountable to specific requirements by the DCF Office of Licensing or the appropriate CCR&R sponsoring agency.**

**Where contracts are in place, a prescriptive list of requirements to which the CCR&Rs and contracted providers are held accountable ensures that the grantee complies with all policies and procedures set forth by the Division. DFD meets on a quarterly basis with all CCR&Rs and Center Based Provider Directors. Furthermore, DFD has ongoing meetings with the CBC Policy Development Board (PDB) to dicuss program and policies.**

**In addition the Child Care Specialist provide TA, policy clarification, conduct onsite monitoring and TA to the child care providers, participate in increased county and regional level provider meetings. Also developed a TA recommended form (checklist).**

**The Division conducts periodic monitoring of all CCR&Rs and provides on-site training and technical assistance to child care centers to ensure that policy and procedures are followed.**

### 1.3.3. Describe the activities the Lead Agency will have in place to identify program violations and administrative error to ensure program integrity using the chart below.

Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to **areas identified through the Error Rate Review** process (98.100). Check which activities, if any, the Lead Agency has chosen to conduct.

| **Type of Activity** | **Identify Program Violations** | **Identify Administrative Error** |
| --- | --- | --- |
| Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid)) | **[x]**  | **[x]**  |
| Share/match data from other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)) | **[x]**  | **[x]**  |
| Run system reports that flag errors (include types) | **[ ]**  | **[ ]**  |
| Review of attendance or billing records | **[x]**  | **[ ]**  |
| Audit provider records | **[x]**  | **[ ]**  |
| Conduct quality control or quality assurance reviews | **[x]**  | **[x]**  |
| Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents | **[x]**  | **[ ]**  |
| Conduct supervisory staff reviews  | **[ ]**  | **[ ]**  |
| Conduct data mining to identify trends | **[x]**  | **[ ]**  |
| Train staff on policy and/or audits | **[x]**  | **[x]**  |
| Other. Describe       | **[ ]**  | **[ ]**  |
| None | **[ ]**  | **[ ]**  |

**For any option the Lead Agency checked in the chart above other than none, please describe**

**As a result of share/match data from the programs and databases such as Department of Labor and Worforce Development (DLW) and Unemployment Insurance Benefits (UIB), program violations and administrative errors are identified and in turn used for overpayment collections and subsequent agency corrective action.**

**If the Lead Agency checked none, please describe what measures the Lead Agency has or plans to put in place to address program integrity:**

### 1.3.4. What strategies will the Lead Agency use to investigate and collect improper payments due to program violations or administrative error?

Check and describe in the chart below which strategies, if any, the Lead Agency will use for each of the following areas: Unintentional program violations (UPV), intentional program violations (IPV) and/or fraud, and administrative error as defined in your State/Territory. **The** **Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud (98.60(i)).**

| **Strategy** | **UPV** | **IPV and/or Fraud** | **Administrative Error** |
| --- | --- | --- | --- |
| Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount **The minimum amount for recovery is based on overpayment issued.**  | **[ ]**  | **[x]**  | **[ ]**  |
| Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement). Describe **NJ now uses the Set Off Individual Liability (SOIL) system to collect unpaid debts resulting from an unpaid repayment parent debt that resulted from overpayment.** | **[ ]**  | **[x]**  | **[ ]**  |
| Recover through repayment plans | **[x]**  | **[x]**  | **[x]**  |
| Reduce payments in subsequent months | **[ ]**  | **[ ]**  | **[ ]**  |
| Recover through State/Territory tax intercepts | **[x]**  | **[x]**  | **[ ]**  |
| Recover through other means. Describe Electronic payment system | **[x]**  | **[x]**  | **[ ]**  |
| Establish a unit to investigate and collect improper payments. Describe composition of unit **Each CCR&R is responsible for investigating and collecting improper payments with State oversight** | **[x]**  | **[x]**  | **[ ]**  |
| Other. Describe       | **[ ]**  | **[ ]**  | **[ ]**  |
| None | **[ ]**  | **[ ]**  | **[ ]**  |

**For any option the Lead Agency checked in the chart above other than none, please describe**

**New Jersey has in place the following repayment policies and procedures:**

**•Recovery of any parent/applicant overpayment, which may haveoccurred when funds are erroneously paid, on behalf of a family, to a child care provider whenever the family and/or child was ineligible to receive benefits from the child care subsidy program, through a signed repayment agreement with the parent/applicant.**

**•Child care provider overpayments occur when funds have been erroneously paid, but the eligibility of the family or child is not affected.**

**•Child Care Resource Agencies are now participating agencies in theNew Jersey Set Off Individual Liability (SOIL) program. Failure by a parent/applicant to begin making specified payments (via the repayment agreement) to the CCR&R results in the overpayment claim being forwarded to the SOIL program, whereby the Department of Revenuenotifies the parent/applicant that any potential state tax refund or rebate due to the taxpayer will be used to offset any overpayment made (child care debt).**

### 1.3.5. What type of sanction, if any, will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

[ ]  None

[ ]  Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified

[x]  Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified

[x]  Prosecute criminally

[x]  Other. Describe.

**DFD is currently developing policies governing Noncompliance with Child Care Program Mandates. The scope of the anticipated policies will cover qualifying reasons for reducing, suspending, or discontinuing child care services, procedural guidelines for providing notice to parents/providers prior to any reduction, suspension or discontinuation, and due process procedures for filing an appeal.**

### 1.3.6. Based on responses provided from Question 14 in the most recent ACF-402 report, please describe those actions the Lead Agency has taken or plans to take to reduce identified errors in the table below.

Territories not required to complete the Error Rate Review should mark [ ]  N/A here.

| **Activities identified in ACF-402** | **Cause/Type of Error****(if known)** | **Actions Taken or Planned** | **Completion Date (Actual or planned)****(if known)** |
| --- | --- | --- | --- |
| **Administrative and Payment Errors**  |  | **Policy Training, Increased Desk Audits, Standardized Forms** |  |

## 1.4. Consultation in the Development of the CCDF Plan

Lead Agencies are required to *consult* with appropriate agencies in the development of its CCDF Plan (§98.12, §98.14(a),(b), §98.16(d)).

**Definition***: Consultation* involves the meeting with or otherwise obtaining input from an appropriate agency in the development of the State or Territory CCDF Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments. (§§98.12(b), 98.14(a)(1))

### 1.4.1. Identify and describe in the table below who the Lead Agency consulted with in the development of the CCDF Plan (658D(b)(2), §§98.12(b), 98.14(b)).

| **Agency/Entity** | **Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan** |
| --- | --- |
| **[x]**  | **Representatives of general purpose local government (required)**This may include, but is not limited to: representatives from counties and municipalities, local human service agencies, local education representatives (e.g., school districts), or local public health agencies. | **Drafts were circulated to State Interdepartmental Agency Committee comprised of local county Human Services Advisory Councils, Department of Education, Department of Health, Department of Children and Families, etc.** |
| **For the remaining agencies, check and describe (optional) any which the Lead Agency has chosen to consult with in the development of its CCDF Plan.** |
| [x]  | State/Territory agency responsible for public educationThis may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education. | **Young Children’s Council, The Statewide Afterschool Network, NJ School Age Child Care Coalition, NJ Statewide Parent Advocacy Network, NJ Association Child Care Resource & Referral Agencies, Professional Impact of NJ**  |
| [x]  | State/Territory agency responsible for programs for children with special needsThis may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs | **Information is shared with Map To Inclusive Child Care Organization and IDEA representative who sits on State Interdepartmental Agency Committee.** |
| [x]  | State/Territory agency responsible for licensing (if separate from the Lead Agency) | **NJ Department of Children and Families Office of Licensing (OOL) has regular input to DFD child care.** |
| [x]  | State/Territory agency with the Head Start Collaboration grant | **Input is received from NJ Department of Education and the Head Start Collaboration. DHS, DOE, and Head Start meet monthly.** |
| [x]  | Statewide Advisory Council authorized by the Head Start Act | **Input from the Young Children’s Council which is in but not of the NJ Department of Education** |
| [x]  | Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services | **NJ School Age Childcare Coalition provides direct input.** |
| [x]  | State/Territory agency responsible for the Child and Adult Care Food Program (CACFP) | **NJ Department of Agriculture through the CCR&Rs and child care providers provide input through the nutrition service.** |
| [x]  | State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant | **NJ Department of Children and Families, Office of Early Intervention Services.** |
| [x]  | State/Territory agency responsible for public health (including the agency responsible for immunizations and programs that promote children’s emotional and mental health) | **NJ Department of Health and Senior Services has input to DFD Child Care when health issues arise.** |
| [x]  | State/Territory agency responsible for child welfare | **NJ Department of Children and Families provides input through OOL.** |
| [ ]  | State/Territory liaison for military child care programs or other military child care representatives |  |
| [x]  | State/Territory agency responsible for employment services/workforce development | **NJ Department of Labor and Workforce Development, through DFD TANF directly.** |
| [x]  | State/Territory agency responsible for Temporary Assistance for Needy Families (TANF) | **DFD is the TANF agency and has direct input into the development of the CCDF Plan for TANF recipients.** |
| [x]  | Indian Tribes/Tribal Organizations[x]  N/A: No such entities exist within the boundaries of the State | **N/A** |
| [x]  | Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21 | **-DFD has funded the NJSACC as a state-wide network for school-age care for over 11 years, with additional funding NJSACC has served as Mott funded Statewide After-school Network for over 4 years.** **-DFD also participates in the Strengthening Families program.** |
| [ ]  | Provider groups, associations or labor organizations |  |
| [ ]  | Parent groups or organizations |  |
| [x]  | Local community organizations (child care resource and referral, Red Cross) | **New Jersey Association of Child Care Resource and Referral Agencies (NJACCRRA), has input through the CCR&R directors and is a participating organization through the public hearing process.** |
| [ ]  | Other |  |

### 1.4.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. (658D(b)(1)(C), §98.14(c))

At a minimum, the description should include:

1. Date(s) of notice of public hearing: **Notice of the public hearings will be published no later than May 24, 2013.**
2. How was the public notified about the public hearing?

**Written notice of the hearings will be provided to the broad child care community, consisting of, CCR&Rs, and licensed/registered child care providers, via direct e-mail and DFD Information Transmittal Letters and DHS public notice web site. Prior to the hearings, copies of the CCDF State Plan will be made available to child care advisory groups including NJACCRRA and the Policy Development Board (PDB) through the DFD Child Care web site. The State Plan Public Hearing notice will be made available to county public libraries throughout the state, and will be available on the Internet at the DHS DFD web site:**

**http://www.state.nj.us/humanservices/DFD/**

1. Date(s) of public hearing(s): **Two public hearings are scheduled June 12, 2013 and June 13, 2013.** **Reminder** - Must be no earlier than 9 months before effective date of Plan (October 1, 2013).
2. Hearing site(s):

**The Northern Region public hearing will be held at: Middlesex County College, Crabiel Hall, 2600 Woodbridge Avenue, Edison, NJ , June 12, 2013 from 9:00 a.m.to 4:00 p.m; The Southern Region public hearing will be held at: the Camden County One Stop Career Center Auditorium, 2600 Mount Ephraim Blvd, Suite 105, Camden, NJ, June 13, 2013 from 1:00 p.m. to 4:00 p.m.**

1. How was the content of the Plan made available to the public in advance of the public hearing(s)?

**Written notice of the hearings including the web site of the CCDF draft State Plan, will be provided to the broad child care community, consisting of, CCR&Rs, and licensed/registered child care providers, via DFD Information Transmittal Letters and official notice via the DHS DFD web site. Prior to the hearings, copies of the CCDF State Plan public hearings notice were distributed to several child care advisory groups including NJACCRRA and Policy Development Board (PDB). The State Plan was made available to county public libraries throughout the state via the internet, at the DHS DFD web site:**

<http://www.state.nj.us/humanservices/DFD/>.

1. How will the information provided by the public be taken into consideration in the provision of child care services under this Plan?

**All information provided by the public will be taken into consideration and will be summarized as an appendix to the CCDF State Plan.**

### 1.4.3. Describe any strategies used by the Lead Agency to increase public consultation on the Plan or access to the public hearing.

For example, translating the public hearing notice into multiple languages, using a variety of sites or technology (e.g., video) for the public hearing, holding the hearing at times to accommodate parent and provider work schedules.

**Adequate advance notice is given for parent/provider participation for the DHS CCDF State plan public hearings. Notices in English and Spanish are distributed to the following child care entities:**

**The 15 CCR&Rs share with applicants, providers and provider groups;**

**Parents, providers and child care advocate agencies are all encouraged to voice their input/comments to the CCDF plan.**

## 1.5. Coordination Activities to Support the Implementation of CCDF Services

Lead Agencies are required to *coordinate* with other Federal, State, local, Tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)).

**Definition -** *Coordination* involves child care and early childhood and school-age development services efforts to work across multiple entities, both public and private (such as in connection with a State Early Childhood Comprehensive System (SECCS) grant or the State Advisory Council funded under the Head Start Act of 2007). (658D(b)(1)(D), §§98.12(a), 98.14(a)(1))

Note: Descriptions of how governments are organized for each State are provided at: <http://www2.census.gov/govs/cog/all_ind_st_descr.pdf>.

### 1.5.1. Identify and describe in the table below with whom the Lead Agency coordinates in the delivery of child care and early childhood and school-age services (§98.14(a)(1)).

| **Agency/Entity****(check all that apply)** | **Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services** | **Describe results expected from the coordination**Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies. |
| --- | --- | --- |
| [x]  | Representatives of general purpose local government **(required)**This may include, but is not limited to: representatives from counties and municipalities, local education representatives, or local public health agencies. | **Human Service Advisory Council** | **The local human service advisory council’s role is to advise DHS of what centers to contract with for early care and education services in their local county.** |
| [x]  | State/Territory agency responsible for public education (**required)**This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education;  | **Through NJSACC** | **Technical assistance is provided to all 21st Century CLC programs in NJ and any afterschool program requiring assistance.** |
| [x]  | Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services (**required**) | **The Accreditation Facilitation Project of New Jersey was established to increase****the availability of and access to high****quality early childhood programs by****increasing the number of centers****accredited by the National Association****for the Education of Young Children****(NAEYC). The statewide accreditation****project is a unique public/private****partnership formed by Professional****Impact New Jersey and DFD in****collaboration with private funders.** | **To increase the availability of and****access to high quality early childhood****programs.** |
| [x]  | State/Territory agency responsible for public health (**required**)This may include, but is not limited to, the agency responsible for immunizations and programs that promote children’s emotional and mental health  | **NJ Department of Health and Senior Services** | **The NJParentLink is a website used for the communication of various early care and education services to both parents and professionals. The public is able to post questions about childcare services and health services including required immunizations for young children.** |
| [x]  | State/Territory agency responsible for employment services / workforce development (**required**) | **Professional Impact of NJ****CCR&Rs** | **Develops a career lattice and core competencies for the child care practitioner workforce. DFD funds CCR&Rs with training dollars to provide professional development to the workforce.** |
| [x]  | State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) including local human service agencies(**required**) | **Division of Family Development** | **TANF is administered by the local county welfare agencies (CWAs) They refer applicants to the CCR&Rs for child care services. In addition, both entities have access to the same eligibility child care system. In some counties, the CCR&Rs and CWAs are co-located to better coordinate services and expedite child care services**  |
| [ ]  | Indian Tribes/Tribal Organizations **(required)**[ ]  N/A: No such entities exist within the boundaries of the State  |  |  |
| **For the remaining agencies, check and describe (optional) any with which the Lead Agency has chosen to coordinate early childhood and school-age service delivery** |
| [x]  | State/Territory agency with the Head Start Collaboration grant | **The Department of Education, Office of Early Care and Education** | **The Collaboration Director is an active member of the Policy Development Board, coordinates with DFD membership on the Head Start Advisory Council.** |
| [ ]  | State/Territory agency responsible for Race to the Top – Early Learning Challenge (RTT-ELC) [x]  N/A: State/Territory does not participate in RTT-ELC |  |  |
| [x]  | State/Territory agency responsible for the Child and Adult Care Food Program (CACFP) | **New Jersey Department of Agriculture** | The agency provides free and reduced food service for income eligible children in child care centers. |
| [x]  | State/Territory agency responsible for programs for children with special needs This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs | Statewide Parent Advocacy Network | This agency provides training and technical assistance to programs that serve children with disabilities and programs that are interested including children with special needs into their programs. |
| [ ]  | State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant |  | **Division of Early Prevention Services within DCF adminsitrers this grant and closely work with DHS, TANF Initiative Program (TIP) to provide home visition to TANF parents.**  |
| [x]  | State/Territory agency responsible for child welfare | **The Department of Children and Families** | **Child Protective Services are provided for children in foster placement and child care as required per their case plan.** |
| [ ]  | State/Territory liaison for military child care programs or other military child care representatives |  |  |
| [x]  | Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21 | **New Jersey School Age Childcare Coalition and Department of Children and Families** | **Technical assistance is provided to all school-age programs through the MOTT Statewide AfterSchool Network. The Strengthening Families Initiative provides training and technical assistance on implementing the 5 protective factors into their program.**  |
| [x]  | Local community organizations (child care resource and referral, Red Cross) | **CCR&R** | **Provides child care resource and referral services, parent counseling and education, provider training and subsidy eligibility determination.** |
| [x]  | Provider groups, associations or labor organizations | **Child Care Workers Union (CCWU)** | **Provides arbitration for home based providers regarding payment issues and appeals.** |
| [x]  | Parent groups or organizations | New Jersey Department of Human Services and the Department of Education | Family Workers provide home visiting services, parent education workshops and goal setting for families and their young children. |
| [ ]  | Other |  |  |

### 1.5.2. Does the State/Territory have a formal early childhood and/or school-age coordination plan?

Lead Agencies are not required to have an early childhood nor a school-age coordination plan, but the State/Territory may have such plans for other purposes, including fulfilling requirements of other programs.

[x]  Yes. If yes,

Provide the name of the entity responsible for the coordination plan(s):

**N.J. School –Age Coalition Collaboration for Program Enhancement:**

**-Supports the development and expansion of School-age Child Care (SACC);**

**-Provides for training and technical assistance to new and existing SACC programs and centers;**

**-Maintains a web site for SACC information sharing;**

**-Provides mini grants to SACC programs interested in improving quality and moving toward accreditation; and**

**-Improves the ability of after-school programs to collaborate through the provision of activities/services for school-age children during non school hours, many of which are community and school district collaborations.**

**-The NJSACC Coalition has leveraged these targeted funds to obtain a Mott Foundation grant to expand services to the increasing population of SACC programs.**

Describe the age groups addressed by the plan(s):

**In cooperation with the NJDOE and the Secretary of State's Office, the NJSACC Coalition provides enhanced technical assistance to SACC programs that have service learning programs for children ages 5 to 13 years of age.**

Indicate whether this entity also operates as the State Advisory Council (as authorized under the Head Start Act of 2007):

[ ]  Yes

[x]  No

Provide a web address for the plan(s), if available:

[ ]  No

 **DFD also has in place the following:**

 **New Jersey Afterschool Network (NJAN):**

-Through the establishment of the New Jersey Afterschool Network (NJAN), New Jersey intends to continue to strengthen the existing network and linkages among policy makers, practitioners and consumers to facilitate effective planning and efficient implementation of a highly coordinated system of services for all children in afterschool programs throughout New Jersey.

-The New Jersey School Age Care Coalition (NJSACC), New Jersey After 3 (NJA3), New Jersey Department of Education (NJDOE), DHS, and the New Jersey Association of Child Care Resource and Referral Agencies (NJACCRRA) have committed various resources including funding, to advance the afterschool needs of children and youth through a public awareness campaign that will provide opportunities for policymakers to invest additional resources into quality afterschool programs,while also sharing resources and best practices to build bridges between federal, state and local afterschool initiatives

### 1.5.3. Does the State/Territory have a designated entity(ies) responsible for coordination across early childhood and school-age programs? (658D(b)(1)(D), §98.14(a)(1))

Check which entity(ies), if any, the State/Territory has chosen to designate.

[ ]  State/Territory-wide early childhood and/or school-age cabinet/advisory council/task force/commission.

If yes, describe entity, age groups and the role of the Lead Agency

[x]  State Advisory Council (as described under the Head Start Act of 2007).

If yes, describe entity, age groups and the role of the Lead Agency

**The New Jersey Council for Young Children enables NJ to develop and implement a plan to improve the state’s coordination and quality of programs and services for children from birth to school entry.**

[ ]  Local Coordination/Council

If yes, describe entity, age groups and the role of the Lead Agency

[ ]  Other.

Describe

[ ] None

### 1.5.4. Does the Lead Agency conduct or plan to conduct activities to encourage public-private partnerships that promote private sector involvement in meeting child care needs? (§98.16(d))

[x]  Yes. If yes, **describe** these activities or planned activities, including the tangible results expected from the public-private partnership

**As part of their contract requirement, Child Care Resource and Referral Agencies support employers interested in developing on-site or near-site employer-supported child care centers or other family-supportive benefits in the workplace (e.g., consortium arrangements for child care, voucher programs, flextime programs, etc.) and by providing training, technical assistance and support;**

**The Accreditation Facilitation Project of New Jersey was established to increase the availability of and access to high quality early childhood programs by increasing the number of centers accredited by the National Association for the Education of Young Children (NAEYC). The statewide accreditation project is a unique public/private partnership formed by Professional Impact New Jersey and DFD in collaboration with private partners.**

**DFD is engaged in private/public partnerships with the implementation of GrowNj Kids, New Jersey’s quality rating improvement system test drive Summer of 2013. This partnership has lead to local quality initaitives aimed at improving Family Child Care and center-based programs.**

**The State Employment and Training Commission as well as corporations such as AT&T, Johnson & Johnson, Hartz Mountain, Merck, Novartis, and Prudential, and entities such as the U.S. Military have been instrumental in shaping innovative policy that responds to the needs of both the public and private sector.**

[ ]  No.

## 1.6. Child Care Emergency Preparedness and Response Plan

It is recommended, but not required, that each Lead Agency develop a plan to address preparedness, response, and recovery efforts specific to child care services and programs. Plans should cover the following areas: 1) planning for continuation of services to CCDF families; 2) coordination with other State/Territory agencies and key partners; 3) emergency preparedness regulatory requirements for child care providers; 4) provision of temporary child care services after a disaster; and 5) rebuilding child care after a disaster. For further guidance on developing Child Care Emergency Preparedness and Response Plans see the Information Memorandum (CCDF-ACF-IM-2011-01) located on the Office of Child Care website at: <http://www.acf.hhs.gov/programs/occ/resource/im-2011-01>

### 1.6.1. Indicate which of the following best describes the current status of your efforts in this area. Check only ONE.

**[x]  Planning**. Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated and how the plan will be coordinated with other emergency planning efforts within the State/Territory.

 **The Division of Family Development has convened an emergency preparedness development committee, consisting of partners from various state departments including the Department of Human Services central office, Department of Children and Families Office of Licensing, various bureaus within DFD and key members of county CCR&Rs through out New Jersey.**

 **The committee has reviewed each CCR&R emergency preparedness plan. DFD is in the process of developing a state-wide policies and guidance based on ACF –IM-2011-01 memorandum. This plan will be coordinated with the Office of Emergency Management at the Department level.**

 **The committee is presently meeting on a quarterly basis, until a draft plan and policy are developed.**

[ ]  **Developed.** A plan has been developed as of [**insert date**] and put into operation as of [**insert date**], if available. Provide a web address for this plan, if available:

[ ]  **Other. Describe:**

### 1.6.2. Indicate which of the core elements identified in the Information Memorandum are or will be covered in the Lead Agency child care emergency preparedness and response plan.

Check which elements, if any, the Lead Agency includes in the plan.

**[x]** Planning for continuation of services to CCDF families

[x]  Coordination with other State/Territory agencies and key partners

[ ]  Emergency preparedness regulatory requirements for child care providers

[x]  Provision of temporary child care services after a disaster

[x]  Restoring or rebuilding child care facilities and infrastructure after a disaster

[ ]  None

**PART 2**

**CCDF SUBSIDY PROGRAM ADMINISTRATION**

This section focuses on the child care assistance program. Lead Agencies are asked to describe their efforts to inform parents about the CCDF subsidy program and application policies and procedures, eligibility criteria, sliding fee scale, payment rate policies and procedures, and how Lead Agencies ensure continuity of care and parental choice of high quality settings for families.

## 2.1. Administration of the Program

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 other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b), §98.11(a))

### 2.1.1. Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level?

Identify the level at which the following CCDF program rules and policies are established.

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

[x]  State/Territory

[ ]  Local entity. If checked, identify the type of policies the local entity(ies) can set

[ ]  Other. Describe:

[x]  Sliding fee scale is set by the:

[ ]  State/Territory

[ ]  Local entity. If checked, identify the type of policies the local entity(ies) can set

[ ]  Other. Describe:

[x]  Payment rates are set by the:

[x]  State/Territory

[ ]  Local entity. If checked, identify the type of policies the local entity(ies) can set

[ ]  Other. Describe:

### 2.1.2. How is the CCDF program operated in your State/Territory?

In the table below, identify which agency(ies) performs these CCDF services and activities.

| **Implementation of CCDF Services/Activities** | **Agency (Check all that apply)** |
| --- | --- |
| **Who determines eligibility?** **Note:**  If different for families receiving TANF benefits and families not receiving TANF benefits, please describe: **21 County Welfare Agencies and Boards of Social Services****determine eligibility for families receiving TANF benefits** **15 Child Care Resource and Referral Agencies serving 21 counties determine eligibility for families not receiving TANF benefits.** | [ ]  CCDF Lead Agency[ ]  TANF agency[ ]  Other State/Territory agency. Describe.      [x]  Local government agencies such as county welfare or social services departments[x]  Child care resource and referral agencies[ ]  Community-based organizations[ ]  Other. Describe.       |
| **Who assists parents in locating child care (consumer education)?** **15 Child Care Resource and Referral Agencies serving 21 counties, as well as the 21 CWAs and BSS refer those TANF clients with child care needs to the CCR&Rs.****The 21 County Welfare Agencies (CWA) and Boards of Social Services (BSS) will refer parents/applicants to the CCR&Rs in their county to assist with locating child care services, some CCR&Rs are co-located with the CWA/BSS.****\*The NJ School Age Child Care Coalition (NJSACC) receives frequent inquiries from families requesting child care referrals through their web site. NJSACC redirects these families to their local county CCR&R** | [x]  CCDF Lead Agency[x]  TANF agency[ ]  Other State/Territory agency. Describe.      [x]  Local government agencies such as county welfare or social services departments[x]  Child care resource and referral agencies[ ]  Community-based organizations[x]  Other. Describe.       |
| **Who issues payments?****Payments are made electronically through Zerox directly to provider bank accounts.****CCR&Rs also have authority to make payment adjustments. However, all payments are issued electronically by Zerox.** | [x]  CCDF Lead Agency[ ]  TANF agency[ ]  Other State/Territory agency. Describe.      [ ]  Local government agencies such as county welfare or social services departments[ ]  Child care resource and referral agencies[ ]  Community-based organizations[x]  Other. Describe.       |
| **Describe to whom is the payment issued (e.g., parent or provider) and how are payments distributed (e.g., electronically, cash, etc)****Providers receive electronic direct deposits via E-Child Care (ECC) by Zerox.** |  |
| **Other. List and describe:**       |

## 2.2. Family Outreach and Application Process

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care services. (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a)-(e). **Note -** For any information in questions 2.2.1 through 2.2.10 that differs or will differ for families receiving TANF, please describe in 2.2.11.

### 2.2.1. By whom and how are parents informed of the availability of child care assistance services under CCDF? (658E(c)(2)(A), §98.30(a))

 Check all agencies and strategies that will be used in your State/Territory.

[x]  CCDF Lead Agency

[x]  TANF offices

[x]  Other government offices

[x]  Child care resource and referral agencies

[ ]  Contractors

[ ]  Community-based organizations

[ ]  Public schools

[x]  Internet (provide website):

**http://www.state.nj.us/humanservices/dfd/programs/child/index.html**

**\*NJ School Age Childcare Coalition receives frequent inquiries from families requesting Child care referrals as a result of the NJACC optimized web site. NJSACC redirects these families to their local county CCR&R.**

**http://www.njsacc.org/**

**\*The New Jersey ParentLink website receives frequent inquiries regarding childcare availability and those families are referred to their local resource and referral agency.**

**http://NJParentLink.NJ.GOV/**

**http://njaccrra.org**

[ ]  Promotional materials

[x]  Community outreach meetings, workshops or other in-person meetings

[ ]  Radio and/or television

[x]  Print media

[ ]  Other. Describe:

### 2.2.2. How can parents apply for CCDF services?

Check all application methods that your State/Territory has chosen to implement.

[x]  In person interview or orientation

[x]  By mail

[ ]  By Phone/Fax

[ ]  Through the Internet (provide website)

[ ]  By Email

[ ]  Through a State/Territory Agency

[x]  Through an organization contracted by the State/Territory

[ ]  Other. Describe:

### 2.2.3. Describe how the Lead Agency provides consumer education to parents applying for CCDF assistance to promote informed choices. about the quality of care provided by various providers in their communities.

Lead Agencies must certify that the State/Territory will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices(658E (c)(2)(G), §98.33).

For example, memorandums of understanding with resource and referral agencies to provide consumer education to families applying for CCDF assistance, providing parents with provider lists showing licensing history and/or Quality Rating and Improvement System (QRIS) ratings, or informational brochures that address importance of quality and different care options available.

**Parent Consumer Education:**

**-The CCR&Rs are under contract to increase public awareness through parent education of child care services available; and to assist parents to become informed consumers by providing information on the availability for quality child care services;**

**-This promotes the availability of different kinds of child care services in each county, licensed child care, family child care and family friend and neighbor care;**

**-Parent Consumer Education provides for Yellow Pages ads, billboards, and other advertising in the media;**

**-Parent consumer education has resulted in Public Service Announcements, advertisements in newspapers and periodicals and a brochure on choosing quality child care.**

**-Parent Consumer Education is evaluated during the annual CCR&R monitoring process and discussed at quarterly meetings.**

### 2.2.4. Describe how the Lead Agency will support child care programs to increase the likelihood that CCDF-served children receive higher quality care as defined in your State/Territory.

For example, methods used to promote upward movement in quality rating and improvement system, methods used to encourage high quality programs to participate in the subsidy program such as tiered reimbursement, or incentives used to support high quality programs in rural, suburban, urban, and low-income communities.

**As an incentive to increase the quality of child care in New Jersey, the rates the State pays to licensed child care centers, registered family child care homes and summer camps that have achieved national accreditation are increased by 5 percent over the maximum rates for those centers, registered family child care homes, and summer camps meeting basic licensing requirements.**

**Special initiatives – Summer Preschool Enrichment and Literacy Program and Summer Camp School Aged Program will be designed specifically focused on increasing children access to high quality programs whereby providers will have to meet certain quality standard benchmarks to participate.**

**2.2.5. Describe how the Lead Agency promotes access to the CCDF subsidy program?** Check the strategies implemented by your State/Territory.

[x]  Provide access to program office/workers such as:

[x]  Providing extended office hours

[x]  Accepting applications at multiple office locations

[x]  Providing a toll-free number for clients

[ ]  Email/online communication

[ ]  Other. Describe:

**Some CCR&Rs are also co-located with New Jersey county welfare agencies to expedite child care application processing.**

[x]  Using a simplified eligibility determination process such as:

[ ]  Simplifying the application form (such as eliminating unnecessary questions, lowering the reading level)

[ ]  Developing a single application for multiple programs

[x]  Developing web-based and/or phone-based application procedures

[x]  Coordinating eligibility policies across programs. List the program names

[x]  Streamlining verification procedures, such as linking to other program data systems

[x]  Providing information multi-lingually

**[ ]** Including temporary periods of unemployment in eligibility criteria (job search, seasonal unemployment). Length of time      (Note: this period of unemployment should be included in the Lead Agency’s definition of working, or job training/educational program at 2.3.3).

[x]  Other. Describe:

**DFD is currently developing a Division-wide Consolidated Assistance Support System (CASS) that will be a web based on-line state-wide system that will consolidate all programs offered through DFD through one comprehensive electronic services system. The objectives for CASS are:**

**• To integrate existing systems and processes to the extent possible;**

**• Develop a system that is client-centered;**

**• Provide immediate access to data for update, inquiry, or use in interfaces, reporting or analysis;**

**• Provide for better linking of case and member data across counties and systems;**

**• Enhance disbursement processing, financial reporting and reconciliation between case management systems and accounting systems;**

**• Provide a common front-end client registration process across all DFD programs;**

**• Automate eligibility determination and calculation processes;**

**• Minimize the use of paper and printing services, and use electronic processes when possible;**

**• Implement strong, timely and accurate financial reporting;**

**• Provide access to categories of information to the public, government agencies and employees as required; and**

**• Provide enhanced client services that are more efficient, timely and easier for clients to use and access.**

[x]  Other. Describe:

**DFD currently utilizes an electronic time and attendance payment system for all child care payments, called "E-Child Care".**

**E-Child Care is a technology that will use either a telephone or swipe card system to provide real time tracking and verification of child care attendance. It will automate and eliminate manual processes, including manual paper invoices, and it will provide more efficient and faster services to providers, including faster payments.**

**E-Child Care highlights include:**

**• Eligibility verified in real time;**

**• Reduced paperwork;**

**• Faster, more accurate provider payments, bi-weekly for the prior two weeks;**

**• Increased record accuracy;**

**• Reduced payment errors;**

**• Empowers parents and providers;**

**• Delivers attendance and payment details via Provider Web Portal.**

[ ]  None

### 2.2.6. Describe the Lead Agency’s policies to promote continuity of care for children and stability for families.

Check the strategies, if any, that your State/Territory has chosen to implement.

[x]  Provide CCDF assistance during periods of job search. Length of time

**up to 90 days if someone loses employment while receiving a child care subsidy.**

[x]  Establish two-tiered income eligibility to allow families to continue to receive child care subsidies if they experience an increase in income but still remain below 85% of State median income (SMI)

 **Full-time employment for parents/applicants has been lowered to 25 hours per week for redeterminations, family income eligibility is 200% Federal Poverty Level (FPL) at entry, up to 250% FPL at redetermination 12 months later.**

[ ]  Synchronize review date across programs. List programs:

[ ]  Longer eligibility re-determination periods (e.g., 1 year). Describe

[ ]  Extend periods of eligibility for families who are also enrolled in either Early Head Start or Head Start and pre-k programs. Describe

[ ]  Extend periods of eligibility for school-age children under age 13 to cover the school year. Describe

[ ]  Minimize reporting requirements for changes in family’s circumstances that do not impact families’ eligibility, such as changes in income below a certain threshold or change in employment

[ ]  Individualized case management to help families find and keep stable child care arrangements. Describe

[ ]  Using non-CCDF Funds to continue subsidy for families who no longer meet eligibility, such as for children who turn 13 years of age during the middle of a program year

[ ]  Other. Describe

[ ]  None

### 2.2.7. How will the Lead Agency provide outreach and services to eligible families with limited English proficiency?

Check the strategies, if any, that your State/Territory has chosen to implement.

[x]  Application in other languages (application document, brochures, provider notices)

[x]  Informational materials in non-English languages

[x]  Training and technical assistance in non-English languages

[ ]  Website in non-English languages

[ ]  Lead Agency accepts applications at local community-based locations

[ ]  Bilingual caseworkers or translators available

[ ]  Outreach Worker

[x]  Other:

**Each CCR&R provides multilingual services to families applying for child care services, in Spanish and other predominant languages spoken in their respective communities over the telephone, or as necessary in person. The CCR&Rs and the Division of Family Development utilize the services of language line translation services when/if needed to communicate.**

**All child care eligibility applications are readily available in English and Spanish, and can be made available in other languages upon request, depending on need.**

**All child care parent handbooks for both TANF and non-TANF child care are immediately available in both English and Spanish and can be made available in other languages upon request.**

**Provider handbooks for both TANF and non-TANF child care will be translated into Spanish as program modifications are incorporated and handbooks are revised. Provider handbooks can be made available in other languages upon request, depending on need.**

[ ]  None

**If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered**

### 2.2.8. How will the Lead Agency overcome language barriers with providers?

Check the strategies, if any, that your State/Territory has chosen to implement.

[x]  Informational materials in non-English languages

[x]  Training and technical assistance in non-English languages

 **Some CCR&R provider training is provided in Spanish, as requested.**

[ ]  CCDF health and safety requirements in non-English languages

[ ]  Provider contracts or agreements in non-English languages

[ ]  Website in non-English languages

[x]  Bilingual caseworkers or translators available

[x]  Other:

**Provider handbooks for both TANF and non-TANF child care will be translated into Spanish (and made available on a need basis) as program modifications are incorporated and handbooks are revised. Provider handbooks can be made available in other languages upon request, also depending on need.**

[ ]  None

**If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered**

### 2.2.9. Describe how the Lead Agency documents and verifies applicant information using the table below. (§98.20(a))

Check the strategies that will be implemented by your State/Territory. **Attach** a copy of your parent application for the child care subsidy program(s) as **Attachment 2.2.9** or provide a web address, if available **http://www.state.nj.us/humanservices/dfd/programs/child/forms/index.html**

**Reminder** – Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes. (ACYF-PI-CC-98-08) States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing *in loco parentis*, or other household members have not provided information regarding their immigration status.

| **The Lead Agency requires documentation of:** | **Describe how the Lead Agency documents and verifies applicant information:** |
| --- | --- |
| [ ]  Applicant identity |  |
| [x]  Household composition | **This will be a new requirement and is not in place yet, to verify the household composition.** |
| [x]  Applicant’s relationship to the child | **This is verified with birth certificates required for all subsidy children.** |
| [x]  Child’s information for determining eligibility (e.g., identity, age, etc.) | **This is verified with birth certificates required for all subsidy children.** |
| [x]  Work, Job Training or Educational Program | **Employer letters for new employment followed up with Pay stubs or payroll records; School or training registration and followed up with subject schedules for the current term.** |
| [x]  Income | **Annual income is verified through four weeks of pay information prior to the date of application.** |
| [ ]  Other. Describe       |  |

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

[x]  Time limit for making eligibility determinations. Describe length of time **The CCR&R agency has 45 days from the date of receipt of the application to make an eligibility determination and notify the parents/applicant of a decision.**

[ ]  Track and monitor the eligibility determination process

[x]  Other. Describe

**Through the annual monitoring, the eligibility determination process is reviewed to determine timeliness of determinations.**

[ ]  None

### 2.2.11. Are the policies, strategies or processes provided in questions 2.2.1. through 2.1.10 different for families receiving TANF? (658E(c)(2)(H) & (3)(D), §§98.16(g)(4), 98.33(b), 98.50(e))

[x]  Yes. If yes, describe:

**The major difference for TANF recipients is that there is no waiting list for TANF recipients determined eligible by the CWA or Board of Social Services (BSS) to receive child care services in order to meet the required work activity or training requirements, as specified by the CWA or BSS.**

**Families eligible for TANF cash benefits and participating in the WFNJ program are eligible for child care services if the family is receiving TANF and participating family members are in an approved WFNJ work activity as required in the Work First New Jersey Manual (N.J.A.C. 10:90).**

**Families receiving TANF cash assistance and employed are also eligible to receive WFNJ child care services. These families are required to pay a co-pay towards the cost of child care based on earned income.**

**Eligible participants are referred to the appropriate county CCR&R by assigned staff from their local CWA/BSS or One Stop Career Center. Initial eligibility for child care is determined at the CWA/BSS and is based on need (being placed in an appropriate work, training or employment activity that requires the participant to need for child care). There is no application requirement for TANF cash assistance participants.**

[ ]  No.

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

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State TANF agency in accordance with section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE**: The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

a) Identify the TANF agency that established these criteria or definitions:

State/Territory TANF Agency

**Division of Family Development**

b) Provide the following definitions established by the TANF agency.

* "appropriate child care": **means the child care provider is open for the hours and days the parent would need child care in order to comply with work requirements and the provider is able and willing to provide child care services including any special needs of the child(ren) and meets DHS and DCF requirements**
1. "reasonable distance": **means the child care provider is located within a distance that is in route from the parent’s home and work activity and that the parent can get the child to care and then to their activity within 90 minutes**
2. "unsuitability of informal child care": **It is unsuitable if the provider cannot meet the minimum requirements as defined by the DFD. The minimum requirements for approval of the home are satisfactory results of a Child Abuse Record Information (CARI) background check by all household members 14 years of age and older, a satisfactory health and safety inspection of the home using the “Self-Arranged Care Inspection and Interview Checklist”, and a standard interview with the provider and family members.**
3. "affordable child care arrangements": **are those which do not exceed the DHS maximum child care reimbursement rates. In addition, parent co-payment fees shall not exceed the DHS co-payment schedule for subsidized child care services.**

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

[ ]  In writing

[x]  Verbally

[ ]  Other:

**If/when a parent is unable to secure child care services due to services being unacceptable, unavailable or inaccessible, the CCR&R informs the CWA. Then the CWA officially exempts the parent from participation pending the availability of suitable care. The client receives verbal counseling from their case worker regarding their child care support needs or concerns.**

## 2.3. Eligibility Criteria for Child Care

In order to be eligible for services, children must (1) be under the age of 13, or under the age of 19 if the child is physically or mentally disabled or under court supervision; (2) reside with a family whose income is less than 85 percent of the State’s median income for a family of the same size; and (3) reside with a parent or parents who is working or attending job training or an educational program; or (4) be receiving or needs to receive protective services. (658P(3), §98.20(a))

### 2.3.1. How does the Lead Agency define the following eligibility terms?

* *residing with* - **Residing with means living in the permanent or temporary residence of the eligible parent, legal guardian or person standing *in loco parentis.* The person or family must be currently residing in the State of New Jersey. There is no prior residency requirement.**
* *in loco parentis* – **Means serving as the primary caretaker without legal confirmation for the child(ren) on behalf of whom certificate(s) are requested. These individuals are considered *in loco parentis* if the parent(s) of the child(ren) are not residing within New Jersey and the child(ren) reside with these individuals on a full time basis. These individuals must meet all other eligibility criteria**

### 2.3.2. Eligibility Criteria Based Upon Age

a) The Lead Agency serves children from **birth up to 13 years** weeks to years (may not equal or exceed age 13).

b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 yearswho are physically and/or mentally incapable of self-care? (658E(c)(3)(B), 658P(*3*), §98.20(a)(1)(ii))

[x]  Yes, and the upper age is **18** (may not equal or exceed age 19) . Provide the Lead Agency definition of *physical or mental incapacity* – **A dependent child who is age 19 or youn ger and defined as a “special needs” individual; that is, physically or mentally incapable of self-care.**

[ ]  No.

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

[x]  Yes, and the upper age is **18** (may not equal or exceed age 19)

[ ]  No.

### 2.3.3. Eligibility Criteria Based Upon Work, Job Training or Educational Program

a) How does the Lead Agency define “working” for the purposes of eligibility? Provide a narrative description below, including allowable activities and if a minimum number of hours is required.

**Reminder** – Lead Agencies have the flexibility to include any work-related activities in its definition of working including periods of job search and travel time. (§§98.16(f)(3), 98.20(b))

* *working* –

**Working – Families shall be eligible for the Child Care Assistance Program (CCAP) if they are in need of child care services in order to remain employed (working) full-time or to accept full-time employment, to avoid dependency on TANF; to attend full-time educational and/or work/training programs and, If they are receiving child care services and lose their employment, they may continue their child care services for up to 90 days, while they seek employment.**

**Full-time employment means, for initial child care eligibility, employment that totals 30 or more hours per week. For redetermination purposes full-time employment is employment that totals 25 or more hours per week.**

b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program? (§§98.16(g)(5), 98.20(b))

[x]  Yes. If yes, how does the Lead Agency define “attending job training or educational program” for the purposes of eligibility? Provide a narrative description below.

**Reminder** – Lead Agencies have the flexibility to include any training or education-related activities in its definition of job training or education, including study time and travel time.

* *attending job training or educational program* –

**Full-time school or training means, for child care eligibility, either 12 or more credit hours per term or the equivalent number of Continuing Education Units (CEUs) at a college or university, or 20 or more classroom hours in a job training organization, or nine or more credit hours or the equivalent number of CEUs during the summer session.**

[ ]  No.

### 2.3.4. Eligibility Criteria Based Upon Receiving or Needing to Receive Protective Services

a) Does the Lead Agency provide child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))

[x]  Yes. If yes, how does the Lead Agency define “protective services” for the purposes of eligibility? Provide a narrative description below.

**Reminder** – Lead Agencies have the flexibility to define protective services beyond formal child welfare or foster care cases. Lead Agencies may elect to include homeless children and other vulnerable populations in the definition of protective services.

**Note –** If the Lead Agency elects to provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities for CCDF purposes these children are considered to be in protective services and should be included in this definition.

* *protective services* –

**Child protective services (CPS), shall constitute services on behalf of any child, under age 19, considered at risk of abuse, neglect, or exploitation; or found to be abused, neglected, exploited or abandoned, as identified by the Division of Child Protection and Permanency (DCP&P), formerly known as Youth and Family Services (DYFS) or failure on the part of parents or others responsible for meeting at least the minimum needs of the child, as identified by DCP&P. The term, unless otherwise specified, includes services provided to children in out-of-home settings, such as foster care because, as permissible in the interpretation of the Federal regulation, New Jersey does not differentiate between the protective services for families who remain intact and for those children who are in foster placement.**

[ ]  No.

b) Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

[x]  Yes.

[ ]  No.

**In the event that protective child care services are deemed necessary as part of a case plan for a Child Protective Services (CPS) Priority 1 child who is residing in his or her own home with his or her own parent(s), the amount of the family’s co-payment is determined on the basis of the family’s annual gross income, family size, number of children receiving care, and the number of hours of service (full time and/or part time) provided to the children. The DCP&P case manager has the authority to decrease or waive the co-pay on a case by case basis.**

### 2.3.5. Income Eligibility Criteria

a) How does the Lead Agency define “income” for the purposes of eligibility? Provide the Lead Agency’s definition of “income” for purposes of eligibility determination. (§§98.16(g)(5), 98.20(b))

* *income* –

**Income is defined as the source and amount of current gross income earned by adult parent(s) or guardians of the family unit through the receipt of wages, tips, salaries or commissions from activities as an employee or receipt of income from self-employment.**

**This would include income that is earned and unearned such as employment part-time and full-time, social security, pensions, retirement, unemployment, worker’s compensation, public assistance, child support, alimony and any other income required for federal and state tax reporting purposes including overtime and bonus pay.**

b) Which of the following sources of income, if any, will the Lead Agency exclude or deduct from calculations of total family income for the purposes of eligibility determination? Check any income the Lead Agency chooses to exclude or deduct, if any.

[x]  Adoption subsidies

[x]  Foster care payments

[x]  Alimony received or paid

[ ]  Child support received

[x]  Child support paid

[x]  Federal nutrition programs

[x]  Federal tax credits

[x]  State/Territory tax credits

[x]  Housing allotments, Low-Income Energy Assistance Program (LIHEAP) or energy assistance

[x]  Medical expenses or health insurance related expenses

[x]  Military housing or other allotment/bonuses

[x]  Scholarships, education loans, grants, income from work study

[ ]  Social Security Income

[ ]  Supplemental Security Income (SSI)

[ ]  Veteran’s benefits

[ ]  Unemployment Insurance

[x]  Temporary Assistance for Needy Families (TANF)

[x]  Worker Compensation

[x]  Other types of income not listed above

[ ]  None

c) Whose income will be excluded, if any, for purposes of eligibility determination?Check anyone the Lead Agency chooses to exclude, if any.

[x]  Children under age 18

[ ]  Children age 18 and over – still attending school

[x]  Teen parents

[ ]  Unrelated members of household

[ ]  All members of household except for parents/legal guardians

[ ]  Other

[ ]  None

d)Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the SMI.

| **Family Size** | **(a)****100% of State Median Income (SMI)** **($/month)** | **(b)****85% of State Median Income (SMI)****($/month)** **[Multiply (a) by 0.85]** | **IF APPLICABLEIncome Level if lower than 85% SMI** |
| --- | --- | --- | --- |
| **(c)****$/month**  | **(d)****% of SMI**[Divide (c) by (a), multiply by 100] |
| 1 | 4440 | 3774 | 908 | 20% |
| 2 | 5870 | 4940 | 1226 | 21% |
| 3 | 7173 | 6097 | 1544 | 22% |
| 4 | 8539 | 7259 | 1863 | 22% |
| 5 | 9906 | 8420 | 2181 | 22% |

**Please note that column (b) represents 85% of State Median**

**Income in New Jersey for Federal Fiscal Year 2012.**

**Please note that column (c) represents our entry/exit level for all families effective 10/01/11: entrance level is based on 200% of the 2011 Federal Poverty Index (FPI); and the exit level is based on 250% of the 2011 FPI. Note: TANF families leaving TCC may enter the CCDF with income up to 250% of the FPI.**

**Reminder** - Income limits must be provided in terms of State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. (§98.20(a)(2)). FY 2013 poverty guidelines are available at <http://aspe.hhs.gov/poverty/13poverty.cfm>

e) Will the Lead Agency have “tiered eligibility” (i.e., a separate income limit at re-determination to remain eligible for the CCDF program)?

[x]  Yes. If yes, **provide** the requested information from the table in 2.3.5d and **describe**      .

**Note:** This information can be included in a separate table, or by placing a “/” between the entry and exit levels in the above table.

[ ]  No.

f) SMI Year       and SMI Source

g) These eligibility limits in column (c) became or will become effective on:

### 2.3.6. Eligibility Re-determination

1. Does the State/Territory follow OCC’s 12 month re-determination recommendation? (See Program Instruction on Continuity of Care <http://www.acf.hhs.gov/programs/occ/resource/im2011-06>

[x]  Yes

[ ]  No. If no, what is the re-determination period in place for most families?

[ ]  6 months

[ ]  24 months

[ ]  Other. Describe

[ ]  Length of eligibility varies by county or other jurisdiction. Describe

1. **Does the Lead Agency coordinate or align re-determination periods with other programs?**

[ ]  Yes.

[x]  No. If no, **check programs that the Lead Agency aligns eligibility periods with and describe the redetermination period for each.**

[ ]  Head Start and/or Early Head Start Programs. Re-determination period

[ ]  Pre-kindergarten programs. Re-determination period

[ ]  TANF. Re-determination period

[ ]  SNAP. Re-determination period

[ ]  Medicaid. Re-determination period

[ ]  SCHIP. Re-determination period

[ ]  Other. Describe

1. Describe under what circumstances, if any, a family’s eligibility would be reviewed prior to redetermination. For example, regularly scheduled interim assessments, or a requirement for families to report changes.

**Pursuant to N.J.A.C. 10:15-2.4(a)(22) the CCR&Rs must conduct redeterminations of eligibility at the beginning of each new service eligibility period or when reported changes necessitate such a redetermination.**

1. Describe any action(s) the State/Territory would take in response to any change in a family’s eligibility circumstances prior to re-determination

**Pursuant to N.J.A.C. 10:15-2.7 (a) changes in circumstances regarding eligibility would include but not be limited to, change in home address, loss of job, change inincome, status change in participation in work/training/educational activity, provider changes, and changes in family size, etc.**

1. Describe how these policies are implemented in a family-friendly manner that promotes access and continuity of care for children. (See Information Memorandum on Continuity of Care for examples <http://www.acf.hhs.gov/programs/occ/resource/im2011-06> ).

Parents are provided training and education around their rights and responsibilities. Parent Handbooks are also made available to parents with easy to follow guides on how to access and maintain child care services.

f) Does the Lead Agency use a simplified process at re-determination?

[ ]  Yes. If yes, describe

[x]  No.

### 2.3.7. Waiting Lists

**Describe the Lead Agency’s waiting list status.** Select **ONE** of these options.

[x]  Lead Agency currently does not have a waiting list and:

[x]  All eligible families *who apply* will be served under State/Territory eligibility rules

[ ]  Not all eligible families *who apply* will be served under State/Territory eligibility rules

[ ]  Lead Agency has an active waiting list for:

[ ]  Any eligible family who applies when they cannot be served at the time of application

[ ]  Only certain eligible families. Describe those families:

[ ]  Waiting lists are a county/local decision. Describe

[ ]  Other. Describe

### 2.3.8. Appeal Process for Eligibility Determinations

Describe the process for families to appeal eligibility determinations

**Parent/applicants who wish to have a recent decision or adverse action reviewed, may request a review from the county Child Care Resource and Referral Agency (CCR&R) and/or the Division of Family Development.**

**CCR&R Appeal: In the event a parent/applicant requests a local CCR&R appeal of an action or amount in question, by the county CCR&R responsible for the decision, the parent/applicant must make this request in writing within 10 days of the effective date of the adverse decision. Requests should be addressed to the agency that made the decision.**

**The parent/applicant will be notified of the date and time of the review and may appear with or without legal representation or may be represented by a friend or other spokesman. Only those persons directly involved with the issue will be permitted to attend any review proceedings. Parents/applicants will also be given an opportunity to view all pertinent documents prior to the review date.**

**Administrative review conducted by the Division of Family Development:**

**A parent/applicant may also have an adverse decision reviewed by the Division of Family Development (DFD) in place of, or in addition to, the case review conducted by the county CCR&R. A request for an administrative review from DFD may be made by calling the Bureau of Administrative Review and Appeals (BARA) at 1-800-792-9774.**

**The parent/applicant will be required to submit the following to BARA:**

**● A written statement indicating the request for a review and the reason for the disagreement;**

**● All documents verifying eligibility and justifying the review;**

**● Any other relevant documents which the parent/applicant believes the county CCR&R may not have considered.**

**This review must be requested within 90 days of the date of the original notice of adverse action. All materials should be mailed to BARA.**

## 2.4. Sliding Fee Scale and Family Contribution

The statute and regulations require Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care (658E(c)(3)(B) §98.42).

### 2.4.1. Attach a copy of the sliding fee scale as Attachment 2.4.1.

Will the attached sliding fee scale be used in all parts of the State/Territory?

[x]  Yes. Effective Date

[ ]  No. If no, attach other sliding fee scales and their effective date(s) as **Attachment 2.4.1a, 2.4.1b**, etc.

### 2.4.2. What income source and year will be used in creating the sliding fee scale? (658E(c)(3)(B))

Check only one option.

[ ]  State Median Income, Year:

[x]  Federal Poverty Level, Year: **October 1, 2011**

[ ]  Income source and year varies by geographic region. Describe income source and year:

[ ]  Other. Describe income source and year:

### 2.4.3. How will the family’s contribution be calculated and to whom will it be applied?

Check all that the Lead Agency has chosen to use. (§98.42(b))

[x]  Fee is a dollar amount and

[ ]  Fee is per child with the same fee for each child

[x]  Fee is per child and discounted fee for two or more children

[ ]  Fee is per child up to a maximum per family

[x]  No additional fee charged after certain number of children

[ ]  Fee is per family

[ ]  Fee is a percent of income and

[ ]  Fee is per child with the same percentage applied for each child

[ ]  Fee is per child and discounted percentage applied for two or more children

[ ]  No additional percentage applied charged after certain number of children

[ ]  Fee is per family

[ ]  Contribution schedule varies by geographic area. Describe:

[ ]  Other. Describe

**If the Lead Agency checked more than one of the options above, describe**

### 2.4.4. Will the Lead Agency use other factors in addition to income and family size to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

[ ]  Yes, and describe those additional factors:

[x]  No.

### 2.4.5. The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size. (§98.42(c)).

Select **ONE** of these options.

**Reminder** – Lead Agencies are reminded that the co-payments may be waived for only two circumstances - for families at or below the poverty level or on a case-by-case basis for children falling under the definition of “protective services” (as defined in 2.3.4.a).

[ ]  ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.

[x]  NO families with income at or below the poverty level for a family of the same size ARE required to pay a fee. The poverty level used by the Lead Agency for a family of 3 is: $18,530

 **May be reduced or waived by a Division of Child Protection and Permanency Case Manager on a case-by-case basis, if it has been determined that payment of the full co-payment amount will cause undue hardship to a CPS family or place the child, the siblings or the protective service treatment plan in jeopardy.**

[ ]  SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The Lead Agency waives the fee for the following families:

## 2.5. Prioritizing Services for Eligible Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B), §98.44)

### 2.5.1. How will the Lead Agency prioritize child care services to children with special needs or in families with very low incomes? (658E(c)(3)(B), §98.44)

Lead Agencies have the discretion to define *children with special needs* and *children in families with very low incomes*. Lead Agencies are not limited in defining *children with special needs* to only those children with physical or mental disabilities (e.g., with a formal Individual Education Plan (IEP) required under the Individuals with Disabilities Education Act (IDEA)). Lead Agencies could consider children in the child welfare system, children of teen parents, or homeless children as examples of *children with special needs*.

| **How will the Lead Agency prioritize CCDF services for:** | **Eligibility Priority (Check only one)** | **Is there a time limit on the eligibility priority or guarantee?**  | **Other Priority Rules** |
| --- | --- | --- | --- |
| Children with special needs**Provide the Lead Agency definition of** *Children with* *Special Needs* **See Below** | [x]  Priority over other CCDF-eligible families[ ]  Same priority as other CCDF-eligible families[ ]  Guaranteed subsidy eligibility[ ]  Other. Describe       | [ ]  Yes. The time limit is:      [x]  No | [ ]  Different eligibility thresholds. Describe      [ ]  Higher rates for providers caring for children with special needs requiring additional care[ ]  Prioritizes quality funds for providers serving these children[ ]  Other. Describe       |
| Children in families with very low incomes**Provide the Lead Agency definition of** *Children in Families with Very Low Incomes* **See Below** | [x]  Priority over other CCDF-eligible families[ ]  Same priority as other CCDF-eligible families[ ]  Guaranteed subsidy eligibility[ ]  Other. Describe       | [ ]  Yes. The time limit is:      [x]  No | [ ]  Different eligibility thresholds. Describe      [ ]  Waiving co-payments for families with incomes at or below the Federal Poverty Level[ ]  Other. Describe       |

**\*Children with Special Needs - A child that has been identified through a written referral from a county welfare agency; DCP&P; legal, medical, or social service agency; emergency shelter; or public school; which indicates that the child has a serious physical, emotional, mental or cognitive condition and child care services are required as part of a treatment plan designed to stabilize, ameliorate the situation and/or prevent the placement of the child outside the home. The child’s social or medical diagnosis must be documented as a result of a standardized developmental or psychological test given by a certified professional or physician. Parents must need child care services in order to remain in full-time employment or in a full-time training/education program.**

**\*Children in Families with Very Low Incomes - Very low income for child care services under the CCDF is defined as families with income at or below 150 percent of the Federal Poverty Index, as determined by family size.**

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

**Reminder** - CCDF requires that not less than 70 percent of CCDF Mandatory and Matching funds be used to provide child care assistance for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF.

[x]  Use priority rules to meet the needs of TANF families (describe in 2.5.1 or 2.5.3.)

[x]  Waive fees (co-payments) for some or all TANF families who are below poverty level

[x]  Coordinate with other entities (i.e. TANF office, other State/Territory agencies, and contractors)

[ ]  Other:

### 2.5.3. List and define any other eligibility conditions, priority rules and definitions that will be established by the Lead Agency. (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

**Reminder** – Lead Agencies are reminded that any eligibility criteria and terms provided below must comply with the eligibility requirements of §98.20 and provided in section 2.2. Any priority rules provided must comply with the priority requirements of §98.44 and provided in section 2.4.1.

| **Term(s)** | **Definition(s)** |
| --- | --- |
| **Post Transitional Child Care (Post TCC) Services** | **Post TCC has been established for TANF families who have exhausted their 24 months of TCC eligibility and are eligible for the Child Care Assistance Program (CCAP), but have not yet moved into the CCAP program. All eligible families are reassigned to the Post TCC program for up to one year, until September 30, in the contract year they are assigned to the Post TCC program. Effective October 1, the beginning of the new contract year, those families currently receiving services in the Post TCC program will get reassigned or re-determined to the Child Care Assistance Program (CCAP).** |
|  |  |
|  |  |

## 2.6. Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receives or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A), §98.15(a)).

### 2.6.1. Child Care Certificates

a) When is the child care certificate (also referred to as voucher or authorization) issued to parents? (658E(c)(2)(A)(iii), 658P(2), §98.2, §98.30(c)(4) & (e)(1) & (2))

[x]  Before parent has selected a provider

[ ]  After parent has selected a provider

[ ]  Other. Describe

**Parents seeking services utilize the universal child care application which is submitted to the CCR&R in their respective counties. Once the parent/applicant is determined eligible to receive a child care subsidy by the Child Care Resource and Referral (CCR&R) agency, the applicant and the child care provider selected by the parent completes a contract outlining agreed child care services, payment and respective responsibilities. With the elimination of paper vouchers, implemention of our electronic payment system, authorized agreeements are considered certificates.**

b) How does the Lead Agency inform parents that the child care certificate permits them to choose from a variety of child care categories, including child care centers, child care group homes, family child care homes, and in-home providers? (§98.30(e)(2))

[ ]  Certificate form provides information about choice of providers

[x]  Certificate is not linked to a specific provider so parents can choose provider of choice

[x]  Consumer education materials (flyers, forms, brochures)

[x]  Referral to child care resource and referral agencies

[x]  Verbal communication at the time of application

[ ]  Public Services Announcement

[ ]  Agency Website:

[ ]  Community outreach meetings, workshops, other in person activities

[x]  Multiple points of communication throughout the eligibility and renew process

[ ]  Other. Describe

c) What information is included on the child care certificate? **Attach a copy of the child care certificate as Attachment 2.6.1.** (658E(c)(2)(A)(iii))

[x]  Authorized provider(s)

[x]  Authorized payment rate(s)

[x]  Authorized hours

[x]  Co-payment amount

[x]  Authorization period

[ ]  Other. Describe

d) What is the estimated proportion of services that will be available for child care services through certificates?

**All authorized agreements, also known as certificates are processed through the CCR&R as of July 2011. However, funding allocations equal to 16% of child care funds, which are targeted for a network of community based centers that provide services to our families.**

### 2.6.2. Child Care Services Available through Grants or Contracts

1. In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b)). **Note**: Do not check “yes” if every provider is simply required to sign an agreement in order to be paid in the certificate program.

[x]  Yes. If yes, **describe** the type(s) of child care services available through grants or contracts, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts:

**From July 2011 to Janaury 2012, direct contracts with community based**

**providers were phased out. CCR&Rs are the single eligibility agents to**

**determine eligibility. However, 16% of child care funds are dedicated to**

**a network of community child care centers.**

[ ]  No. If no, skip to 2.6.3.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following? Check the strategies, if any, that your State/Territory chooses to implement.

[x]  Increase the supply of specific types of care

[x]  Programs to serve children with special needs

**Statewide Parent Advocacy Network (SPAN) to increase services for children with special needs by assisting children with being more inclusive.**

[x]  Wrap-around or integrated child care in Head Start, Early Head Start, pre-k, summer or other programs

**Preschool Summer Enrichment and Literacy Program and Summer School Aged Camp**

[x]  Programs to serve infant/toddler

**Infant Toddler Network: contract with three resource and referral agencies to employ Infant Toddler Specialists throughout the state to provide training and technical assistance in providing higher quality care.**

[x]  School-age programs

**NJSACC provides training and technical assistance to afterschool providers in designing and implementing a quality afterschool program.**

[x]  Center-based providers

[ ]  Family child care providers

[ ]  Group-home providers

[ ]  Programs that serve specific geographic areas

[ ]  Urban

[ ]  Rural

[ ]  Other. Describe

[x]  Support programs in providing higher quality services

**NJ will be piloting Grow NJ Kids, a QRIS Initiative**

[x]  Support programs in providing comprehensive services

**Strengthening Family through Early Care and Education: Resource and Referral agencies are contracted to provide training and technical assistance to 184 centers throughout the state with implementing the strengthening families model and 5 Protective Factors.**

[ ]  Serve underserved families. Specify:

[ ]  Other. Describe

c) Are child care services provided through grants or contracts offered throughout the State/Territory? (658E(a), §98.16(g)(3))

[x]  Yes.

**Effective July 2011 contracts were phased and converted into vouchers in preparation for the electroninc child care payment system. Targeted funds are allocated for a network of community child care centers statewide.**

[ ]  No, and **identify** the localities (political subdivisions) and services that are not offered:

d) How are payment rates for child care services provided through grants/contracts determined?

**NJ has one universally applied state rate that is applicable to all program types and settings.**

1. What is the estimated proportion of direct services that will be available for child care services through grants/contracts?

**16% are targeted for community child care centers.**

### 2.6.3. How will the Lead Agency inform parents and providers of policies and procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds? (658E(c)(2)(B), §98.31))

Check the strategies that will be implemented by your State/Territory.

[ ]  Signed declaration

[ ]  Parent Application

[x]  Parent Orientation

[ ]  Provider Agreement

[ ]  Provider Orientation

[x]  Other. Describe:

**Parents/applicants are also informed of unlimited access through the parent handbook, Manual of Requirements for Child Care Centers and the Manual of Requirements for Family Child Care Registration.**

### 2.6.4. The Lead Agency must allow for in-home care (i.e., care provided in the child’s own home) but may limit its use. (§§98.16(g)(2), 98.30(e)(1)(iv))

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

[ ]  No

[x]  Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all limits the Lead Agency will establish.

[ ]  Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act

[x]  Restricted based on provider meeting a minimum age requirement

[ ]  Restricted based on hours of care (certain number of hours, non-traditional work hours)

[ ]  Restricted to care by relatives

[ ]  Restricted to care for children with special needs or medical condition

[x]  Restricted to in-home providers that meet some basic health and safety requirements

[x]  Other. Describe

**In-home care providers may be used for child care services in the home of a child for fewer than twenty-four (24) hours per day.**

**FFN providers are self-employed individuals who are selected by a subsidy eligible family to provide care for eligible children. FFN providers and in-home providers receive payment for providing child care on behalf of the parent/guardian through the county Child Care Resource and Referral Agency.**

**For FFN providers and in-home providers in New Jersey, N.J.S.A.C. 30:5B-32 requires all prospective FFN or in-home providers and all members of the prospective provider’s household (or the household where the care is provided) who are at least 14 years of age, must provide written consent for DHS, through the DCF Office of Licensing, to conduct a Child Abuse Record Information (CARI) background check to determine whether an incident of child abuse or neglect has been substantiated against any such person. A CARI background check is a significant component of the approval process for approved homes and in-home providers.**

### 2.6.5. Describe how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available to the public on request. (658E(c)(2)(C), §98.32)

### In keeping with provisions of the New Jersey State Child Care Center Licensing Law (N.J.S.A. 30:5B-1 to 15), and the Family Day Care Provider Registration Act of 1987 (N.J.S.A. 30:5B-16, et seq.), the following information applies to parental complaints:

### Whenever the DCF Office of Licensing (OOL) receives a report questioning the licensing status of a program, center or sponsoring organization, or alleging that a licensed center is violating provisions of the Manual of Requirements for Child Care Centers (N.J.A.C. 10:122) the OOL ensures that the allegation is promptly investigated to determine whether the complaint is substantiated.

### Files maintained by the OOL are public records and must be readily accessible for examination by any person, under the direction and supervision of OOL personnel, except when public access to records is restricted, in accordance with the State Open Public Records Act or other applicable statutes.

### Parents are entitled to review the center’s or sponsoring organization’s copy of the Inspection/Violation Report regarding a particular center, sponsoring organization or provider which is issued after every licensing inspection. Parents are also entitled to review the Complaint Investigation Summary Report, as well as any letters of enforcement or other actions taken against the center, sponsoring organization or provider during the current regulatory period.

### Child care centers and sponsoring organizations must arrange a convenient opportunity for parents to review any of the above information upon request of the parent.

### If any parent suspects that a center, sponsoring organization or provider may be in violation of licensing requirements, he/she may directly contact the OOL at (609) 826-3980 (North) or (609) 777-5945 (South). This may be done anonymously.

### In keeping with New Jersey’s child care center licensing and family child care registration requirements, all licensed providers of child care and sponsoring organizations must notify all parents of children enrolled for care of the above requirements, in writing, through an “Information to Parents Statement.” CCR&Rs assist families with reporting suspected abuse, neglect and licensing violations.

## 2.7. Payment Rates for Child Care Services

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

### 2.7.1 Attach a copy of your payment rates as Attachment 2.7.1.

Will the attached payment rates be used in all parts of the State/Territory?

[x]  Yes. Effective Date: **July 1, 2009**

[ ]  No. If no, attach other payment rates and their effective date(s) as **Attachment 2.7.1a, 2.7.1b**, etc.

### 2.7.2. Which strategies, if any, will the Lead Agency use to ensure the timeliness of payments?

[x]  Policy on length of time for making payments. Describe length of time

**NJ has an automated payment systems that pays providers biweekly.**

**When manual payments are executed by the CCR&R, we have policies**

**that those payments must be issued within 2 weeks of receiving a**

**payment discrepancy form.**

[x]  Track and monitor the payment process

**Currently done by the Fiscal Office**

[ ]  Other. Describe

[ ]  None

### 2.7.3. Market Rate Survey

Lead Agencies must complete a local Market Rate Survey (MRS) no earlier than two years prior to the effective date of the Plan (no earlier than October 1, 2011). The MRS must be completed prior to the submission of the CCDF Plan (see Program Instruction CCDF-ACF-PI-2009-02 <http://www.acf.hhs.gov/programs/occ/resource/pi-2009-02> for more information on the MRS deadline).

a) Provide the month and year when the local Market Rate Survey(s) wascompleted (§98.43(b)(2)): **April 2013**.

b) Provide a **summary of the results** of the survey**.**       The summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

The Department of Human Services’ (DHS) Office of Research and Evaluation (ORE) worked with the Division of Family Development (DFD) and New Jersey’s Child Care Resource and Referral agencies (CCR&Rs) to conduct New Jersey’s child care market rate survey.

The Department distributed surveys to licensed child care centers in the fall of 2012. Child Care Resource and Referral agencies were contacted to provide information about family providers as well as some non-responding child care centers. Responses were received from 1,491 of the 3,743 qualifying child care centers and summarized by CCR&Rs for 2,243 registered family chi DFD’s Office of Child Care Operations mailed surveys to child care centers in September 2012; surveys were accompanied by letters from the Director of the Division of Family Development and instructions for completing the survey. Providers could complete the survey online or complete a hard copy that could be returned to DHS by fax or mail.

The desired response rate was 50% among qualifying providers. To ensure an adequate response rate, Office of Child Care Operations followed up the surveys with postcard reminders to non-responding centers. Staff also made phone calls to non-responding centers and searched for rates on center internet websites.

Findings showed the highest average full-time rates for the care of infants, followed by toddlers, preschool and school age children. Centers charged substantially higher rates than family child care providers for most types of care, ranging from the lowest of about $36 more per week for weekly preschool care to the most, about $56 per week more for weekly infant care. Differences are greater for centers that charge monthly rates for care of children under six years old. These differences may reflect the different services available for children served in centers or the greater concentration of family child care in urban communities more apt to be low-income. Child care subsidies offer families a wider choice among family child care providers than among centers for care of children under 6 years old, particularly in more affluent locales where rates are the highest.

By contrast, mean rates for before and/or after school care are higher among family child care providers. This may reflect the limited number of children family providers can care for in their homes or the patterns of family use of before/after school care.

The data collection instruments were central to this collaboration. Research and program staff at DFD generated questions about full-time rates charged for different age groups and program types based on different payment schedules, e.g., weekly or monthly. Additional questions captured information regarding additional fees or charges, discounts when more than one child was enrolled, acceptance of children with subsidies and hours of program operation. For family providers, modifications were made consistent with the data already reported on the NJ Association of Child Care Resource & Referral Agencies (NJACCRRA) database. Information from these sources was augmented by descriptive information from existing child care provider databases maintained by the NJ Department of Children and Families’ Office of Licensing.

**Methods**

The New Jersey Department of Children and Families (DCF) was the primary source for information about licensed child care centers. The DCF maintains a database of all licensed child care centers. In August 2012, the DCF Office of Licensing provided DHS ORE with an unduplicated list of 3,743 currently operating child care centers. Excluded from the list were Head Start programs and centers receiving Child Care Development Fund (CCDF) dollars to provide child care services through a contract with the Division of Family Development; these centers do not charge families for child care.

### 2.7.4. Describe the payment rate ceilings in relation to the current MRS using the tables below.

Because of the flexibility that Lead Agencies have in setting payment rate ceilings, the following tables have been developed to simplify Lead Agency reporting on how their payment rate ceilings compare to their most recent MRS. These tables are not meant to collect comprehensive payment rate ceilings within a State/Territory and ACF recognizes that Lead Agencies are not required to set their payment rate ceilings at the 75th percentile. These tables allow Lead Agencies to use a common metric – the 75th percentile – as a reference point against which the Lead Agency can report their percentiles for three selected age groups in two geographic areas for licensed child care centers and licensed family child care homes.

In table 2.7.4a and 2.7.4b, *highest rate area* refers to the State or Territory’s area or geographic region with the highest maximum payment rate ceiling for child care centers (2.7.4a) and family child care homes (2.7.4b). Identify the highest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75th percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) ONLY IF the percentile for the monthly maximum payment rate ceiling is lower than the 75th percentile of the most recent MRS.

**Note** - Report the “base” maximum reimbursement rate ceiling, not including any rate add-ons or tiered reimbursements. For example, if maximum reimbursement rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the tables below (e.g., bronze), **only** if there is no lower “base” rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, Lead Agencies can use the following assumptions to calculate monthly maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

| **2.7.4a – Highest Rate Area (Centers)****NEW** | **(a)****Monthly Payment Rate at the 75th percentile from the most recent MRS** | **(b)****Monthly Maximum Payment Rate Ceiling** | **(c)****Percentile if lower than 75th percentile of most recent survey** |
| --- | --- | --- | --- |
| Full-Time Licensed Center Infants (11 months) | $1,199.00  | $695.40  | Between 7th and 8th Percentile |
| Full-Time Licensed Center Preschool (59 months) | $1,000.00  | $573.30  | Between 6th and 7th Percentile |
| Full-Time Licensed Center School-Age (84 months) | $1,095.49  | $573.30  | Between 12th and 13th Percentile |

| **2.7.4b – Lowest Rate Area (Centers)** | **(a)****Monthly Payment Rate at the 75th percentile of the most recent MRS** | **(b)****Monthly Maximum Payment Rate Ceiling** | **(c)****Percentile if lower than 75th percentile of most recent survey** |
| --- | --- | --- | --- |
| Full-Time Licensed Center Infants (11 months) | $995.36  | $695.40  | 15th Percentile |
| Full-Time Licensed Center Preschool (59 months) | $866.00  | $573.30  | 8th Percentile |
| Full-Time Licensed Center School-Age (84 months) | $906.05  | $573.30  | Between 11th and 12th Percentile |

In table 2.7.4c and 2.7.4d, *lowest rate area* refers to the State or Territory’s area or geographic region with the lowest maximum payment rate ceiling for child care centers and family child care homes. Identify the lowest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75th percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) ONLY IF the percentile for the monthly maximum payment rate ceiling is lower than the 75th percentile of the most recent MRS.

**Note** - Report the “base” maximum reimbursement rate ceilings, not including any rate add-ons or tiered reimbursement. For example, if maximum reimbursement rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the tables below (e.g., bronze), **only** if there is no lower “base” rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, Lead Agencies can use the following assumptions to calculate monthly maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

| **2.7.4c – Highest Rate Area (FCC)** | **(a)****Monthly Payment Rate at the 75th percentile of the most recent MRS** | **(b)****Monthly Maximum Payment Rate Ceiling** | **(c)****Percentile if lower than 75th percentile of most recent survey** |
| --- | --- | --- | --- |
| Full-Time Licensed FCC Infants (11 months) |  |  |  |
| Full-Time Licensed FCC Preschool (59 months) |  |  |  |
| Full-Time Licensed FCC School-Age (84 months) |  |  |  |

| **2.7.4d – Lowest Rate Area (FCC)** | **(a)****Monthly Payment Rate at the 75th percentile of the most recent MRS** | **(b)****Monthly Maximum Payment Rate Ceiling** | **(c)****Percentile if lower than 75th percentile of most recent survey** |
| --- | --- | --- | --- |
| Full-Time Licensed FCC Infants (11 months) |  |  |  |
| Full-Time Licensed FCC Preschool (59 months) |  |  |  |
| Full-Time Licensed FCC School-Age (84 months) |  |  |  |

### 2.7.5. How are payment rate ceilings for license-exempt providers set?

1. Describe how license-exempt center payment rates are set:
2. Describe how license-exempt family child care home payment rates are set:
3. Describe how license-exempt group family child care home payment rates are set:
4. Describe how in-home care payment rates are set:

**Payment rates used for subsidy reimbursements in New Jersey are less than the current market rates for some categories of care. The actual market rate comparison is included in the final Market Rate survey analysis in attachment 2.7.4.**

**2.7.6 Will the Lead Agency provide any type of tiered reimbursement or differential rates on top of its base reimbur**s**ement rates for providing care for children receiving CCDF subsidies?**

Check which types of tiered reimbursement, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates and amount and also indicate if the rates were set based on the MRS or another process.

[ ]  Differential rate for nontraditional hours. Describe

[ ]  Differential rate for children with special needs as defined by the State/Territory. Describe

[x]  Differential rate for infants and toddlers. Describe

**New Jersey has a slightly higher rate for Infants/Toddlers and Early Pre-school up to 2.5 years of age.**

[ ]  Differential rate for school-age programs. Describe

[x]  Differential rate for higher quality as defined by the State/Territory. Describe

**As an incentive to increase the quality of child care in New Jersey, the rates the State pays to licensed child care centers, registered family child care homes and summer camps that have achieved national accreditation are increased by 5 percent over the maximum rates for those centers, registered family child care homes, and summer camps meeting basic licensing requirements.**

[ ]  Other differential rate. Describe

[ ]  None.

**Reminder -** CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. In the next three questions, Lead Agencies are asked to describe how their payment policies reflect the affordable copayments for families’ provision of equal access (i.e., minimizing additional fees to parents), how payment practices are implemented consistent with the general child care market to be fair to providers (see Information Memorandum on Continuity of Care for examples <http://www.acf.hhs.gov/programs/occ/resource/im2011-06> ), and the summary of facts describing how payment rates are adequate to ensure equal access to the full range of providers.

**2.7.7. What policies does the Lead Agency have regarding any additional fees that providers may charge CCDF parents? The Lead Agency…**

[x]  Allows providers to charge the difference between the maximum reimbursement rate and their private pay rate

[ ]  Pays for provider fees (e.g., registration, meals, and supplies). Describe

[ ]  Policies vary across region, counties and or geographic areas. Describe

[ ]  Other. Describe

**2.7.8** **What specific policies and practices does the Lead Agency have regarding the following:**

1. Number of absent days allowed. Describe

**The state will pay for a maximum of five (5) consecutive, sick days per child within a two (2) week period. Sick days exceeding five consecutive days during the service period will not receive payment.**

1. Paying based on enrollment. Describe

**Providers are not paid based upon on enrollment but will receive full reimbursement for services when a minimum 80% (8 days) level of service is delivered/provided within a two (2) week (10 days) service period.**

1. Paying on the same schedule that providers charge private pay families (e.g., hourly, weekly, monthly)

**Payment is based upon a 2 week service period.**

1. Using electronic tools (automated billing, direct deposit, EBT cards, etc.) to make provider payments. Describe

**DFD utilizes E-Child Care (ECC), an electronic child care time and attendance system. All providers are required to utilize ECC to report child care time and attendance. ECC will issue payment to all child care providers throught the automated calculation of benefits and direct the deposit of funds into provider accounts on a biweekly basis.**

### 2.7.9. Describe how payment rates are adequate to ensure equal access to the full range of providers based on the Market Rate Survey.

CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. To demonstrate equal access, the Lead Agency shall provide at a minimum a summary of facts describing: (§98.43(a))

1. How a choice of the full range of providers, e.g., child care centers, family child care homes, group child care homes and in-home care, is made available (§98.43(a)(1))

DFD, through the CCR&Rs, ensures that parents have freedom of choice in selecting child care arrangements and are provided with flexibility to choose the location and type of provider that best meets parents' and children's child care needs. Providers are encouraged to accept DFD rates, but may charge parents the difference between the maximum reimbursement rate and what the center charges for a private paying customer. Target network providers are not permitted to charge parents the difference between the DFD contracted rate and what the center charges private paying customers.

1. How payment rates are adequate based on the most recent local MRS (§98.43(a)(2))

New Jersey utilizes the information from the Market Rate Survey as one consideration used to establish the rates that providers will be reimbursed for child care costs and any potential cost of living

adjustments. Payment rates reflected in Attachment 2.7.1 are the maximum reimbursement rates for the full range of providers in New Jersey. Payment rates used for subsidy reimbursements in New

Jersey are less than the current market rates for some categories of care.

1. How family co-payments based on a sliding fee scale are affordable (§98.43(a)(3))

The average co-payment for a family of three with annual income of $18,531 (over 100% of the Federal Poverty Index) for full-time child care is approximately $76.51 per month which represents 5% of gross family income.

For all DFD voucher (certificate) payments, the number of hours child care services are being provided to the child is as follows:

**·**Full-time care is defined as care for 30 hours or more per week for co-payment purposes.

·Part-time care is defined as care for less than 30 hours per week for co-payment purposes.

In no case may the co-payment exceed the cost of care. Once the co-payment is determined, it remains unchanged for the duration of the eligibility period (up to 12 months), unless there is a change in family size, gross family income, or a change in care from fulltime to part-time or vice versa. In DFD voucher programs, the participant must notify the CCR&R of any changes relating to family size, income, work status, home address or training/educational program

attendance.

In the NJCK and TCC, an exception is made in the case of co-payment for school-age children. The CCR&R determines a part-time co-payment for all school-age children, unless the school-age child is in full-time child care for the entire period of the 12 month agreement. Only in this instance, shall the copayment be based on the full-time arrangement.

d) Any additional facts the Lead Agency considered to determine that its payment rates ensure equal access, including how the quality of child care providers is taken into account when setting rates and whether any other methodologies (e.g., cost estimation models) are used in setting payment rates

Payment rates reflected in Attachment 2.7.1 are the maximum reimbursement rates for the full range of providers in New Jersey. DFD, through the CCR&Rs, ensures that parents have freedom of choice iselecting child care arrangements and are provided with flexibility to choose the location and type of provider that best meets parents' and children's child care needs. Providers are encouraged to accept DFD rates, but may charge parents the difference between the maximum reimbursement rate and what the center charges for a private paying customer.

As a result, this could lead to more equal access for parents and support providers' ability to charge rates that are more consistent with their actual market rates. In addition, to ensure that those receiving subsidy are able to purchase the same quality of care as someone not receiving a susidy, the CCR&Rs request from providers and share with parents all excessive fees charged by providers so that parents are educated on the actual cost of care and can make an informed decision about whether they wish to utilize that provider. To increase the parity of the quality of care being accessed, DFD through our quality initiaives aims to increase the quality of care being provided at subsidized centers by funding such quality initiaitve as professional development offerings for entry level staff at subsidized centers, offering financial assistance with the pursuit of Child Development Associates, and developing and offering such credentials as the Infant Toddler Crediential, Administrator's Credential, and Core Knowledge and competencies standards for center staff. Target funded community based providers are not permitted to charge parents the difference between the DFD contracted rate and what the center charges private paying customers.

## 2.8 Goals for the next Biennium

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the Lead Agency’s goals for the administration of the CCDF subsidy program in the coming Biennium? For example, what progress does the State/Territory expect to make on continuing improved services to parents and providers, continuity of care for children, improving outreach to parents and providers, building or expanding information technology systems, or revising rate setting policies or practices).

**Note** – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Goal 1 – To implement the QRIS system, NJ Grow Kids, statewide

Goal 2 - To continue to serve all children without creating a waiting list

Goal 3 - To increase children access to higher quality of care

Goal 4 - To support child care providers move towards higher standards of care.

Goal 5 - Integrate professional development workforce system with QRIS, NJ Grow NJ Kids

# PART 3Health and Safety and Quality Improvement Activities

In this section, Lead Agencies are asked to describe their goals and plans for implementation of child care quality improvement activities. Under the Child Care and Development Block Grant Act, Lead Agencies have significant responsibility for ensuring the health and safety of children in child care through the State/Territory’s child care licensing system and establishing health and safety standards for children who receive CCDF funds. Health and safety is the foundation of quality, but is not adequate to ensure that programs and staff are competent in supporting all areas of child development and promoting school success.

Quality investments and support systems to promote continuous quality improvement of both programs and the staff who work in them are a core element of CCDF. Lead Agencies have been reporting on their efforts to support program quality improvement and professional development since their initial Plans in 1999. This section allows Lead Agencies to continue to describe the steps that they are taking toward continuous quality improvement with a goal of having high quality child care options across settings for all families. While one of the key goals for CCDF is helping more low-income children access higher quality care, the Lead Agency has the flexibility to consider its goals and strategic plans for a child care quality improvement system for all families, not just those receiving assistance under CCDF.

Part 3 is organized around a template of four key components of quality which encompass most of the quality investments and initiatives undertaken by Lead Agencies over the past decade:

1. Ensuring health and safety of children through **licensing and health and safety standards**
2. Establishing **early learning guidelines**
3. Creating pathways to excellence for child care programsthrough **program quality improvement activities**
4. Creating pathways to an effective, well-supported child care workforce through **professional development systems and workforce initiatives.**

For each component, Lead Agencies are asked to conduct a three-step process. First, in this section, Lead Agencies will conduct a self-assessment of their programs by responding to the questions in Part 3 that describe the current status of their efforts, using common practices and best practices to list characteristics that build off those that have been reported in previous plans. Second, Lead Agencies then are asked to identify goals for making progress during the FY 2014-2015 biennium and describe their data, performance measure and evaluation capacity for each component. Third, Lead Agencies will report progress on their goals using the Quality Performance Report which is included and described in Appendix 1. The QPR will not be submitted until December 31, 2014.

Based on information reported in past plans, it is expected that the Lead Agency will describe in these first two steps how they will continue to make systematic investments towards child care quality improvement across its early childhood and school-age spectrum – including all settings, geographic coverage and age range – that will help show progress toward these outcomes and goals. Ultimately, these child care quality improvement elements should be fully implemented and integrated. Each State/Territory is expected to fall on a continuum of progress as a result of these first two steps. Lead Agency’s individual progress will reported using the Quality Performance Report.

## 3.1. Activities to Ensure the Health and Safety of Children in Child Care (Component #1)

This section is intended to collect information on how Lead Agencies meet the statutory and regulatory provisions related to licensing and health and safety requirements. The CCDBG statute and the CCDF regulations address health and safety primarily in two ways.

First, Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced. Questions related to licensing requirements are in sections 3.1.1 and 3.1.2. Second, Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Questions related to CCDF Health and Safety requirements are in sections 3.1.3 and 3.1.4.

### 3.1.1. Compliance with Applicable State/Territory and Local Regulatory Requirements on Licensing

Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced.

**Definition**: Licensing requirements are defined as regulatory requirements, including registration or certification requirements established under State, local, or tribal law, necessary for a provider to legally operate and provide child care services in a State or locality (§98.2). This does not include registration or certification requirements solely for child care providers to be eligible to participate in the CCDF program. Those requirements will be addressed in 3.1.2.

The relationship between licensing requirements and health and safety requirements varies by State/Territory depending on how comprehensive the licensing system is. In some States and Territories, licensing may apply to the majority of CCDF-eligible providers and the licensing standards cover the three CCDF health and safety requirements so the State/Territory has few, if any, providers for whom they need to establish additional CCDF health and safety requirements. In other cases, States and Territories have elected to exempt large numbers of providers from licensing which means that those exempted providers who care for children receiving assistance from CCDF will have to meet to the CCDF health and safety requirements through an alternative process outside of licensing as defined by the State/Territory. The State/Territory may also elect to impose more stringent standards and licensing or regulatory requirements on child care providers of services for which assistance is provided under the CCDF than the standards or requirements imposed on other child care providers. (§98.40(b)(1)) (658E(c)(2)(F), §98.41).

a) Is the Lead Agency responsible for child care licensing? (§98.11(a))

[ ]  Yes.

[x]  No. Please identify the State or local (if applicable) entity/agency responsible for licensing Department of Children and Families, Office of Licensing

Provide a brief overview of the relationship between the licensing requirements and CCDF health and safety requirements in your State/Territory.

The Manual of Requirements for Child Care Centers N.J.A.C. 10:122 and the Manual of Requirements for Family Child Care Registration NJAC 10:126 serve as the CCDF health and safety requirements for licensed child care centers and Family Child Care Providers.

Do the State/Territory’s licensing requirements serve as the CCDF health and safety requirements?

|  | Center-Based Child Care | Group Home Child Care[x]  N/A. Check if your State/Territory does not have group home child care. | Family Child Care | In-Home Care[ ]  N/A. Check if in-home care is not subject to licensing in your State/Territory. |
| --- | --- | --- | --- | --- |
| Yes, for all providers in this category | [x]  | [ ]  | [x]  | [x]  |
| Yes, for some providers in this category | Describe       | Describe       | Describe       | Describe       |
| No | [ ]  | [ ]  | [ ]  | [ ]  |
| Other | Describe       | Describe       | Describe       | Describe       |

d) CCDF identifies and defines four categories of care: child care centers, family child care homes, group child care homes and in-home child care providers (§98.2). The CCDF definition for each category is listed below. For each CCDF categoryof care, please identify which types of providers are subject to licensing and which providers are exempt from licensing in your State/Territory in the chart below**. Note: OCC recognizes that each State/Territory identifies and defines its own categories of care. OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care but consistent with your reported 801 data.**

| CCDF Category of Care | CCDF Definition (§98.2) | Which providers in your State/Territory are subject to licensing under this CCDF category? | Are any providers in your State/Territory which fall under this CCDF category exempt from licensing? |
| --- | --- | --- | --- |
| Center-Based Child Care | Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)’ work. | Describe which types of center-based settings are subject to licensing in your State/Territory       | Describe which types of center-based settings are exempt from licensing in your State/Territory A child care program operated by the board of education of a local public school; A child care program operated by, and whose employees are paid by, a private school which is run solely for educational purposes. Such programs shall include kindergartens, pre-kindergarten programs or child care centers that are an integral part of the private educational institution or system offering elementary education in grades kindergarten through sixth, seventh or eighth which enable enrollment into a high school or secondary school program; and a child care program operating within a geographic area, enclave or facility that is owned and/or operated by the Federal government. Summer camps shall be approved by the New Jersey Department of Health pursuant to N.J.S.A. 26:12-1 et seq. and N.J.A.C. 8:25.  For example, some jurisdictions exempt school-based centers, centers operated by religious organizations, summer camps, or Head Start programs. |
| Group Home Child Care[x]  N/A. Check if your State/Territory does not have group home child care. | Group home child care provider is defined as two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child’s residence, unless care in excess of 24 hours is due to the nature of the parent(s)’ work. | Describe which types of group homes are subject to licensing       | Describe which types of group homes are exempt from licensing       |
| Family Child Care | Family child care provider is defined as one individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child’s residence, unless care in excess of 24 hours is due to the nature of the parent(s)’s work. **Reminder** - Do not check if family child care home providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements. | Describe which types of family child care home providers are subject to licensing       | Describe which types of family child care home providers are exempt from licensing      Family Child Care Providers must be registered to receive a subsidy child in N.J**.**  |
| In-Home Care | In-home child care provider is defined as an individual who provides child care services in the child’s own home. **Reminder** - Do not respond if in-home child care providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements. | [ ]  N/A. Check if in-home care is not subject to licensing in your State/Territory.Describe which in-home providers are subject to licensing       | Describe which types of in-home child care providers are exempt from licensing. Approved home (Family friend and Neighbor Care (FFN) is exempt from licensing. The minimum requirements for approval of the home are an inspection of the home using the Self-Arranged Care Inspection and Interview Checklist, an interview with the provider and family members, and a child abuse record information check completed for all prospective approved home and in-home providers and all household members of the home 14 years of age and older conducted by the Department of Children and Families. |

**Note**:In lieu of submitting or attaching licensing regulations to certify the requirements of §98.40(a)(1), Lead Agencies may provide their licensing regulations to the National Resource Center for Health and Safety in Child Care and Early Education. Please check the NRCKid’s website at <http://nrckids.org/CFOC3> to verify the accuracy of your licensing regulations and provide any updates to the National Resource Center. **Check this box to indicate that the licensing requirements were submitted and verified at NRCKid's**. [ ]

e) **Indicate** whether your State/Territory licensing requirements include any of the following four indicators for each category of care\*.

\* American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. (2011)*Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd Edition.*Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association. Available online: <http://nrckids.org/CFOC3>

| **Indicator** | For each indicator, check all requirements for **licensing** that apply, if any. |
| --- | --- |
| **Center-Based Child Care** | **Group Home Child Care**[x]  N/A. Check if your State/Territory does not have group home child care. | **Family Child Care** | **In-Home Care**[ ]  N/A if the State/Territory does not license in-home care (i.e., care in the child’s own home) |
| Do the licensing requirements include **child: staff ratios and group sizes**?If yes, provide the ratio for age specified. | [x]  Yes, Child: staff ratio requirementInfant ratio (11 months):      Toddler ratio (35 months):      Preschool ratio (59 months):      [ ]  No ratio requirements.[x]  Yes, Group size requirementInfant group size (11 months):      Toddler group size (35 months):      Preschool group size (59 months):      [ ]  No group size requirements.  | [ ]  Yes, Child: staff ratio requirementInfant ratio (11 months):      Toddler ratio (35 months):      Preschool ratio (59 months):      [ ]  No ratio requirements.[ ]  Yes, Group size requirementInfant group size (11 months):      Toddler group size (35 months):      Preschool group size (59 months):      [ ]  No group size requirements.  | [x]  Yes, Child: staff ratio requirement. List ratio requirement by age group:      [ ]  No ratio requirements.[x]  Yes, Group size requirement. List ratio requirement by age group      [ ]  No group size requirements.  | [x]  Yes, Child: staff ratio requirement. List ratio requirement by age group:      [ ]  No ratio requirements.[x]  Yes, Group size requirement. List ratio requirement by age group      [ ]  No group size requirements.  |
| Do the licensing requirements identify specific educational **credentials for child care directors**? | [ ]  High school/GED[ ]  Child Development Associate (CDA)[ ]  State/ Territory Credential[ ]  Associate’s degree[x]  Bachelor’s degree[ ]  No credential required for licensing[ ]  Other:       | Do the licensing requirements identify specific educational **credentials for child care directors**? | [ ]  High school/GED[ ]  Child Development Associate (CDA)[ ]  State/ Territory Credential[ ]  Associate’s degree[ ]  Bachelor’s degree[ ]  No credential required for licensing[x]  Other: An associates degree and 1 year supervisory child care experience is preferred but not required**.**  | Do the licensing requirements identify specific educational **credentials for child care directors**?No credential required for licensing |
| Do the licensing requirements identify specific educational **credentials for child care teachers**? | [ ]  High school/GED[ ]  Child Development Associate (CDA)[ ]  State/ Territory Credential[ ]  Associate’s degree[x]  Bachelor’s degree[ ]  No credential required for licensing[ ]  Other:       | Do the licensing requirements identify specific educational **credentials for child care teachers**? | [ ]  High school/GED[ ]  Child Development Associate (CDA)[ ]  State/ Territory Credential[ ]  Associate’s degree[ ]  Bachelor’s degree[x]  No credential required for licensing[ ]  Other:       | Do the licensing requirements identify specific educational **credentials for child care teachers**?No credential required for licensing |
| Do the licensing requirements specify that directors and caregivers must attain a specific number of **training hours per year**? | [ ]  At least 30 training hours required in first year[x]  At least 24 training hours per year after first year[ ]  No training requirement[ ]  Other:       | Do the licensing requirements specify that directors and caregivers must attain a specific number of **training hours per year**? | [ ]  At least 30 training hours required in first year[ ]  At least 24 training hours per year after first year[ ]  No training requirement[x]  Other: At least 8 hours of in-service training every year. | Do the licensing requirements specify that directors and caregivers must attain a specific number of **training hours per year**?No training requirement |

e) Do you expect the licensing requirements for child care providers to change in FY2014-2015?

[ ]  Yes. Describe

[x]  No

### 3.1.2 Enforcement of Licensing Requirements

Each Lead Agency is required to provide a detailed description of the State/Territory’s licensing requirements and how its licensing requirements are effectively enforced. (658E(c)(2)(E), §98.40(a)(2)) The Lead Agency is also required to certify that that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with the applicable health and safety requirements. (658E(c)(2)(G), §98.41(d))

**Describe the State/Territory’s policies for effective enforcement of the licensing requirements using questions 3.1.2a through 3.1.2e below.**  This description includes whether and how the State/Territory uses visits (announced and unannounced), background checks, and any other enforcement policies and practices for the licensing requirements.

a) Does your State/Territory include **announced** and/or **unannounced** visits in its policies as a way to effectively enforce the licensing requirements?

[x]  Yes. If “Yes” please refer to the chart below and check all that apply.

[ ]  No

| **CCDF Categories of Care** | **Frequency of Routine Announced Visits** | **Frequency of Routine Unannounced Visits** |
| --- | --- | --- |
| [x]  Center-Based Child Care | [ ]  Once a Year[ ]  More than Once a Year[ ]  Once Every Two Years[x]  Other. Describe Inspections are unannounced, with the exception of initial inspections and requested increase/space approvals/age changes | [x]  Once a Year[ ]  More than Once a Year[ ]  Once Every Two Years[ ]  Other. Describe Inspections are unannounced and occur at least 1x/year |
| [ ]  Group Home Child Care**N/A** | [ ]  Once a Year[ ]  More than Once a Year[ ]  Once Every Two Years[ ]  Other. Describe       | [ ]  Once a Year[ ]  More than Once a Year[ ]  Once Every Two Years[ ]  Other. Describe       |
| [x]  Family Child Care Home | [ ]  Once a Year[ ]  More than Once a Year[ ]  Once Every Two Years[x]  Other. Describe Inspections are unannounced with the exeption of initials & technical assistance visits | [ ]  Once a Year[ ]  More than Once a Year[x]  Once Every Two Years[ ]  Other. Describe Additionally 20% of providers are monitored on a random basis. |
| [x]  In-Home Child Care[ ]  N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2b) | [ ]  Once a Year[ ]  More than Once a Year[ ]  Once Every Two Years[x]  Other. Describe All New in home child care providers are monitored and a home inspection conducted. They are reinspected only if they do not continuously serve a subsidy child for 6 months or more.  | [ ]  Once a Year[ ]  More than Once a Year[ ]  Once Every Two Years[x]  Other. Describe Unannounced visits are not routinely conducted, unless there is a reason for the visit.  |

b) Does your State/Territory have any of the following procedures in place for effective enforcement of the licensing requirements? If procedures differ based on the category of care, please indicate how in the “Describe” box.

[x]  Yes. If “Yes” please refer to the chart below and check all that apply.

[ ]  No

| **Licensing Procedures** | **Describe** which procedures are used by the State/Territory for enforcement of the licensing requirements.  |
| --- | --- |
| The State/Territory requires providers to attend or participate in training relating to opening a child care facility prior to issuing a license. | [x]  Yes. Describe Pre-service training is required for Family Child Care Providers  |
|  | [x]  No. Pre-service training is not required for licensed centers. |
|  | [ ]  Other. Describe       |
| The State/Territory has procedures in place for licensing staff to inspect centers and family child care homes prior to issuing a license. | [x]  An on-site inspection is conducted. |
|  | [ ]  Programs self-certify. Describe       |
|  | [ ]  No procedures in place. |
|  | [ ]  Other. Describe       |
| Licensing staff has procedures in place to address violations found in an inspection. | [ ]  Providers are required to submit plans to correct violations cited during inspections. |
|  | [ ]  Licensing staff approve the plans of correction submitted by providers. |
|  | [x]  Licensing staff verify correction of violation. |
|  | [x]  Licensing staff provide technical assistance regarding how to comply with a regulation. |
|  | [ ]  No procedures in place. |
|  | [x]  Other. Describe A corrective action plan may be required for centers with serious violations and/or violations which have been outstanding for an extended time. |
| Licensing staff has procedures in place to issue a sanction to a noncompliant facility. | [x]  Provisional or probationary license |
|  | [x]  License revocation or non-renewal |
|  | [x]  Injunctions through court |
|  | [x]  Emergency or immediate closure not through court action |
|  | [ ]  Fines for regulatory violations |
|  | [ ]  No procedures in place. |
|  | [ ]  Other. Describe Cite violations, send enforcement letters, meet with centers, take action against the license as warranted, such as revokation, suspension or refusal to renew the license. |
| The State/Territory has procedures in place to respond to illegally operating child care facilities. | [x]  Cease and desist action (For imminent hazards due to number/ages of children and/or dangerous building conditions, OOL contacts local officials who have authority to immediately close a facility.) |
|  | [x]  Injunction |
|  | [ ]  Emergency or immediate closure not through court action |
|  | [ ]  Fines |
|  | [ ]  No procedures in place. |
|  | [x]  Other. Describe Describe Enforcement letters sent to unlicensed facilities. If facilities do not comply OOL contacts local officials (who may fine and/or immediately close center) and/or legal action is taken |
| The State/Territory has procedures in place for providers to appeal licensing enforcement actions. | [x]  Yes. Describe Negative actions against the license/registration may be appealed. |
|  | [ ]  No. |
|  | [ ]  Other. Describe       |

c ) Does your State/Territory use **background checks** **as a way to effectively enforce the licensing requirements?**

[x]  Yes. If “Yes” please refer to the chart below to identify who is required to have background checks, what types of checks, and with what frequency.

[ ]  No

| **CCDF Categories of Care** | **Types of Background Check**  | **Frequency** | **Who is Subject to Background Checks?** |
| --- | --- | --- | --- |
| **[x]  Center-Based Child Care** | [x]  Child Abuse Registry | [x]  Initial Entrance into the System[ ]  Checks Conducted Annually[x]  Other. Describe every three years as a part of license renewal and when new staff are hired  | [x]  Director [x]  Teaching staff[x]  Non-teaching staff[x]  Volunteers[x]  Other Sponsor/Sponsor Representative |
|  | [x]  State/Territory Criminal Background[x]  Check if State/Territory background check includes fingerprints | [x]  Initial Entrance into the System[ ]  Checks Conducted Annually[x]  Other. Describe Conducted each time a staff moves to another center.  | [x]  Director [x]  Teaching staff[x]  Non-teaching staff[x]  Volunteers[x]  Other Sponsor/Sponsor Representative |
|  | [x]  FBI Criminal Background (e.g., fingerprint) | [x]  Initial Entrance into the System[ ]  Checks Conducted Annually[x]  Other. Describe Conducted each time a staff moves to another center | [x]  Director [x]  Teaching staff[x]  Non-teaching staff[x]  Volunteers[x]  Other Sponsor/Sponsor Representative |
|  | [x]  Sex Offender Registry | [x]  Initial Entrance into the System[ ]  Checks Conducted Annually[x]  Other. Describe Conducted eachTime a staff movesto another center | [x]  Director [x]  Teaching staff[x]  Non-teaching staff[x]  Volunteers[x]  Other Sponsor/Sponsor Representative |
| **[ ]  Group Child Care Homes**[x]  N/A. Check if your State/Territory does not have group home child care. | [ ]  Child Abuse Registry | [ ]  Initial Entrance into the System[ ]  Checks Conducted Annually[ ]  Other. Describe       | [ ]  Provider[ ] Non-provider residents of the home            |
|  | [ ]  State/Territory Criminal Background[ ]  Check if the State/Territory background check includes fingerprints | [ ]  Initial Entrance into the System[ ]  Checks Conducted Annually[ ]  Other. Describe       | [ ]  Provider[ ] Non-provider residents of the home            |
|  | [ ]  FBI Criminal Background (e.g., fingerprint) | [ ]  Initial Entrance into the System[ ]  Checks Conducted Annually[ ]  Other. Describe       | [ ]  Provider[ ] Non-provider residents of the home            |
|  | [ ]  Sex Offender Registry | [ ]  Initial Entrance into the System[ ]  Checks Conducted Annually[ ]  Other. Describe       | [ ]  Provider[ ] Non-provider residents of the home            |
| **[x]  Family Child Care Homes** | [x]  Child Abuse Registry | [x]  Initial Entrance into the System[ ]  Checks Conducted Annually[x]  Other. Describe conducted every 3 years as a part of registration renewal; when new staff are hired & for new household members  | [x]  Provider[x] Non-provider residents of the home residents-14 years& older; staff & volunteers |
|  | [x]  State/Territory Criminal Background[ ]  Check if the State/Territory background check includes fingerprints | [ ]  Initial Entrance into the System[ ]  Checks Conducted Annually[ ]  Other. Describe Licensing review/approval of criminal conviction self-disclosures | [x]  Provider[x] Non-provider residents of the home residents-14 years & older; staff & volunteers |
|  | [ ]  FBI Criminal Background (e.g., fingerprint) | [ ]  Initial Entrance into the System[ ]  Checks Conducted Annually[ ]  Other. Describe       | [ ]  Provider[ ] Non-provider residents of the home            |
|  | [ ]  Sex Offender Registry | [ ]  Initial Entrance into the System[ ]  Checks Conducted Annually[ ]  Other. Describe       | [ ]  Provider[ ] Non-provider residents of the home            |
| **[x]  In-Home Child Care Providers**[ ]  N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2e) | [x]  Child Abuse Registry | [ ]  Initial Entrance into the System[x]  Checks Conducted Annually[ ]  Other. Describe       | [ ]  Provider[ ] Non-provider residents of the home       |
|  | [ ]  State/Territory Criminal Background[ ]  Check if the State/Territory background check includes fingerprints | [ ]  Initial Entrance into the System[ ]  Checks Conducted Annually[ ]  Other. Describe       | [ ]  Provider[ ] Non-provider residents of the home       |
|  | [ ]  FBI Criminal Background (e.g., fingerprint) | [ ]  Initial Entrance into the System[ ]  Checks Conducted Annually[ ]  Other. Describe       | [ ]  Provider[ ] Non-provider residents of the home       |
|  | [ ]  Sex Offender Registry | [ ]  Initial Entrance into the System[ ]  Checks Conducted Annually[ ]  Other. Describe       | [ ]  Provider[ ] Non-provider residents of the home       |

1. Please **provide a brief overview** of the State/Territory’s process for conducting background checks for child care. In this brief overview, include the following:

d -1) The cost associated with each type of background check conducted $67.50/person is the fee for CHRI's. The CARI's are $10/person.

 d-2) Who pays for background checks

The state pays for the CHRI. The center is responsible for payment of the CARI's.

 d-3) What types of violations would make providers ineligible for CCDF? Describe

d-4) The process for providers to appeal the Lead Agency’s decision based on the background check findings. Describe

CHRI's are processed by the Dept of Human Services and appeals are processed by that Dept. CARI's are based on the substantiation of abuse/neglect and appeals must be filed through the appropriate DCF office.

e) If not performing visits (announced or unannounced) or background checks, describe how the State/Territory will ensure that its licensing requirements are effectively enforced per the CCDF regulations?       (658E(c)(2)(E), §98.40(a)(2))

f) Does the State/Territory disseminate information to parents and the public, including the use of on-line tools or other “search tools,” about child care program licensing status and compliance records?

[x]  Yes. Describe

The Department of Children and Families keeps a listing of all licnsed child care centers on line at OOL web site. Files maintained by the OOL are public records and are readily accessible for examination by any person, under the direction and supervision of OOL personnel, except when public access to records is restricted, in accordance with the State Open Public Records Act or other applicable statutes.

Parents are entitled to review the center’s or sponsoring organization’s copy of the Inspection/Violation Report regarding a particular center, sponsoring organization or provider which is issued after every licensing inspection. Parents are also entitled to review the Complaint Investigation Summary Report, as well as any letters of enforcement or other actions taken against the center, sponsoring organization or provider during the current regulatory period.

Child care centers and sponsoring organizations must arrange a convenient opportunity for parents to review any of the above information upon request of the parent.

[ ]  No

### 3.1.3. Compliance with Applicable State/Territory and Local Regulatory Requirements on Health and Safety

Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Such requirements shall include the prevention and control of infectious diseases (including immunization), building and physical premises safety, and minimum health and safety training appropriate to the provider setting. These health and safety requirements apply to all providers caring for children receiving CCDF services and which also may be covered by the licensing requirements. (658E(c)(2)(F), §98.41)

[ ]  Check if the Lead Agency certifies that there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))

a) **Describe** the Lead Agency’s health and safety requirements for prevention and control of infectious disease in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(i), §98.41(a)(1))

| **The Lead Agency requires:** | **For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.** |
| --- | --- |
|  | Center-based child care providers | Family child care home providers | Group home child care providers | In-home child care providers |
| [x]  Physical exam or health statement for providers | [x]  | [x]  | [ ]  | [ ]  |
| [x]  Physical exam or health statement for children | [x]  | [x]  | [ ]  | [x]  |
| [x]  Tuberculosis check for providers | [x]  | [x]  | [ ]  | [ ]  |
| [x]  Tuberculosis check for children | [x]  | [ ]  | [ ]  | [ ]  |
| [ ]  Provider immunizations | [ ]  | [ ]  | [ ]  | [ ]  |
| [x]  Child immunizations | [x]  | [x]  | [ ]  | [x]  |
| [x]  Hand-washing policy for providers and children | [x]  | [x]  | [ ]  | [x]  |
| [x]  Diapering policy and procedures | [x]  | [x]  | [ ]  | [x]  |
| [x]  Providers to submit a self-certification or complete health and safety checklist | [x]  | [ ]  | [ ]  | [x]  |
| [ ]  Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements | [x]  | [x]  | [ ]  | [x]  |
| [ ]  Other. Describe       | [ ]  | [ ]  | [ ]  | [ ]  |

b) **Describe** the Lead Agency’s health and safety requirements for building and physical premises safety, including policies and practices to protect from environmental hazards, in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(ii), §98.41(a)(2))

| **The Lead Agency requires:** | **For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.** |
| --- | --- |
|  | **Center-based child care providers** | **Family child care home providers** | **Group home child care providers** | **In-home child care providers** |
| [x]  Fire inspection | [x]  | [ ]  | [ ]  | [ ]  |
| [x]  Building inspection | [x]  | [ ]  | [ ]  | [ ]  |
| [x]  Health inspection | [x]  | [ ]  | [ ]  | [ ]  |
| [x]  Inaccessibility of toxic substances policy | [x]  | [x]  | [ ]  | [x]  |
| [x]  Safe sleep policy | [x]  | [x]  | [ ]  | [ ]  |
| [ ]  Tobacco exposure reduction | [x]  | [x]  | [ ]  | [ ]  |
| [x]  Transportation policy | [x]  | [x]  | [ ]  | [ ]  |
| [x]  Providers to submit a self-certification or complete health and safety checklist | [ ]  | [ ]  | [ ]  | [x]  |
| [x]  Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements | [x]  | [x]  | [ ]  | [x]  |
| [ ]  Other. Describe       | [ ]  | [ ]  | [ ]  | [ ]  |

c) **Describe** the Lead Agency’s health and safety requirements for health and safety training in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(iii), §98.41(a)(3)). Note: While Lead Agencies have the flexibility to define these terms, for this question, pre-service refers to any training that happens prior to a person starting or shortly thereafter (first week, etc). “On-going” would be some type of routine occurrence (e.g., maintain qualifications each year).

| **CCDF Categories of Care** | **Health and safety training requirements** | **Pre-Service** | **On-Going** |
| --- | --- | --- | --- |
| **Child Care Centers** | First Aid |  | **X** |
| CPR  |  | **X** |
| Medication Administration Policies and Practices |  | **X** |
| Poison Prevention and Safety |  | **X** |
| Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention |  | **X** |
| Shaken Baby Syndrome and abusive head trauma prevention |  | **X** |
| Age appropriate nutrition, feeding, including support for breastfeeding  |  | **X** |
| Physical Activities |  | **X** |
| Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods |  | **X** |
| Recognition and mandatory reporting of suspected child abuse and neglect  |  | **X** |
| Emergency preparedness and planning response procedures |  | **X** |
| Management of common childhood illnesses, including food intolerances and allergies |  | **X** |
| Transportation and child passenger safety (if applicable) |  | **X** |
| Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act |  | **X** |
| Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. |  | **X** |
| Supervision of children |  | **X** |
| Behavior management |  | **X** |
| Other. Describe       |  |  |
| **Group Home Child Care****N/A** | First Aid |  |  |
| CPR  |  |  |
| Medication Administration Policies and Practices |  |  |
| Poison Prevention and Safety |  |  |
| Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention |  |  |
| Shaken Baby Syndrome and abusive head trauma prevention |  |  |
| Age appropriate nutrition, feeding, including support for breastfeeding  |  |  |
| Physical Activities |  |  |
| Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods |  |  |
| Recognition and mandatory reporting of suspected child abuse and neglect  |  |  |
| Emergency preparedness and planning response procedures |  |  |
| Management of common childhood illnesses, including food intolerances and allergies |  |  |
| Transportation and child passenger safety (if applicable) |  |  |
| Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act |  |  |
| Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. |  |  |
| Supervision of children |  |  |
| Behavior management |  |  |
| Other. Describe       |  |  |
| **Family Child Care Providers** | First Aid | **X** | **X** |
| CPR  | **X** | **X** |
| Medication Administration Policies and Practices | **X** | **X** |
| Poison Prevention and Safety |  |  |
| Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention | **X** | **X** |
| Shaken Baby Syndrome and abusive head trauma prevention | **X** | **X** |
| Age appropriate nutrition, feeding, including support for breastfeeding  | **X** | **X** |
| Physical Activities |  |  |
| Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods | **X** | **X** |
| Recognition and mandatory reporting of suspected child abuse and neglect  | **X** | **X** |
| Emergency preparedness and planning response procedures |  |  |
| Management of common childhood illnesses, including food intolerances and allergies |  |  |
| Transportation and child passenger safety (if applicable) | **X** | **X** |
| Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act | **X** | **X** |
| Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. | **X** | **X** |
| Supervision of children | **X** | **X** |
| Behavior management | **X** | **X** |
| Other. Describe **Understanding the NJ FCC Regulations, Policies & Procedures** | **X** | **X** |
| **In-Home Child Care Providers** | First Aid |  |  |
| CPR  |  |  |
| Medication Administration Policies and Practices |  |  |
| Poison Prevention and Safety |  |  |
| Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention |  |  |
| Shaken Baby Syndrome and abusive head trauma prevention |  |  |
| Age appropriate nutrition, feeding, including support for breastfeeding  |  |  |
| Physical Activities |  |  |
| Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods |  |  |
| Recognition and mandatory reporting of suspected child abuse and neglect  |  |  |
| Emergency preparedness and planning response procedures |  |  |
| Management of common childhood illnesses, including food intolerances and allergies |  |  |
| Transportation and child passenger safety (if applicable) |  |  |
| Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act |  |  |
| Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. |  |  |
| Supervision of children |  |  |
| Behavior management |  |  |
| Other. Describe       |  |  |

d) CCDF allows Lead Agencies to exempt relative providers (grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles) from these health and safety requirements. What are the Lead Agency’s requirements for relative providers? (§98.41(A)(ii))(A))

[ ]  All relative providers are subject to the same health and safety requirements as described in 3.1.2a-c, as appropriate; there are no exceptions for relatives.

[ ]  Relative providers are NOT required to meet any health and safety requirements as described in 3.1.2a-c, as appropriate.

[x]  Relative providers are subject to certain requirements. Describe the different requirements

For Family Friend and Neighbor (FFN) providers and in-home providers in New Jersey, N.J.S.A.C. 30:5B-32 requires all prospective FFN or in-home providers and all members of the prospective provider’s household (or the household where the care is provided) who are at least 14 years of age, must provide written consent for DHS, through the DCF Office of Licensing, to conduct a Child Abuse Record Information (CARI) background check to determine whether an incident of child abuse or neglect has been substantiated against any such person. A CARI background check is a significant component of the approval process for approved homes and in-home providers.

If there is a substantiated CARI finding the CCR&R notifies the potential FFN home/in-home provider that they are denied from providing child care services. The CCR&R also notifies the parent of the child eligible for child care of the denial and that the parent has the right to select another individual to provide FFN or in-home child care services.

If there is no substantiated CARI finding, the CCR&R schedules a health and safety inspection of the home and completes the approval process. The appropriate CCR&R representative completes the Self-Arranged Care Home Inspection & Interview Checklist and interviews the provider prior to issuance of a payment through DHS for subsidized child care. A home inspection is not required if a home has already been inspected, approved for payment and in continuous use for the last six months. A provider may not care for more than two unrelated children or up to five children of one family in a home-based setting.

Provide a web address for the State/Territory’s health and safety requirements, if available:

**http://www.state.nj.us/dcf/divisions/licensing/CCCmanual.pdf**

**3.1.4 Effective enforcement of the CCDF health and safety requirements.**

For providers who care for children receiving CCDF assistance and who are NOT subject to the enforcement procedures described in3.1.2 for licensed providers, please describe how the Lead Agency enforces the CCDF health and safety enforcement requirements.

Providers who are not registered shall be approved by the DHS in order to qualify for payment through any child care service program. Unregulated relatives, friends or neighbors shall be eligible for approved home status.

The minimum requirements for approval of the home are an inspection of the home using the Self-Arranged Care Inspection and Interview Checklist (see N.J.A.C. 10:15-2.4(a)10), an interview with the provider and family members, and a child abuse record information check completed for all prospective approved home providers and all household members of the home 14 years of age and older conducted by the Department of Children and Families as follows:

1. Describe whether and how the Lead Agency uses on-site visits (announced and unannounced)

As part of the approval process, a visit to conduct an interview is one of the mandatory reguirements N.J.A.C. 10:15-2.4(a)10 and 10.2(b)1.

1. Describe whether the Lead Agency uses background checks

As part of the approval process, a child abuse record information check must be completed for all prospective approved home providers and all household members of the home 14 years of age and older N.J.A.C. 10:15-10.2(b)1).

1. Does the Lead Agency permit providers to self-certify compliance with applicable health and safety standards?

 [x] Yes. If yes, what documentation, if any, is required? Describe

As part of the approval process, home evaluations of providers of home based care who are not registered pursuant to the Family Child Care Provider Registration Act (N.J.A.C. 10:126) must be conducted using the "Self-Arranged Care Inspection and Interview Checklist". This Checklist requires information concerning: provider and participant identification; a home inspection checklist, including aspects of the physical environment, fire safety, general health, safety and sanitation, the program, rest and sleep, and food and nutrition; interview specifics concerning home residents; and observations of the evaluator.

 [ ]  No

1. Describe whether the Lead Agency uses any other enforcement policies and practices for the health and safety requirements

[x]  Check if the Lead Agency certifies that procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))

### 3.1.5. Does the State/Territory encourage or require child care programs to conduct developmental screening and referral for children participating in child care programs?

Lead Agencies are not required to conduct developmental screenings of children, but are encouraged to work with child care providers to promote screening in the areas of physical health (including vision and hearing), mental health, oral health, and developmental disabilities.

[ ]  Yes. Describe

[ ]  No

a) If yes, are training, resources and supports offered to programs to assist them in ensuring that children receive appropriate developmental screenings?

[ ]  Yes. Describe

[x]  No

[ ]  Other. Describe

b) If yes, are resources and supports provided to programs to help them understand how families are referred to indicated services and how to work with the health, mental health, and developmental disabilities agencies to support children when follow-up to screening is needed?

[ ]  Yes. Describe

[ ]  No

[ ]  Other. Describe

1. Does the State/Territory use developmental screening and referral tools?

 [ ]  Yes. If Yes, provide the name of the tool(s)

 [ ]  No

[ ]  Other. Describe

### 3.1.6 Data & Performance Measures on Licensing and Health and Safety Compliance –

What data elements, if any, does the State/Territory currently have access to related to licensing compliance? What, if any, performance measures does the Lead Agency use for ensuring health and safety? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

**a) Data on licensing and health and safety**. Indicate if the Lead Agency or another agency has access to data on:

[x]  Number of licensed programs. Describe (optional)

Currently there are 5,634 licensed child care centers in New Jersey.

[ ]  Numbers of programs operating that are legally exempt from licensing. Describe (optional)

The Office of Licensing (OOL) does not have these statistics since exempt centers are not required to obtain an exemptionletter fromOOL**.**

[x]  Number of programs whose licenses were suspended or revoked due to non-compliance. Describe (optional)

2012: For Licensed Centers: 0 suspended and 8 revoked. For Licenced Homes: There are a total of 22 Registered Family Child Care Providers whose registration certificate was revoked or suspended. At this time, NJ currently does not bread the data out to differentiate between suspended or revoked. NJ will develop the capacity to begin to report this data according to each status by the next reporting cycle.

[ ]  Number of injuries in child care as defined by the State/Territory. Describe (optional)

NJ’s Office of Licensing is under the Department of Children and Family and currently does not collect this information. Efforts are underway to be able to report this data during the next reporting cycle.

[ ]  Number of fatalities in child care as defined by the State/Territory. Describe (optional)

NJ’s Office of Licensing is under the Department of Children and Family and currently does not collect this information. Efforts are underway to be able to report this data during the next reporting cycle.

[x]  Number of monitoring visits received by programs. Describe (optional)

For licensed child care centers, NJ conducts 1 visit per year and may conduct additional visits as needed. For Registered Family Child Care Providers, NJ conducts monitoring visits every two years. Currently NJ does not capture that data. Efforts are underway to develop a way of reporting this data by next reporting cycle.

[x]  Caseload of licensing staff. Describe (optional)

[ ]  Number of programs revoked from CCDF due to non-compliance with health and safety requirements. Describe (optional)

[ ]  Other. Describe

[ ]  None

b) **Performance measurement**. What, if any, performance measures does the State/Territory use in its licensing system to monitor compliance with CCDF health and safety requirements?

OOL uses its standard monitoring tool check list, based on licensing standards.

1. Evaluation. What, if any, are the State/Territory’s plans for evaluation related to licensing and health and safety? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

There are no specific plans to change the regulations related to licensing and health and safety at this time.

### 3.1.7 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section of 3.1. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the Lead Agency’s goals for the licensing and health and safety system in the coming biennium? What progress does the State/Territory expect to make on core areas (e.g. licensing standards, monitoring visits or other effective enforcement, improved technical assistance, or fewer serious non-compliances?)

Note – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Goal 1 – Standardized specific training related to Health and Safety to be delivered by CCR&Rs

Goal 2 – Develop standardized monitoring procedures to include unannounced visits

Goal 3 - Coordinate monitoring and training with OOL

Goal 4 –

Goal 5 -

CCDF has a number of performance measures that are used to track progress for key aspects of the program at the national level. These performance measures are included in budget materials submitted to Congress and other documents. Please follow this link <http://www.acf.hhs.gov/programs/occ/resource/government-performance-and-results-act-gpra-measures> to see the CCDF performance measures. A number of these performance measures rely on information reported in the State and Territorial Plans as a data source.  We have added a ruler icon in Section 3.2 through 3.4 in order to identify the specific questions used in the performance measures.  When answering these questions, Lead Agencies should ensure that their answers are accurate and complete in order to promote the usefulness and integrity of the performance measures.

## 3.2 Establishing Voluntary Early Learning Guidelines (Component #2)

For purposes of this section, voluntary early learning guidelines (also referred to as early learning and development standards) include the expectations for what children should know (content) and be able to do (skills) at different levels of development. These standards provide guidelines, articulate developmental milestones, and set expectations for the healthy growth and development of young children. The term *early learning guidelines* (ELGs) refers to age-appropriate developmental learning guidelines for infants and toddlers and school-age children. These early learning guidelines are voluntary because States/Territories are not required to develop such guidelines or implement them in a specified manner.

### cid:image003.png@01CD5AB3.3740C5903.2.1 Has the State/Territory developed voluntary early learning guidelines for children? Check any early learning guidelines the State/Territory has developed.

[ ]  Birth-to-three

[x]  Three-to-five

[ ]  Five years and older

[ ]  None. **Skip to 3.2.6.**

If yes, insert web addresses, where possible:

**http://www.nj.gov/njded/ece**

Which State/Territory agency is the lead for the early learning guidelines?

**New Jersey Department of Education**

### cid:image003.png@01CD5AB3.3740C5903.2.2 Do the early learning guidelines cover a range of domains across physical, cognitive, and social and emotional development?

Check all that apply for each age group as applicable in the chart below. Because States vary in their domain names and which domains to include, we have used the domains identified in the Head Start Child Development and Early Learning Framework for reference purposes.

| **Domains** | **Birth-to-Three ELGs** | **Three-to-Five ELGs** | **Five and Older ELGs** |
| --- | --- | --- | --- |
| Physical development and health  | **[ ]**  | **[x]**  | **[ ]**  |
| Social and emotional development | **[ ]**  | **[x]**  | **[ ]**  |
| Approaches to learning | **[ ]**  | **[x]**  | **[ ]**  |
| Logic and reasoning (e.g., problem-solving) | **[ ]**  | **[ ]**  | **[ ]**  |
| Language development | **[ ]**  | **[x]**  | **[ ]**  |
| Literacy knowledge and skills | **[ ]**  | **[x]**  | **[ ]**  |
| Mathematics knowledge and skills | **[ ]**  | **[x]**  | **[ ]**  |
| Science knowledge and skills | **[ ]**  | **[ ]**  | **[ ]**  |
| Creative arts expression (e.g., music, art, drama) | **[ ]**  | **[ ]**  | **[ ]**  |
| Social studies knowledge and skills | **[ ]**  | **[ ]**  | **[ ]**  |
| English language development (for dual language learners) | **[ ]**  | **[x]**  | **[ ]**  |
| List any domains not covered in the above       | **[ ]**  | **[ ]**  | **[ ]**  |
| Other. Describe       | **[ ]**  | **[ ]**  | **[ ]**  |

### 3.2.3 To whom are the early learning guidelines disseminated and in what manner?

Check all audiences and methods that your State/Territory has chosen to use in the chart below.

|  | Information Dissemination | Voluntary Training | Mandatory Training |
| --- | --- | --- | --- |
| Parents in the child care subsidy system | **[x]**  | **[ ]**  | **[ ]**  |
| Parents using child care more broadly | **[x]**  | **[ ]**  | **[ ]**  |
| Practitioners in child care centers | **[x]**  | **[x]**  | **[ ]**  |
| Providers in family child care homes | **[x]**  | **[x]**  | **[ ]**  |
| Practitioners in Head Start | **[x]**  | **[ ]**  | **[ ]**  |
| Practitioners in Early Head Start | **[ ]**  | **[ ]**  | **[ ]**  |
| Practitioners in public Pre-K program | **[x]**  | **[ ]**  | **[x]**  |
| Practitioners in elementary schools | **[ ]**  | **[ ]**  | **[ ]**  |
| Other. List       | **[ ]**  | **[ ]**  | **[ ]**  |

### cid:image003.png@01CD5AB3.3740C5903.2.4 Are voluntary early learning guidelines incorporated into other parts of the child care system?

Check which ways, if any, the State/Territory incorporates its early learning guidelines into other parts of the child care system.

[ ]  To define the content of training required to meet licensing requirements

[ ]  To define the content of training required for program quality improvement standards (e.g., QRIS standards)

[x]  To define the content of training required for the career lattice or professional credential

[ ]  To require programs in licensing standards to develop curriculum/learning activities based on the voluntary ELGs

[x]  To require programs in quality improvement standards to develop curriculum/learning activities based on the voluntary ELGs

[ ]  To develop State-/Territory –approved curricula

[ ]  Other. List

[ ]  None.

### cid:image003.png@01CD5AB3.3740C5903.2.5 Are voluntary early learning guidelines and development standards aligned with into other parts of the child care system?

Check the standards, if any, with which the State/Territory aligns its early learning guidelines.

[ ]  Cross-walked to align with Head Start Child Development and Early Learning Framework

[ ]  Cross-walked to align with K-12 content standards

[x]  Cross-walked to align with State/Territory pre-k standards

[x]  Cross-walked with accreditation standards

[ ]  Other. List

[ ]  None.

### 3.2.6 Describe how your State/Territory uses ongoing assessments and measures of school readiness assessment using the following series of questions.

In this section, assessment is framed with two distinct purposes/tools – 1) ongoing assessment of children’s progress within the classroom to improve and individualize instruction (this corresponds to 3.2.6a) and 2) assessments conducted within pre-kindergarten and/or at kindergarten entry to inform policymakers about the school readiness of children across the State on a broad range of domains, used to guide program initiatives (this corresponds to 3.2.6b).

In the description for each Yes response, please include a) who administers, and b) how often assessments are conducted, and c) what assessment tools are used.

1. Are programs required to conduct ongoing assessments of children’s progress of children using valid, reliable and age-appropriate tools aligned with the early learning guidelines or other child standards?

[x]  Yes. Describe

The implementation of the Early Learning Guidelines has been a contractual obligation for the former CBC centers with contracts for preschool slots. With the phase out of contracts, all child care providers will be encouraged to continue to use the Early Learning Guidelines. Moving forward, any quality initiative requires that all child care providers use early childhood learning guidelines. DFD is providing formal assessment training (ECERS and CLASS) for CCR&R staff to build capacity to conduct and provide technical assistance to child care providers.

a-1) If yes, are programs encouraged to use information from ongoing assessments to improve practice and individual children’s needs?

[x]  Yes. Describe

Centers caring for infants/toddlers, preschool and school age children will be encouraged to continue to conduct self assessments utilizing the appropriate Environmental Rating Scales (ITERS/ECERS/SACCRS).

[ ]  No

[ ]  Other. Describe

a-2) If yes, is information on child’s progress reported to parents?

[x]  Yes. Describe

Centers have periodic meetings with parents to review outcomes of assessments. Centers are encouraged to schedule parent engagement events and activities.

[ ]  No

[ ]  Other. Describe

[ ]  No

[ ]  Other. Describe

1. Does the State/Territory use tools that are valid, reliable and age-appropriate to track the readiness of children within pre-kindergarten and/or as they enter kindergarten?

[x]  Yes. Describe This is tracked by the Department of Education

b-1) If yes, do the tools cover the developmental domains identified in 3.2.2?

[x]  Yes. Describe

The 2009 preschool teaching and learning standards are being updated and are grounded in a strong theoretical framework for delivering high quality educational experiences to young children. The Preschool Teaching and Learning Standards document:

• Defines supportive learning environments for preschool children.

• Provides guidance on the assessment of young children.

• Articulates optimal relationships between and among families, the community, and preschools.

• Identifies expected learning outcomes for preschool children by domain, as well as developmentally appropriate teaching practices that are known to support those outcomes.

The preschool standards represent what preschool children know and can do in the context of a high quality preschool classroom. Childhood experiences can have long-lasting implications for the future. The earliest years of schooling can promote positive developmental experiences and independence while also optimizing learning and development.

The preschool standards were written for all school districts in the state. They are intended to be used as**:**

**•** A resource for ensuring appropriate implementation of the curriculum

• A guide for instructional planning

• A framework for ongoing professional development

• A framework for the development of a comprehensive early childhood education assessment system

The curriculum is defined as an educational philosophy for achieving desired educational outcomes through the presentation of an organized scope and sequence of activities with a description and/or inclusion of appropriate instructional materials. The preschool standards are not a curriculum, but are the learning targets for a curriculum. All preschool programs must implement a comprehensive, evidence-based preschool curriculum in order to meet the preschool standards.

[ ]  No

[ ]  Other. Describe

b-2) If yes, are the tools used on all children or samples of children?

[x]  All children. Describe

The following applies to the State funded DOE Preschool Programs:

Centers that are contracted with school districts to provide early education preschool will provide some of the following:

* Developmental screenings which are viewed as just one component in a comprehensive childhood education assessment system.
* Formalized assessments (such as ECERS)
* Research Based Curriculum
* Strengthening Families

In addition, the Portfolio assessment is utilized which is the systematic and intentional collection of significant samples of children's work.

[ ]  Samples of children. Describe

[ ]  Other. Describe

b-3) If yes, is the information from the school readiness measures used to target program quality improvement activities?

[x]  Yes. Describe

* Creative curriculum training is provided to practitioners and the community based programs**.**
* CCR&Rs staff were trained as ECERS validators
* CLASS (Classroom Assessment Scoring System)

[ ]  No

[ ]  Other. Describe

[ ]  No

[ ]  Other. Describe

1. Is school readiness information linked to the statewide longitudinal data system (SLDS, program of the Department of Education)?

[ ]  Yes. Describe

[x]  No

[ ]  Not applicable. State does not have an SLDS.

### 3.2.7 Data & Performance Measures on Voluntary Early Learning Guidelines –

What data elements, if any, does the State/Territory have access to on the dissemination of, implementation of, or children’s attainment of the early learning guidelines? What, if any, performance measures does the State/Territory use for dissemination and implementation of the early learning guidelines? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on voluntary early learning guidelines**. Indicate if the Lead Agency or another agency has access to data on:

[x]  Number/percentage of child care providers trained on ELG’s for preschool aged children. Describe (optional) 385

[ ]  Number/percentage of child care providers trained on ELG’s for infants and toddlers. Describe (optional)

[ ]  Number of programs using ELG’s in planning for their work. Describe (optional)

[ ]  Number of parents trained on or served in family support programs that use ELG’s. Describe (optional)

[ ]  Other. Describe

[ ]  None

b) **Performance measurement**. What, if any, are the Lead Agency’s performance measures related to dissemination and implementation of the early learning guidelines?

As DFD implements its test drive of Grow NJKids in Fall 2013, which includes implementation of the Early Learning Guidelines, we will evaluate the impact of all the quality benchmark indicators.

c) **Evaluation**. What are the State/Territory’s plans, if any, for evaluation related to early learning guidelines and the progress of children in child care? Evaluation can include efforts related to monitoring implementation of an initiative validation of standards or program assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

In collaboration with the DOE, CCR&R staff will be trained on the Preschool Learning Guidelines this spring and will be providing training to the CCDF providers.  All quality initiatives sponsored by DFD will require providers to use preschool and early learning standards.  System enhancement is underway with our workforce system partner Professional Impact of New Jesery to capture data of this training provided by the CCR&Rs.

### 3.2.8 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). What are the Lead Agency’s goals for using voluntary early learning guidelines in the coming biennium? What progress does the Lead Agency expect to make related to early learning guidelines?

**DFD’s broader goal is to phase in the QRIS system, NJ Grow Kids, statewide. As part of NJ Grow Kids, Early Learning Guidelines will be one of the requirements. We expect that more programs will utilize a strong theoretical framework for delivering high quality educational experiences to young children.**

## 3.3 Creating Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)

Many States have chosen to use targeted quality funds and other resources to develop a systematic framework for evaluating, improving, and communicating the level of quality in early childhood programs (i.e. QRIS). States and Territories will provide a self-assessment on current program quality improvement activities by responding to questions in this section and then describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to a Quality Rating and Improvement System (QRIS) framework. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education

While not all States and Territories have developed or implemented a formal QRIS, all are pursuing quality improvement strategies that can be described within this framework (based upon previous CCDF Plans). Using this framework to organize this section allows States/Territories to report on their quality improvement activities systematically whether they have a QRIS or not. Over time, States and Territories are encouraged to work on linking their quality improvement initiatives and strategies across all of these elements, culminating in a comprehensive Quality Rating and Improvement System with adequate support for providers to attain higher levels of quality and transparency for parents and the community regarding the quality of child care.

a) Describe which entities are involved in planning and administering the program quality improvement activities in 3.3, including State/Territory entities and local or community level entities.

The Early Learning Advisory Council called New Jersey Council for Young Children is charged with planning the QRIS in NJ. This Council is comprised of state agencies, NJACCRRA, BUILD Intiative, NJAEYC, Head Start Collaboration, PINJ, State Higher Education, etc.

### 3.3.1 Element 1 – Program Standards

**Definition** – For purposes of this section, program standards refers to the expectations for quality, or quality indicators, which identify different levels of and pathways to improved quality. Minimum licensing standards and health and safety requirements provided in section 3.1 are also program standards but in this section, we focus on those standards that build upon and go beyond those minimum requirements.

a) Does your State/Territory’s have quality improvement standards that include indicators covering the following areas beyond what is required for licensing? Check any indicators, if any, that your State/Territory has chosen to establish.

[ ]  Ratios and group size

[ ]  Health, nutrition and safety

[ ]  Learning environment and curriculum

[ ]  Staff/Provider qualifications and professional development

[ ]  Teacher/providers-child relationships

[ ]  Teacher/provider instructional practices

[ ]  Family partnerships and family strengthening

[ ]  Community relationships

[ ]  Administration and management

[ ]  Developmental screenings

[ ]  Child assessment for the purposes of individualizing instruction and/or targeting program improvement

[ ]  Cultural competence

[x]  Other. Describe

With all our quality special initiatives progams will be required to have specific quality indicators. July 2013, preschool enrichment and literacy program, programs must have certified teacher, small classroom, use researched based curriculum and partiicpate in formal assessement training.

Fall 2013, with the kick-off of GrowNJ Kids, programs that have volunteered will be required to use research-based curriculum, have formal assessment, and incorporate strengthening families into their programs. In addition, programs will receive technoical assistance and support to improve thier programs beyond the basic license requirements within the five core components; Learning Environment, Health and Safety, Family Engagement, Professional Development and Program Management.

[ ]  None. If checked, skip to 3.3.2.

b) Does your State/Territory have quality improvement standards with provisions about the care of any of these groups of children? Check any provisions your State/Territory has chosen to establish.

[ ]  Children with special needs as defined by your State/Territory

[ ]  Infants and toddlers

[ ]  School-age children

[ ]  Children who are dual language learners

[x]  None

The lead agency contracts with Thomas Edison College for a summer institute that provides professional development for teachers who work with dual language learners in centers.

NJ DFD just endorsed the Infant/Toddler Standards and plans to incorporate it in our quality initiatives.

c) How do your State/Territory’s quality standards link to State/Territory licensing requirements? Check any links between your State/Territory’s quality standards and licensing requirements.

[x]  Licensing is a pre-requisite for participation

[x]  Licensing is the first tier of the quality levels

Within GrowNJKids**.**

[ ]  State/Territory license is a “rated” license.

[ ]  Other. Describe

[ ]  Not linked.

d) Do your State/Territory’s quality improvement standards align with or have reciprocity with any of the following standards? Check any alignment, if any, between your State/Territory’s quality standards and other standards.

[ ]  Programs that meet State/Territory pre-k standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between pre-k and the quality improvement system)

[ ]  Programs that meet Federal Head Start Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between Head Start and the quality improvement system)

[ ]  Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or an alternative pathway to meeting the standards)

[x]  Other. Describe

New Jersey actively encourages licensed Centers and Registered Family Child Care Providers to seek national accreditation to improve a center's or FCC home's quality by providing the 5% differential in rates for becoming accredited.

The Federal Head Start Performance Standards, Pre-K Standards, and the National Accreditation Standards are all incorporated and aligned in GrowNJKids.

[ ]  None

### 3.3.2 Element 2 –Supports to Programs to Improve Quality

**Definition** – For purposes of this section, supports to programs to improve quality refers to such activities as technical assistance and consultation services for programs to assist in meeting child care quality improvement standards.

a) Check which types of and for what purposes the State/Territory uses supports to child care programs, if any, in the following chart. If none, skip to 3.3.3.

| **Types and Purposes of Support** | **Information or Written Materials** | **Training** | **On-Site Consultation** |
| --- | --- | --- | --- |
| [x]  Attaining and maintaining licensing compliance | [ ]  | [x]  | [x]  |
| [x]  Attaining and maintaining quality improvement standards beyond licensing | [x]  | [x]  | [x]  |
| [x]  Attaining and maintaining accreditation | [ ]  | [x]  | [x]  |
| [ ]  Providing targeted technical assistance in specialized content areas: |  |  |  |
| Health and safety | [x]  | [x]  | [x]  |
| Infant/toddler care | [x]  | [x]  | [x]  |
| School-age care | [ ]  | **[x]**  | [x]  |
| Inclusion | [x]  | [x]  | [x]  |
| Teaching dual language learners | [ ]  | [x]  | [ ]  |
| Mental health | [ ]  | [ ]  | [ ]  |
| Business management practices | [x]  | [x]  | [ ]  |
| Other. Describe       | [ ]  | [ ]  | [ ]  |
| [ ]  None. Skip to 3.3.3. |  |  |  |

b) Methods used to customize quality improvement supports to the needs of individual programs include:

[ ]  Program improvement plans

[x]  Technical assistance on the use of program assessment tools

[x]  Other. Describe

Training is provided through most CCR&Rs through contracts with consultants for center staff and FCC homes, as well as professional development through contracts with Kean University the Professional Impact NJ.

c) Is technical assistance linked to entering the QRIS or targeted to help programs forward on QRIS?

[x]  Yes. Describe

In preparation for the implementation of GrowNJ Kids, quality initiative activities are provided and in alignment with the QRIS.

[ ]  No

[ ]  Other. Describe

### 3.3.3 Element 3 – Financial Incentives and Supports

**Definition** – For purposes of this section, financial incentives refers to the types of monetary supports offered to programs in meeting and sustaining licensing and QRIS or other child care quality improvement standards for programs.

a) Identify which types of financial incentives are offered and to which providers in the following chart. Check which incentives and supports, if any, the State/Territory chooses to offer. If none, skip to 3.3.4.

| **Types of Financial Incentives and Supports for Programs** | **Child Care Centers** | **Child Care Homes** | **License-Exempt Providers** |
| --- | --- | --- | --- |
| [ ]  Grants to programs to meet or maintain licensing | [ ]  | [ ]  | [ ]  |
| [x]  Grants to programs to meet QRIS or similar quality level | [x]  | [ ]  | [ ]  |
| [x]  One-time awards or bonuses on completion of quality standard attainment | [x]  | [ ]  | [ ]  |
| [x]  Tiered reimbursement tied to quality for children receiving subsidy | [x]  | [x]  | [ ]  |
| [ ]  On-going, periodic grants or stipends tied to improving/maintaining quality | [ ]  | [ ]  | [ ]  |
| [ ]  Tax credits tied to meeting program quality standards | [ ]  | [ ]  | [ ]  |
| [ ]  Other. Describe       | [ ]  | [ ]  | [ ]  |
| [ ]  None. Skip to 3.3.4. | [ ]  | [ ]  | [ ]  |

### 3.3.4 – Element 4 - Quality Assurance and Monitoring

**Definition** – For purposes of this section, quality assurance and monitoring refers to the ways that the State/Territory measures program quality for the purposes of its QRIS or other quality improvement system and the methods for measuring that the child care quality improvement standards for programs are met initially and maintained over time.

a) What tools, if any, does the State/Territory use to measure and monitor the quality of programs? Check all that apply and briefly describe using the chart below, including which programs are required to participate and the frequency of assessments. **If none, skip to 3.3.5.**

| **Types of Program Quality Assessment Tools** | **Child Care Centers** | **Child Care Homes** | **License-Exempt Providers** |
| --- | --- | --- | --- |
| [x]  Environment Rating Scales (e.g., ECERS, ITERS, SACERS, FDCRS)Describe, including frequency of assessments. **Assessments are now part of the professional development training offered to the providers by the CCR&R upon request** | [x]  Infant/Toddler[x]  Preschool[ ]  School-Age | [ ]  | [ ]  |
| [x]  Classroom Assessment Scoring System (CLASS)Describe, including frequency of assessments. Assessments are now part of the professional development training offered to the providers by the CCR&R upon request  | [x]  | N/A | [ ]  |
| [ ]  Program Administration Scale (PAS) for child care centers or Business Administration Scale (BAS) for family child care homesDescribe, including frequency of assessments. Voluntary if they use them | [x]  | [ ]  | [ ]  |
| [ ]  Customized instrument, including submission of written documentation, developed for State/Territory quality improvement system. This may include instruments developed for quality improvements in 21st Century Learning Center programsDescribe, including frequency of assessments.       | [ ]  | [ ]  | [ ]  |
| [ ]  Other. Describe       | [ ]  | [ ]  | [ ]  |
| [ ]  None. Skip to 3.3.5. | [ ]  | [ ]  | [ ]  |

b) What steps, if any, has the State/Territory taken to align quality assurance and monitoring across funding streams and sectors in order to minimize duplication?

[x]  Have a mechanism to track different quality assessments/monitoring activities to avoid duplication

Child care specialists from the Child Care Operations Unit monitor a different component of the CCR&R's operation (every month) using a very comprehensive monitoring tool

[ ]  Include QRIS or other quality reviews as part of licensing enforcement

[ ]  Have compliance monitoring in one sector (e.g., Head Start/Early Head Start, State/Territory pre-k) serve as validation for compliance with quality improvement system (e.g., QRIS) without further review

[ ]  Have monitoring for meeting accreditation standards serve as validation for compliance with quality improvement system (e.g., QRIS) without further review

[x]  Other. Describe

Through the state interagency collaboration, alignment of quality assurance has been endorsed across funding streams and sectors.

[ ]  None

### 3.3.5 – Element 5 - Outreach and Consumer Education

**Definition** – For purposes of this section, outreach and consumer education refers to the strategies used to promote the child care quality improvement standards to parents, programs and the general public.

a) Does the State/Territory use symbols or simple icons to communicate levels of quality for child care programs beyond what may communicated to parents about licensing status and licensing compliance as reported in 3.1.3? (e.g. stars, or gold/silver/bronze levels).

[ ]  Yes. If yes, how is it used?

[ ]  Resource and referral/consumer education services use with parents seeking care

[ ]  Parents enrolling in child care subsidy are educated about the system and the quality level of the provider that they are selecting

[ ]  Searchable database on the web

[ ]  Voluntarily, visibly posted in programs

[ ]  Mandatory to post visibly in programs

[ ]  Used in marketing and public awareness campaigns

[ ]  Other. Describe

[x]  No. If no, skip to 3.3.6.

b) Does the State/Territory use any forms of media to reach parents and the public to communicate about levels of quality for child care programs? Check which forms, if any, the State/Territory uses to communicate levels of quality for child care programs.

[ ]  Print

[ ]  Radio

[ ]  Television

[ ]  Web

[ ]  Telephone

[ ]  Social Marketing

[ ]  Other. Describe

[ ]  None

c) Describe any targeted outreach for culturally and linguistically diverse families.

### 3.3.6. Quality Rating and Improvement System (QRIS)

a) **Based on the five key elements of a QRIS described above in 3.3.1 through 3.3.5,** does your State/Territory have a quality rating and improvement system (QRIS) or similar quality improvement system in place?

[ ]  Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating State/Territory-wide.

 [ ]  Participation is voluntary for

 [ ]  Participation is mandatory for

[x]  Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating as a pilot or in a few localities but not State/Territory-wide.

[ ]  No, the State/Territory does not have a QRIS or similar quality improvement system that includes linked activities in all five elements.

 [ ]  State/Territory is in the development phase

 [ ]  State/Territory has no plans for development

[ ]  Other. Describe

b) If yes to 3.3.6a, **CHECK** the types of providers eligible to participate in the QRIS:

[x]  Child care centers

[ ]  Group child care homes

[ ]  Family child care homes

[ ]  In-home child care

[ ]  License exempt providers

[ ]  Early Head Start programs

[x]  Head Start programs

[x]  Pre-kindergarten programs

[ ]  School-age programs

[ ]  Other. Describe

### 3.3.7. If the State/Territory has or will have any quality improvement strategies for targeted groups of providers (e.g., relative caregivers or caregivers who are legally exempt from licensing) that are not described in your responses to any question in section 3.3 above, please describe

**N/A**

### 3.3.8 Data & Performance Measures on Program Quality –

What data elements, if any, does the State/Territory currently have access to related to the quality of programs? What, if any, does the State/Territory use for performance measures on program quality improvement? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on program quality**. Indicate if the Lead Agency or another agency has access to data on:

[ ]  Data on the quality level for individual programs (e.g. QRIS level) as defined by your State/Territory. Describe (optional)

[ ]  Number of programs that move program quality levels annually (up or down). Describe (optional)

[ ]  Program scores on program assessment instruments. List instruments:       Describe (optional)

[ ]  Classroom scores on program assessment instruments. List instruments: Describe (optional)

[ ]  Qualifications for teachers or caregivers within each program. Describe (optional)

[x]  Number/Percentage of children receiving CCDF assistance in licensed care. Describe (optional)

[x]  Number/percentage of children receiving CCDF assistance who attend care at each of the tiers of the quality as defined by the State/Territory

[x]  Number/Percentage of programs receiving financial assistance to meet higher program standards. Describe (optional)

[ ]  Other. Describe

[ ]  None

b) **Performance measurement**. What, if any, are the Lead Agency’s performance measures on program quality?

 Data is not available at this time.

c) **Evaluation**. What, if any, are the State/Territory’s plans for evaluation related to program quality? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

 In collaboration with the DOE, CCR&R staff will be trained on the Preschool Learning Guidelines this spring and will be providing training to the CCDF providers.  All quality initiatives sponsored by DFD will require providers to use preschool and early learning standards.  System enhancement is underway with our workforce system partner Professional Impact of New Jesery to capture data of this training provided by the CCR&Rs.

### 3.3.9 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies are not required to establish a goal for each sub-section in 3.3. What are the State/Territory’s goals for the program quality improvement system in the coming biennium? What progress does the State/Territory expect to make across the five key elements for quality improvement systems?

1Program standards: Implement the test drive of GrowNJKids in 4 counties, the QRIS rating system for licensed centers. Increase the number of program utilization of the pre-school teaching and learning guideline standards.

2 Supports to programs to improve quality: Provide professionaldevelopment training on formal assessments, curriculum, and Strengthening Families.

**3** Financial incentives and supports: Continued encouragement of the Accreditation Facilitation Project for centers to increase quality. Continue to provide scholarships and classroom enhancement grants.

4 Quality assurance and monitoring: Expanded use of performance measures at CCR&Rs to identify areas that need improvement such as eligibility determination, co-payment calculation, and determination of annual income through enhanced case reviews.

5 Outreach and consumer education: expanded use of the CCR&Rs and Family Outreach Workers to provide outreach and consumer education to parents who are in need of quality child care services**.**

## 3.4 Pathways to Excellence for the Workforce – Professional Development Systems and Workforce Initiatives (Component #4)

Pathways to excellence for the workforce builds on the significant investments States and Territories have made in the area of professional development systems to ensure a well-qualified workforce with opportunities for growth from entry level through master teacher, with an increasing emphasis on the many additional roles in the child care system (e.g. adult educators such as consultants, technical assistance providers, trainers, and higher education faculty). In this section, States and Territories provide a self-assessment on current professional development and workforce activities and describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to five key elements for workforce systems:

1) Core Knowledge and Competencies

2) Career Pathways (or Career Lattice)

3) Professional Development Capacity

4) Access to Professional Development

5) Compensation, Benefits and Workforce Conditions

a) Describe which entities are involved in planning and administering the activities in Section 3.4, including State/Territory entities and local or community level entities.

Professional Impact New Jersey, CCR&Rs, and Higher Education Institutions such asThomas Edison State College, Kean University, Rutgers University, Montclair St. University, and the New Jersey Council for Young Children

### 3.4.1 Workforce Element 1 - Core Knowledge and Competencies

**Definition** – For purposes of this section, core knowledge and competencies (CKCs) refers to the expectations for what the workforce should know (content) and be able to do (skills) in their role working with and/or on behalf of children and their families. These CKCs provide a foundation for professional development design (including instructional practices) and other quality improvement efforts.

a) Has the State/Territory developed core knowledge and competencies (CKCs) for practitioners working with and/or on behalf of children?

[x]  Yes

[ ]  No, the State/Territory has not developed core knowledge and competencies. Skip to question 3.4.2.

[ ]  Other. Describe

If yes, insert web addresses, where possible:

PINJ Home Page is [www.PINJ.org](http://www.PINJ.org)

b) Check which of the following teaching and learning topics, if any, are covered in the CKCs.

[x]  Child growth, development and learning

[x]  Health, nutrition, and safety

[x]  Learning environment and curriculum

[x]  Interactions with children

[x]  Family and community relationships

[x]  Professionalism and leadership

[ ]  Observation and assessment

[x]  Program planning and management

[ ]  Diversity

[ ]  Other. Describe

[ ]  None

c) Are the CKCs incorporated into other parts of the child care system? Check which ways, if any, the State/Territory incorporates its CKCs into other parts of the child care system.

[x]  To define the content of training required to meet licensing requirements

[x]  To define the content of training required for program quality improvement standards (as reported in section 3.3)

[x]  To define the content of training required for the career lattice or credential

[x]  To correspond to the early learning guidelines

[ ]  To define curriculum and degree requirements at institutions of higher education

[ ]  Other. Describe

[ ]  None

d) Are the CKCs aligned with other State/Territory or national standards? Check which ways, if any, the State/Territory aligns its CKCs with other standards.

[x]  Cross-walked with the Child Development Associate (CDA) competencies

[x]  Cross-walked with national teacher preparation standards (e.g., NAEYC standards for early childhood professional preparation, National Board of Professional Teaching Standards, National Council for Accreditation of Teacher Education/Council for the Accreditation of Educator Preparation, Head Start SOLAR staff skills indicators)

[ ]  Cross-walked with apprenticeship competencies

[ ]  Other. Describe

[ ]  None

e) Check for which roles, if any, the State/Territory developed supplemental or specialized competencies.

[ ]  Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe

[ ]  Providers working directly with children in family child care homes, including aides and assistants. Describe

[x]  Administrators in centers (including educational coordinators, directors). Describe

[ ]  Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe

[ ]  Education and training staff (such as trainers, CCR&R staff, faculty). Describe

[x]  Other. Describe

The state through a contract with PINJ developed and implemented an instructor approval system that identifies the work experience and education credentials that instructors should have at various levels for early childhood educators and after school practioners.

[ ]  None

f) Check if the State/Territory has developed any supplemental or specialized competencies for practitioners/providers working with the following ages.

[x]  Birth-to-three

[ ]  Three-to-five

[ ]  Five and older

[x]  Other. Describe

CDA Training provides the competencies for practitioners and providers for Birth-to-three and Three-to-five year olds as provided by the CCR&Rs and other training organizations.

[ ]  None

### 3.4.2 Workforce Element 2 - Career Pathways

**Definition** – For purposes of this section, career pathways (or career lattice) defines the options and sequence of qualifications and ongoing professional development to work with children. Career pathways assist professionals in understanding their career options and identify steps for advancement for the workforce recognizing and rewarding higher levels of preparation and mastery of practice to promote higher quality services for children.

a) Does the State/Territory have a career pathway which defines the sequence of qualifications related to professional development (education, training and technical assistance) and experience required to work with children?

[x]  Yes. Describe

Professional Impact NJ is charged with establishing a comprehensive, statewide system of professional developmentopportunities for allearly care and education practitioners. The NJ Registry Career Lattice encourages increased professional development:

See the Career Lattice below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Level** | **Experience** | **Education** | **Notes** |
| IA | Entry | Any individual who meets the staff requirements established by the Manuals of Requirements for Child Care Centers and/or Family Day Care Registration | * Individuals at this level must have completed the NJ Office of Licensing requirement for center staff orientation or family child care registration.
 |
| IB | Entry | High School diploma **or** GED |  |
| IIA | At least six (6) months working with children and families in a professional setting or related field experience | 20 hours of professional development/training | * May include 20 hours of Parents as Teachers (PAT) Training for Family Workers.
* May include NJ First Steps PITC training.
* May include DOE-required 24-hour requirement for P-3 coursework.
 |
| IIB | At least six (6) months working with children in a group setting or related field experience | 60 hours of professional development/training | * It is recommended that the 60 hours of professional development are distributed across the Core Knowledge areas as follows: Child Growth and Development- 15 hours; Curriculum- 15 hours; Family and Community Relationships- 7.5 hours; Assessment and Evaluation- 7.5 hours; Professionalism and Leadership- 5 hours; Program Organization and Management- 5 hours; Health, Safety, Nutrition and Physical Activities- 5 hours.
* May include non-credit bearing Directors' Academy.
 |
| IIC | At least one (1) year working with children and families in a professional setting or related field experience | 90 hours of professional development/training | * May include 90 hours of professional development for the NJ Family Development Credential (FDC) for Family Workers.
 |
| IID | At least one (1) year working with children and families in a professional setting or related field experience | NJ Family Development Credential |  |
| IIE | At least one (1) year working with children in a group setting or related field experience | 120 hours of professional development/training | * It is recommended that the 120 hours of professional development are distributed across the Core Knowledge areas as follows: Child Growth and Development- 30 hours; Curriculum- 30 hours; Family and Community Relationships- 15 hours; Assessment and Evaluation- 15 hours; Professionalism and Leadership- 10hours; Program Organization and Management- 10 hours; Health, Safety, Nutrition and Physical Activities- 10 hours.
* May include 120-hours of NJ Infant/Toddler Credential preparation.
 |
| IIF | At least one (1) year working with children in a group setting or with children and families in a professional setting or related field experience | CDA Credential or CCP Credential | * May include NJ Office of Licensing Group Teacher with CDA or CCP Credential.
 |
| IIG | At least one (1) year working with young children and one (1) year management experience | NJ Administrators' Credential I |  |
| III | At least one (1) year working with young children | Six (6) college credits in the Core Knowledge areas | * May include the NJ Infant/Toddler Credential.
 |
| IV | At least one (1) year working with children in a group setting | Nine (9) college credits in the Core Knowledge areas | * May include NJ Administrators' Credential II.
 |
| V | At least one (1) year working with children in a group setting | Fifteen (15) college credits in the Core Knowledge areas | * May include NJ Office of Licensing Group Teacher with six (6) credits in ECE and nine (9) credits in related areas.
* May include US Department of Labor Child Care Development Specialist Apprentice (For more information go to <http://www.doleta.gov/oa/apprentices.cfm>).
 |
| VI | At least one (1) year working with children in a group setting or with children and families in a professional setting or related field experience | At least an Associate's Degree in Early Childhood Education or a two year degree with 15 credits in Core Knowledge areas or 60 college credits with 15 credits in Core Knowledge areas or Associate's Degree in Human Services | * May include NJ Administrators' Credential III with Associate's Degree.
* May include NJ Infant/Toddler Credential with Associate's Degree.
* The Associate's Degree in Human Services is for Family Workers only.
 |
| VII | At least of two (2) years working with children in a group setting or student teaching or with children and families in a professional setting or related field experience | At least a Bachelor's Degree with the P-3 Certification (undergraduate) or a Bachelor's Degree and any other approved licensure/certification/endorsement in Early Childhood Education or Special Education or English as a Second Language or related area or a Bachelor's Degree with 27 credits in Core Knowledge areas or a Bachelor's Degree in Social Work or Family Studies | * May include NJ Administrators' Credential III with Bachelor's Degree.
* May include NJ Infant/Toddler Credential with Bachelor's Degree.
* The Bachelor's Degree in Social Work or Family Studies is for Family Workers and Family Worker Coordinators only.
* May include NJ Office of Licensing Head Teacher.
 |
| VIII | At least of three (3) years working in an educational setting, including at least one (1) year of supervision of adults | An additional 15 Post-Bachelor's credits in the Core Knowledge areas or 15 credits in a child-related Master's Degree Program or P-3 Certification Post-graduate |  |
| IX | At least of three (3) years managerial and/or supervisory experience in a child care program, educational institution, business or program or agency related to children and families | At least a Master's Degree in Early Childhood Education or Social Work or Family Studies or in a child-related field | * May include Family Worker Coordinators.
* May include college faculty.
* May include Master Teachers.
* May include program or agency administrators.
 |
| X | At least of five (5) years related work experience | At least a Doctoral Degree in Early Childhood Education or Social Work or Family Studies or in a child-related field | * May include college faculty.
* May include program or agency administrators.
 |

[ ]  No, the State/Territory has not developed a career pathway. Skip to question 3.4.3.

Insert web addresses, where possible:

<https://www.pinj.org> or [Professional IMPACT NJ](http://www.pinj.org/index.php?cat=njregistry&page=CareerLattice)

b) Check for which roles, if any, the career pathways include qualifications, specializations or credentials.

[x]  Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe

[x]  Providers working directly with children in family child care homes, including aides and assistants. Describe

[x]  Administrators in centers (including educational coordinators, directors). Describe

Administrators provide continued curriculum support, resources, materials and opportunities for staff to improve teaching practices. Preschool directors, principals, education supervisors and directors of special education need to actively pursue and provide professional development activities and time for teachers to reflect on and refine practice. They also actively engage themselves in the professional development activities.

[ ]  Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe

[ ]  Education and training staff (such as trainers, CCR&R staff, faculty). Describe

[ ]  Other. Describe

[ ]  None

c) Does the career pathways (or lattice) include specializations or credentials, if any, for working with any of the following children?

[x]  Infants and toddlers

[x]  Preschoolers

[x]  School-age children

[x]  Dual language learners

[x]  Children with disabilities, children with developmental delays, and children with other special needs

[ ]  Other. Describe

[ ]  None

d) In what ways, if any, is the career pathway (or lattice) used?

[x]  Voluntary guide and planning resource

[ ]  Required placement for all practitioners and providers working in programs that are licensed or regulated in the State/Territory to serve children birth to 13

[ ]  Required placement for all practitioners working in programs that receive public funds to serve children birth to 13

[ ]  Required placement for adult educators (i.e., those that provide training, education and/or technical assistance)

[x]  Required placement for participation in scholarship and/or other incentive and support programs

[ ]  Required placement for participation in the QRIS or other quality improvement system

[x]  Other. Describe

Required for Admibnistrator's credential, Director's Academy, NAEYC

and NAFCC Accreditation facilitation Project.

[ ]  None

e) Are individuals’ qualifications, professional development, and work experience verified prior to placement on the career pathway (or lattice?)?

[x]  Yes. If yes, describe

As part of the application process, practitioners must submit their educational transcript and training documents prior to placement on the career pathway**.**

[ ]  No

### 3.4.3 Workforce Element 3 – Professional Development Capacity

**Definition** – For purposes of this section, professional development incorporates higher education, training and technical assistance. Higher education capacity refers to capability of the higher education system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Training and technical assistance capacity refers to capability of the training and technical assistance system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Early childhood includes infants, toddlers and preschoolers.

a) Has the State/Territory assessed the availability of degree programs in early-childhood education, school-age care or youth development, and related fields in the State/Territory (e.g., both physical location and distance-based, accessibility to practitioners, etc.)?

[x]  Yes. If yes, describe

Degreed program representatives are active participants of professional development planning in New Jersey. They have participated in ensuring all professional development activities are either distance-based or are located at physical locations that are accessible to the early care and education community.

[ ]  No

b) Has the State/Territory assessed the availability of early-childhood and school-age and related training and technical assistance programs in the State/Territory (e.g., both physical location and distance-based, degree level, etc.)?

[x]  Yes. If yes, describe A survey was conducted by PINJ

[ ]  No

c) What quality assurance mechanisms, if any, are in place for the degree programs and courses offered by the State/Territory institutions?

[x]  Standards set by the institution

[x]  Standards set by the State/Territory higher education board

[x]  Standards set by program accreditors

[x]  Standards set by State/Territory departments of education

[ ]  Standards set by national teacher preparation accrediting agencies

[ ]  Other. Describe

[ ]  None

d) What quality assurance mechanisms, if any, are in place for the training and technical assistance programs offered by the State/Territory?

[ ]  Training approval process. Describe

[x]  Trainer approval process. Describe

Trainer approval is conducted for all levels of Instructors for Non-credit Bearing Courses and Workshops through PINJ

[x]  Training and/or technical assistance evaluations. Describe

[ ]  Other. Describe

[ ]  None

e) Does the State/Territory have articulation agreements in place across and within institutions of higher education?

[x]  Yes. If yes, describe

There is an articulation agreement between New Jersey two year and four year institutions of higher learning for general education courses for transfer students.

[ ]  No

f) Does the State/Territory have articulation agreements that translate training and/or technical assistance into higher education credit?

[x]  Yes. If yes, describe

Limited articulation agreements exist for transfer of 9 CDA credits from Community Colleges to 4 year institutions and through the Starting Points for Children Inc. Child development specialist Program.

[ ]  No

### 3.4.4 Workforce Element 4 – Access to Professional Development

Definition – For purposes of this section, access to professional development (training, education and technical assistance) refers to the degree to which practitioners are made aware of, and receive supports and assistance to utilize, professional development opportunities.

a) Does the State/Territory have professional development opportunities accessible for professionals in various or all sectors of the early childhood and school-age field?

[x]  Yes. If yes, for which sectors?

[x]  Child care

[x]  Head Start/Early Head Start

[x]  Pre-Kindergarten

[x]  Public schools

[x]  Early intervention/special education

[ ]  Other. Describe

[ ]  No

b) Does the State/Territory have a State/Territory-wide, coordinated and easily accessible clearinghouse of information about professional development opportunities available to all members of the early childhood and school-age workforce? Lead Agencies are not required to have a professional development system, but States/Territories may develop such clearinghouses to promote access to professional development opportunities.

[x]  Yes. If yes, describe

Professional Impact NJ, located at Kean University, is a statewide initiative implementing systems to enhance preparation and continuing education of early childhood and afterschool practitioners.(See Directory of Instructional Resources at the PINJ website.)

[ ]  No

Insert web addresses, where possible: www.pinj.org

c) What supports, if any, does the State/Territory provide to promote access to training and education activities?

[x]  Scholarships. Describe

The lead agency provides financial assistance to CDA applicants

when applying for their assessment

[x]  Free training and education. Describe

The lead agency contracts with CCR&Rs to provide training to

early care and education professionals and collaborates with the

Department of Education to coordinate training.

[ ]  Reimbursement for training and education expenses. Describe

[ ]  Grants. Describe

[ ]  Loans. Describe

[ ]  Loan forgiveness programs. Describe

[ ]  Substitute pools. Describe

[ ]  Release time. Describe

[ ]  Other. Describe

[ ]  None

d) Does the State/Territory have career advisors for early childhood and school-age practitioners?

[ ]  Yes. If yes, describe

[x]  No

e) Does the State/Territory have mentors, coaches, consultants, and/or other specialists available to provide technical assistance to the workforce?

[ ]  Yes. If yes, describe

[x]  No

### 3.4.5 Workforce Element 5- Compensation, Benefits and Workforce Conditions

**Definition** – For purposes of this section, rewards for education and training refers to any financial supports provided to practitioners for participating in and completing education or training or for increasing compensation.

a) Does the State/Territory have a salary or wage scale for various professional roles?

[ ]  Yes. If yes, describe

[x]  No

b) Does the State/Territory provide financial rewards for participation in professional development, such as one-time salary bonuses for completing a training or education program?

[ ]  Yes. If yes, describe

[x]  No

c) Does the State/Territory provide sustained financial support on a periodic, predictable basis, such as annual wage supplements, based on the highest level of training and education achieved?

[ ]  Yes. If yes, describe

[x]  No

d) Does the State/Territory have a program to offer or facilitate benefits (e.g. health insurance coverage, retirement, etc.) to the workforce?

[ ]  Yes. If yes, describe

[x]  No

### 3.4.6 Data & Performance Measures on the Child Care Workforce –

What data elements, if any, does the State/Territory currently have access to related to the child care workforce? What, if any, does the State/Territory use for performance measures on professional development and workforce initiatives? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on the child care workforce**. Indicate if the Lead Agency or another agency has access to data on:

[x]  Data on the size of the child care workforce. Describe (optional)

[x]  Data on the demographic characteristics of practitioners or providers working directly with children. Describe (optional)

[x]  Records of individual teachers or caregivers and their qualifications. Describe (optional)

[ ]  Retention rates. Describe (optional)

[x]  Records of individual professional development specialists and their qualifications. Describe (optional)

[x]  Qualifications of teachers or caregivers linked to the programs in which they teach. Describe (optional)

[x]  Number of scholarships awarded . Describe (optional)

[x]  Number of individuals receiving bonuses or other financial rewards or incentives. Describe (optional)

[x]  Number of credentials and degrees conferred annually. Describe (optional)

[ ]  Data on T/TA completion or attrition rates. Describe (optional)

[ ]  Data on degree completion or attrition rates. Describe (optional)

[ ]  Other. Describe

[ ]  None

b) Does the State/Territory have a workforce data system, such as a workforce registry, which tracks workforce demographics, compensation, and qualifications and ongoing professional development for practitioners working with children birth to age 13?

**Definition*–*** For purposes of this section, a workforce data system refers to a system, such as a workforce registry, that tracks the size and characteristics of the child care workforce, including longitudinal data to monitor changes over time. The data system also can produce records to validate and verify qualifications or ongoing professional development for licensing, accreditation, QRIS, wage incentives, and credentials.

[x]  Yes.

b-1) If yes, which roles are included in the workforce data system? For each role checked, indicate in your description whether participation is voluntary or mandatory.

[x]  Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe

[ ]  Providers working directly with children in family child care homes, including aides and assistants. Describe

[ ]  Administrators in centers (including educational coordinators, directors). Describe

[ ]  Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe

[ ]  Education and training staff (such as trainers, CCR&R staff, faculty). Describe

[x]  Other. Describe

The New Jersey Registry for Early Childhood Professionals Serving Children Birth through age thirteen guides, tracks, and recognizes professional growth of the early care and education workforce. The NJ Registry is part of a national consortium of Registries tracking the professional development of the members of our profession. Currently participation in the registry is voluntary**.**

[ ]  None

b-2) Does the workforce data system apply to:

[x]  all practitioners working in programs that are licensed or regulated by the State/Territory to serve children birth to 13?

[ ]  all practitioners working in programs that receive public funds to serve children birth to age 13?

[ ]  No

c) **Performance measurement**. What, if any, performance measures does the State/Territory use related to its workforce and professional development systems?

 **None**

d) **Evaluation**. What, if any, are the State/Territory’s plans for evaluation related to its workforce and professional development systems? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

There are no immediate plans for evaluation of the workforce and professional development systems. The lead agency is strongly encouraging all members of the early care and education workforce to join the NJ Registry.

### 3.4.7 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section in 3.4. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the State/Territory’s goals for the building the professional development system and improving conditions for the workforce in the coming biennium? What progress does the State/Territory expect to make across the five key elements for the workforce and professional development system described above?

Note – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Goal 1 - Interface registry membership with licensing requirements

Goal 2 – Continue to redesign and engance the registry to better collect and report on child care workforce

Goal 3 – Embed the administrator’s credential into licensing requirements

Goal 4 -

Goal 5 -

# AMENDMENTS LOG

**Child Care and Development Fund Plan for**:

**For the period**: 10/1/11 – 9/30/12

Lead Agencies are required to request approval from Administration for Children and Families (ACF) whenever a “substantial” change in the Lead Agency’s approved CCDF plan occurs. Please refer to the ACF Program Instruction regarding CCDF Plan amendments for more information <http://www.acf.hhs.gov/programs/occ/resource/pi-2009-01>

Plan amendments must be submitted to ACF within 60 days of the effective date of the change. Under the regulation, the plan amendment must be approved no later than the 90th day following the date on which the amendment is received by ACF unless the Lead Agency and ACF mutually agree in writing to extend the period. (§98.18 (b)).

ACF encourages Lead Agencies to contact the Child Care program staff in the appropriate ACF Regional Office to discuss any proposed amendment as early as possible.

## Instructions for Submitting Amendments:

Complete the first 3 columns of the Amendment Log and send a copy of the Log (showing the latest amendment sent to ACF) and the amended section(s) to the ACF Regional Office contact. Lead Agency also should indicate the Effective Date of the amended section in the footer at the bottom of the amended page(s). A copy of the Log, showing the latest amendment pending in ACF, is retained as part of the Lead Agency's Plan.

ACF will complete column 4 and returns a photocopy of the Log to the grantee following its review and approval of the amendment. The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

**Note**: This process depends on repeated subsequent use of the same Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain "old" plan pages that are superseded by amendments in a separate appendix to its Plan. This is especially important as auditors will review CCDF Plans and examine effective date of changes.

| Section Amended | Effective/ Proposed Effective Date | Date Submitted to ACF | Date Approved by ACF |
| --- | --- | --- | --- |
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# Appendix 1

# Quality Performance Report

This annual report will be submitted to ACF no later than December 31, 2014 and will reflect the period October 1, 2013 through September 30, 2014. Lead Agencies will leave this report blank when the Plan is initially submitted.

In this report, Lead Agencies are asked about the State/Territory’s progress in meetings its goals as reported in the FY 2014-2015 CCDF Plan, and provide available data on the results of those activities. At a minimum, Lead Agencies are expected to respond to the first question in each section of the Quality Performance Report (QPR) which asks for their progress toward meeting their goal(s) articulated in Part 2 and Part 3 of the CCDF Plan for this Biennium.

Because of the flexibility in administering the CCDF program, it is expected that Lead Agencies may not have information and data available to respond to all questions. A Describe box is provided for each question for Lead Agencies to provide descriptive context for data reported and narrative updates in each data section, including any plans for reporting data in the future, if actual data is not currently available or if specific questions are not applicable. Lead Agencies may use data collected by other agencies and entities (e.g., CCR&R agencies or other contractors) as appropriate. The term Lead Agency is used in questions when the data relate to a CCDF-specific activity, otherwise the term State/Territory is used when another entity may be responsible or involved with an activity (e.g., licensing).

The purpose of this annual report is to capture State/Territory progress on improving the quality of child care. Specifically, this report will:

* Provide a national assessment of State’s and Territory’s progress toward improving the quality of child care, including a focus on program quality and child care workforce quality;
* Track State’s and Territory’s annual progress toward meeting high quality indicators and benchmarks, including those that they set for themselves in their CCDF Plans and those that are of interest to the U.S. Department of Health and Human Services in measuring CCDF program performance;
* Assist national and State/Territory technical assistance efforts to help States/Territories make strategic use of quality funds; and

Assist with program accountability

This report collects progress on the five goals identified in Part 2 and Part 3 of the Child Care and Development Fund (CCDF) Plan for FY2014-2015 along with key data in relation to the four components of child care quality used as a quality framework in Part 3 of the Child Care and Development Fund Plan for FY 2014-2015:

1. Ensuring health and safety of children through licensing and health and safety standards
2. Establishing early learning guidelines
3. Creating pathways to excellence for child care programs through program quality improvement activities
4. Creating pathways to an effective, well-supported child care workforce through professional development systems and workforce initiatives.

**Ensuring the Health and Safety of Children (Component #1)**

In this section, Lead Agencies provide information on the minimum health and safety standards and activities in effect over the past year as of September 30, 2014.

## A1.1 Progress on Overall Goals

### Based on the goals described in the Lead Agency’s CCDF Plan at Section 3.1.7, please report your progress using the chart below.

You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible ( e.g., revised licensing regulation to include elements related to SIDS prevention, lowered caseload of licensing staff to 1:50, or increased monitoring visits to twice annually for child care centers). If applicable, describe any barriers to implementing your planned goals.

| **Goals Described in FY 2014-2015 CCDF Plan** | **Describe Progress – Include Examples and Numeric Targets where Possible** |
| --- | --- |
| Through a partnership with the Department of Children and Families, Office of Licensing, which is the lead agency for licensing regulations, we hope to continue to explore the feasibility of designing andimplementing a QRIS for early care and education community which will result in higher standards for health and safety. | New Jersey continues to work on developing the New Jersey QRIS system "Grow New Jersey Kids." The Grow New Jersey Kids QRIS tool is projected to be finalized Spring 2013. Validation and field testing are anticipated shortly thereafter. The field testing will include 3 counties and approximately 60 centers,some of which will be licensed, license exempt, and head start. |
| Through a partnership with te Department of Children and Families, Office of Licensing, which is the Lead Agency for licensing regulations, we hope to continue to explore the feasibility of designing andimplementing a QRIS for early care and education community which will result in higher standards for Health and Safety. | Multiple planning groups are working on various components of Grow NJ. The State Departments interdepartmental group, key State Department commissioners and stakeholder partners are involved inmany planning sessions, technical assistance and topical learning table discussions. |

**Note: If your licensing standards changed during this period, please provide a brief summary of the major changes and submit the updated regulations to the National Resource Center for Health and Safety in Child Care (**[**www.nrckids.org**](http://www.nrckids.org)**.)**

## A1.2 Key Data

OCC is collecting this information as one part of our overall effort to better understand States/Territories’ activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here and that some data requested may be collected by another agency or entity other than the Lead Agency. Each State/Territory’s policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. For example, the number of programs with licensing violations will be affected by how stringent the licensing standards are. States with more stringent standards may be more likely to report more violations than those with less stringent licensing standards. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

### A1.2.1 Number of Programs

1. How many licensed center-based programs operated in the State/Territory as of September 30, 2014? 4,124

[ ]  N/A

Describe:

1. How many licensed home-based programs operated in the State/Territory as of September 30, 2014? 1,510

[ ]  N/A

Describe:

In New Jersey, home based programs are registered and not licensed. These are called our Registered Family Child Care Providers.

c) Does the State/Territory have data on the number of programs operating in the State/Territory that are legally exempt from licensing? At a minimum, the Lead Agency should provide the number of legally exempt providers serving children receiving CCDF.

[x]  Yes. If yes, include the number of programs as of September 30, 2014 and describe 964 (Use the Describe Box to provide the universe of programs on which the number is based)

In New Jersey, School District programs and Approved Homes (Family, Friend & Neighbor) are considered license exempt. However, data for School Districts is not available at this time because school districts fall under Department of Education. Attempts will be made to obtain this data for the next reporting cycle.

The percentage states 0 but there is no percentage. The question asks to give either a number or a percentage. NJ elected to give a number but in order to pass the Error Report audit, NJ had to put something in the percentage box. Please disregard 0%.

[ ]  No. Describe:

### A1.2.2 Number and Frequency of Monitoring Visits

For licensed programs, a monitoring visit isan onsite visit by department personnel to a licensed child care program with the goal of ensuring compliance with licensing regulations. This may include initial licensing determination visits, licensing renewal visits, periodic announced or unannounced visits, and visits made after a complaint is lodged. For legally exempt providers, a monitoring visit is an onsite visit to a child care program with the goal of ensuring compliance with health and safety standards as defined by CCDF and required for receipt of CCDF funds. Use the Describe box to provide your State/Territory monitoring visit requirement.

1. How many licensed center-based programs received at least one monitoring visit between October 1, 2013 and September 30, 2014?

a-1) Of those programs visited, how many were unannounced?

a-2) Of those programs visited, how many were triggered by a complaint or identified risk?

a-3) What percentage of required visits for licensed center-based program were completed? 53%

[ ]  N/A

Describe:

The Office of Licensing (OOL) has regulatory authority over licensed child care centers and is located under another cabinet level department, the NJ Department of Children and Families. According to OOL, on average, NJ conducts 1 visit per year and may conduct additional visits as needed.

1. How many licensed family child care programs received at least one monitoring visit between October 1, 2013 and September 30, 2014?

b-1) Of those programs visited, how many were unannounced?

b-2) Of those programs visited, how many were triggered by a complaint or identified risk?

b-3) What percentage of required visits for licensed family child care programs were completed? 20%

[ ]  N/A

Describe:

All Registered Family Child Care Providers are monitored at least every two years. No less than 20% are monitored on a random basis annually.

NJ is not sure of the average number of visits, currently we do not capture that data. NJ will begin efforts to develop a way of reporting this data by next reporting cycle. In order to pass the Error Report audit, a number was required for the field. Please disregard the number 0 as number of visits as NJ does not currently collect that data.

c) How many legally exempt providers receiving CCDF received at least one monitoring visit between October 1, 2013 and September 30, 2014? Of those,

c-1) Of those programs visited, how many were unannounced?

c-2) Of those programs visited, how many were triggered by a complaint or identified risk?

c-3) What percentage of required visits for legally exempt providers were completed?

[x]  N/A

Describe:

In home inspections of prospective Approved Homes ( Family Friend and Neighbor (FFN) are conducted solely for families enrolled in the Work First New Jersey (WFNJ), Transitional Child Care (TCC), Child Care Assistance Program (CCAP), Early Employment Initiative (EEI), and Kinship Care Programs. Prospective legally exempt providers complete a Self Arranged Care Inspection and Interview Checklist and are required to pass a Child Abuse Record Information (CARI) background check.

### A1.2.3 Number of Licensing Suspensions, Licensing Revocations and Terminations from CCDF

Suspension of license includes any enforcement action that requires the temporary suspension of child care services because of licensing violations. Revocation of license includes termination or non-renewal of licensure and any other enforcement action that requires the closure of a program because of licensing violations.

|  | How many programs had their licenses suspended due to licensing violations as defined in your State/Territory during the last fiscal year? | How many programs had their licenses revoked due to licensing violations as defined in your State/Territory during the last fiscal year? | How many programs were terminated from participation in CCDF due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year? | **N/A** | **Describe** |
| --- | --- | --- | --- | --- | --- |
| **Child Care Centers** | 0 | 8 |       | [ ]  |       |
| **Group Child Care Homes** |       |       |       | [ ]  |       |
| Family Child Care Homes | 22 | 22 |       | [ ]  | There are a total of 22 Registered Family Child Care Providers whose registration certificate wasrevoked or suspended. At this time, NJ currently does not break the data out to differentiate betweensuspended or revoked. NJ will develop the capacity to begin to report this data according to each statusby the next reporting cylce. |
| In-Home Providers |       |       |       | [ ]  |       |

### A1.2.5 How many previously license-exempt providers were brought under the licensing system during the last fiscal year? 147

[ ]  N/A

Describe:

At this time, 147 represents the total number of new providers that were brought under the licensing system during the specified period. At this time, NJ does not currently capture how many of the 147 were previously license -exempt providers. NJ will begin to develop and track this information in order to provide for the next reporting cycle**.**

### A1.2.6 How many injuries as defined by the State/Territory occurred in child care during the last year?

Please provide your definition of injuries in the Describe box and indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers).

[x]  N/A

Describe:

Our Licensing Office is under the Department of Children and Families. They have been made aware of the need to collect and report this information. We are currently working with them to be able to report this data during the next reporting cycle.

### A1.2.7 How many fatalities occurred in child care or as the result of a child care accident or injury as of the end of the last year?

Please indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers).

[x]  N/A

Describe:

Our Licensing Office is under the Department of Children and Families. They have been made aware of the need to collect and report this information. We are currently working with them to be able to report this data during the next reporting cycle.

**Establishing Early Learning Guidelines (Component #2)**

## A2.1 Progress on Overall Goals

### A2.1.1 Did the State/Territory make any changes to its voluntary early learning guidelines (including guidelines for school-age children) as reported in 3.2 during the last fiscal year?

[x]  Yes. Describe

The Infant Toddler ELGs were revised and adopted. The Preschool ELGs were developed by the Department of Education (DOE) and are currently being implemented in its present form. However, the Preschool ELGs are expected to undergo revisions in the near future to align with the recently created Infant Toddler ELGS.

[ ]  No

### A2.1.2 Based on the goals described in the Lead Agency’s CCDF Plan at Section 3.2.8, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs trained on using the ELG’s, Aligned the ELG’s with Head Start Child Development and Early Learning Framework). If applicable, describe any barriers to implementing your planned goals.

| **Goals Described in FY 2014-2015 CCDF Plan** | **Describe Progress – Include Examples and Numeric Targets where Possible** |
| --- | --- |
| The Lead Agency goal is to complete the development of Infant/Toddler Guidelines in partnership with the New Jersey Council for Young Children. | Infant Toddler ELGs were revised and adopted. The Infant Toddler Standards Subcommittee is currently developing a training and dissemination plan and preparation for an implementation is pending. |
|  |  |

## A2.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory’s policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

### A2.2.1a How many individuals were trained on early learning guidelines (ELG’s) or standards over the last fiscal year?

Responses to this question should be consistent with information provided in question 3.2.3 in the CCDF Plan.

| Provider Categories | Birth to Three ELG’s | Three-to-Five ELG’s | Five and Older ELG’s | N/A | Describe |
| --- | --- | --- | --- | --- | --- |
| How many teachers/practitioners in center-based programs were trained on ELG’s over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) |       |       |       | [ ]  |       |
| How many family child care providers were trained on ELG’s over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) |       |       |       | [ ]  |       |
| How many legally exempt providers were trained on ELG’s over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) |       |       |       | [ ]  |       |

### A2.2.1b How many children are served in programs implementing the ELG’s?

Refer to question 3.2.4 in the CCDF Plan for examples of how ELG’s can be implemented in programs. Program capacity can be used as an estimate of children served.

| **Provider Categories** | **Birth to Three ELG’s** | **Three-to-Five ELG’s** | **Five and Older ELG’s** | **N/A** | **Describe** |
| --- | --- | --- | --- | --- | --- |
| How many children are served in center-based programs implementing the ELG’s? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) |       | 20,176 |       | [ ]  | In 2011-2012, there were 20,176 general education preschoolers served in district settings**.** |
| How many children are served in program implementing the ELG’s? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) |            |       |            | [ ]  |       |
| How many children are served in programs implementing the ELG’s? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) |            | 25,706      |            | [ ]  | In 2011-2012, there were 25,706 children general education preschoolersserved in provider settings. |

**Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)**

## A3.1 Progress on Overall Goals

### A3.1.1 Based on the goals described in the Lead Agency’s CCDF Plan at Section 3.3.9, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs included in the QRIS, Aligned the QRIS standards with Head Start performance standards, or expanded the number of programs with access to an on-site quality consultant). If applicable, describe any barriers to implementing your planned goals.

| **Goals Described in FY 2014-2015 CCDF Plan** | **Describe Progress – Include Examples and Numeric Targets where Possible** |
| --- | --- |
| Continued development of the QRIS rating system for licensed centers and family child care providers. | New Jersey continues to work on developing the New Jersey QRIS system “Grow New Jersey Kids”. The Grow New Jersey Kids QRIS tool is projected to be finalized Spring 2013. Validation and field testing are anticipated shortly thereafter.Multiple planning groups are working on various components of Grow NJ Kids. The State Departments interdepartmental group, key State Department commissioners and stakeholder partners are involved in many planning sessions, technical assistance and topical learning table discussions. |
| Infant/toddler specialist network to be expanded, evaluations of the outcomes of the initiative will be used to frame the direction of the initiative in the future. | While this network was not expanded as planned, the focus was shifted to utilize this network to provide training, technical assistance and support to programs implementing Infant Toddler ELGS. |
| Continued encouragement of the Accreditation Facilitation Project for centers to increase quality. | Though New Jersey continues to actively encourage licensed Centers and Registered Family Child Care Providers to seek national accreditation, NJ is engaging all providers to participate in Grow NJ, which is inclusive of accreditation. NJ also provides Child Development Associate (CDA) Assessment and scholarships to Early Childhood Professionals who are pursuing their CDA. |
| Expanded use of the performance measures at CCR&Rs to identify areas that need improvement suchas eligibility determination, co-payment calculation, and determination of annual income through enhanced case reviews. | Monitoring of all initiatives is an on-going process. This year, NJ increased its Case File Review and aligned monitoring with the recommendations from the Self-Assessment review. |
| Expanded use of the CCR&Rs to provide outreach and consumer education to parents who need quality child care services. | CCR&Rs are under contract to increase public awareness through parent education of child care services available; and to assist parents to become informed consumers by providing information on the availability for quality child care services; This promotes the availability of different kinds of child care services in each county, licensed child care, family care and family friend and neighbor care. Parent consumer education provides for Yellow Pages ads, billboards, and other advertising in the media; Parent consumer education has resulted in Public Service Announcements, advertisements in newspapers and social media and a brochure on choosing quality care. |

## A3.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory’s policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

### A3.2.1 Number of Program Receiving Targeted Technical Assistance

Targeted technical assistance is technical assistance (coaching, mentoring and consultation) that is designed to address a particular domain/area of quality. Responses in this section should be consistent with responses provided in question 3.3.2 in the CCDF Plan which focuses on targeted technical assistance to programs (rather than practitioners) that is intended for moving programs to higher levels of quality.

1. How many programs received targeted technical assistance during the last fiscal year (October 1, 2013 through September 30, 2014)?

[ ]  N/A

Describe: DFD did not separate out training to identify targeted training in 2012/13 year.

1. If possible, report the number of programs who received targeted technical assistance in the following areas:

Health and safety

Infant and toddler care 133

School-age care 129

Inclusion

Teaching dual language learners **10**

Understanding developmental screenings and/or observational assessment tools for program improvement purposes

Mental health

Business management practices

[ ]  N/A

Describe:

Through our Infant Toddler Network, Centers serving infants and toddlers receive targeted technical assistance on issues related to improving quality of infant toddler care and classroom environment. Teachers working with dual language learners receive a 3 day training at a summer institute which includes targeted technical assistance in the areas of; program curriculum and mentoring. School age providers received technical assistance in the areas of room arrangement, behavior management, service learning, and program start up.

### A3.2.2 Number of Programs Receiving Financial Supports

Responses to this question should be consistent with responses provided in question 3.3.3 of the CCDF Plan. **Financial supports** must be intended to reward, improve, or sustain quality. They can include grants, cash, reimbursements, gift cards, or purchases made to benefit a program. This includes tiered reimbursements for CCDF subsidies. **One-time grants, awards, or bonuses** include any kind of financial support that a program can receive only once. **On**-**going or periodic quality stipends** include any kind of financial support intended to reward, improve, or sustain quality that a program can receive more than once.

a) How many programs received one-time, grants, awards or bonuses?

Child Care Centers **98**

[ ]  N/A

Describe:

Family Child Care Homes **63**

[ ]  N/A

Describe:

A total of 98 Centers received financial support to achieve and sustain quality. Of the 98, 4 Centers participated in NJ's Accrediatation Project and were eligible to receive approx. $1500 to assist with needed enhancements to meet accreditation standards and the remaining 94 Centers received Strengthening Families Minigrants. A total of 63 Family Child Care Homes received financial support to achieve ans sustain quality. Of the 63, 19 participated in NJ's Accrediatation Project and were eligible to receive approx. $1500 to assist with needed enhancements to meet accreditation standards and the remaining 44 Family child Care Homes received Strengthening Families Minigrants.

b) How many programs received on-going or periodic quality stipends?

Child Care Centers

[x]  N/A

Describe:

Family Child Care Homes

[x]  N/A

Describe:

**A3.2.3 Number of Eligible Programs for State/Territory QRIS or Other Quality Improvement System**

1. What is the total number of eligible child care centers for QRIS       OR Other Quality Improvement System?

[x]  N/A

Describe: QRIS not implemented

1. What is the total number of eligible family child care homes for QRIS       OR Other Quality Improvement System?

[x]  N/A

Describe: QRIS not implemented

1. What is the total number of eligible license-exempt providers for QRIS       OR Other Quality Improvement System?

[x]  N/A

Describe: Not considering for QRIS at this time

### A3.2.4 Number and Percentage of Programs Participating in State/Territory QRIS or Other Quality Improvement System

1. Of the total number eligible as reported in A3.2.3, what is the total number and percentage of child care center programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of Child Care Centers Participating in QRIS       OR Other Quality Improvement System 268

Percentage of Child Care Centers Participating in QRIS       OR Other Quality Improvement System 6%

[ ]  N/A

Describe:

1. Of the total number eligible as reported in A3.2.3, what is the total number and percentage of family child care programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of Family Child Care Homes QRIS 6 OR Other Quality Improvement System

Percentage of Family Child Care Homes QRIS       OR Other Quality Improvement System **0**

[ ]  N/A

Describe:

1. Of the total number eligible as reported in A3.2.3, what is the total number and percentage of license-exempt programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of License-Exempt Providers QRIS       OR Other Quality Improvement System

Percentage of License-Exempt Providers QRIS       OR Other Quality Improvement System

[x]  N/A

Describe:

### A3.2.5. Number of Programs at Each Level of Quality

For each type of care, provide the total number of quality levels and the number of programs at that level of the total number of participating as reported in A3.2.4. Describe metric if other than QRIS, such as accreditation.

|  | Number of levels of quality | Number of programs at each level | N/A | Describe |
| --- | --- | --- | --- | --- |
| Child Care Centers |       |       | [x]   |       |
| Family Child Care Homes |       |       | [x]   |       |
| License-Exempt Providers |       |       | [x]   |       |

### A3.2.6 Number of Programs Who Moved Up or Down within QRIS

If quality threshold is something other than QRIS, describe the metric used, such as accreditation. These numbers ARE NOT expected to total the number of participating programs in the QRIS as reported in A3.2.4.

|  | How many programs moved up within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year? | How many programs moved down within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year? | N/A | Describe |
| --- | --- | --- | --- | --- |
| Child Care Centers |       |       | [x]   | New Jersey actively encourages licensed Centers and Registered Family Child Care Providers to seeknational accreditation to improve a center’s or FCC home’s quality by providing a 5% differential inrates for becoming accredited.Our external measure of quality is conducted every other year. In the spring of 2011, we conductedECERS-R, Preschool Classroom Math Inventory and Supports for Early Literacy Assessment on asample of classrooms in each district. The scores have steadily risen, and have been above target forthe ECERS-R (5.) for the past 4 cycles. The 2011 score was 5.30, and an evaluation will be conductedagain this spring. This year we will be adding the CLASS. Districts also report the results of theirobservations to the Department of Education (DOE) each year, conducted by the coaches in all sitesand settings. |
| Family Child Care Homes |       |       | [x]   |       |
| License-Exempt Providers |       |       | [x]   |       |

### A3.2.7 Number of CCDF Subsidized Children Served in Programs Participating in the State/Territory Quality Improvement System

**Note**. If the State/Territory does not have a formal QRIS, the State/Territory may define another quality indicator and report it here.

1. What percentage of CCDF children were served in participating programs during the last fiscal year?
2. What percentage of CCDF children were served in high quality care as defined by the State/Territory? 15% Provide the definition of high quality care in the Describe box. This may include assessment scores, accreditation, or other metric, if no QRIS.

[ ]  N/A

Describe:

Out of 79, 933 children, 12, 104 were in high quality, accredited centers.

**Pathways to Excellence for the Child Care Workforce: Professional Development Systems and Workforce Initiatives (Component #4)**

## A4.1 Progress on Overall Goals

### A4.1.1 Based on the goals described in the Lead Agency’s CCDF Plan at Section 3.4.7, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Implement a wage supplement program, Develop articulation agreements). If applicable, describe any barriers to implementing your planned goals.

| **Goals Described in FY 2014-2015 CCDF Plan** | **Describe Progress – Include Examples and Numeric Targets where Possible** |
| --- | --- |
| Embedding registry membership into licensing requirements | The goal has been revised to move away from embedding the registry membership into licensing requirements and towards including registry membership information as a pre-requirement toparticipating in NJ’s QRIS system and NJ is no longer embedding administrator's credentials into the licensing requirements. |
| Continuing the redesign and enhancement of the registry to better collect and report on the child care workforce. | See the newly enhanced and upgraded NJ Registry. PINJ provides access to registry data of selected employee types to DFD as requested. DFD does not currently have access to the registry data. (pp. 140-141) |
| Embedding the administrator’s credential into licensing requirements. | The administrator credential will be included and aligned with QRIS. Office of License current administrator requirements will remain in effect. |

## A4.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory’s policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

### A4.2.1 Number of Teachers/Caregivers and Qualification Levels

1. What is the total number of child care center teachers in the State/Territory as of September 30, 2014?

[x]  N/A

Describe: Do not have data

1. What is the total number of family child care providers in the State/Territory as of September 30, 2014?

[ ]  N/A

Describe:

1. What is the number of center teachers and family child care providers by qualification level as of the end of the last fiscal year? Count only the highest level of education attained.

|  | **Child Care Center Teachers** | **Family Child Care Providers** | **N/A** | **Describe** |
| --- | --- | --- | --- | --- |
| Child Development Associate (CDA) | 27 | 8 | [ ]  |       |
| State/Territory Credential | 23 | 3 | [ ]  |       |
| Associate’s degree | 66 | 5 | [ ]  |       |
| Bachelor’s degree | 275 | 12 | [ ]  |       |
| Graduate/Advanced degree | 44 | 2 | [ ]  |       |

### A4.2.2 Number of Individuals Included in State/Territory’s Professional Development Registry during Last Fiscal Year (October 1, 2013 through September 30, 2014)

Teachers in child care centers 1204

Family child care home providers 113

License-exempt providers 0

[ ]  N/A

Describe:

### A4.2.3 Number of Individuals Receiving Credit-Based Training and/or Education as defined by State/Territory during the last fiscal year

Teachers in child care centers

Family child care home providers

License-exempt providers

[x]  N/A

Describe:

### A4.2.4 Number of Credentials and Degrees Awarded during Last Fiscal Year

If possible, list the type of credential or degree and in what type of setting the practitioner worked.

| **Setting** | **List Type of Credential and Provide Number Awarded** | **List Type of Degree and Provide Number Awarded** | **N/A** | **Describe** |
| --- | --- | --- | --- | --- |
| Teachers in child care centers | CDA – 27State/Territory Credentials - 23 | Associates– 66Bachelors – 275Graduate/Advanced Degree - 44 | [ ]  |       |
| Family child care home providers | CDA – 6State/Territory Credentials - 3 | Associates– 5Bachelors – 12Graduate/Advanced Degree - 2 | [ ]  |       |
| License-exempt providers | CDA – 4Other - 2 | Graduate/Advanced Degree - 3 | [ ]  |       |

### A4.2.5 Number of Individuals Receiving Technical Assistance during Last Fiscal Year

Describe any data you track on coaching, mentoring, or other specialist consultation. If possible, include in what type of setting the practitioner worked. Responses to this question should be consistent with information provided in question 3.4.4e of the CCDF Plan.

| **Setting** | **List Type of Technical Assistance and Provide Number** | **N/A** | **Describe** |
| --- | --- | --- | --- |
| Teachers in child care centers | 20 staff from 10 Centers received mentoring sessions for Dual Language Learners.13,721 providers, staff, and parents received technical assistance. At this time, NJ does not currently capture this aggregated data broken out by the focus of the tecnical assistance. Therefore NJ is unable to provide data regarding how may staff of the 13,721 received technical assistance specifically around coaching, mentoring or consulting. NJ is currently in the process of developing the capacity to collect and report this type of data for the next reporting cycle. | [ ]  |       |
| Family child care home providers | 13,721 providers, staff, and parents received technical assistance. At this time, NJ does not currently capture this aggregated data broken out by the focus of the tecnical assistance. Therefore NJ is unable to provide data regarding how may staff of the 13,721 received technical assistance specifically around coaching, mentoring or consulting. NJ is currently in the process of developing the capacity to collect and report this type of data for the next reporting cycle. | [ ]  |       |
| License-exempt providers | 13,721 providers, staff, and parents received technical assistance. At this time, NJ does not currently capture this aggregated data broken out by the focus of the tecnical assistance. Therefore NJ is unable to provide data regarding how may staff of the 13,721 received technical assistance specifically around coaching, mentoring or consulting. NJ is currently in the process of developing the capacity to collect and report this type of data for the next reporting cycle. | [ ]  |       |

### A4.2.6 Type of Financial Supports Provided and Number of Teachers/Providers Receiving as of End of Last Fiscal Year?

 [x]  Scholarships. How many teachers/providers received? 175

[ ]  Reimbursement for Training Expenses. How many teachers/providers received?

[ ]  Loans. How many teachers/providers received?

[ ]  Wage supplements. How many teachers/providers received?

[ ]  Other. Describe

[ ]  N/A

Describe:

Once the CDA applicants complete 120 hours of training and their portfolio, they are eligible for an assessment scholarship in the amountof $350 to assist them in completing their final step in obtaining their CDA.

**Building Subsidy Systems that Increase Access to High Quality Care**

In this section, Lead Agencies provide progress on their subsidy administration goals over the past year as of September 30, 2014.

## A5.1 Progress on Overall Goals

**Based on the goals described in the Lead Agency’s CCDF Plan at Section 2.8, please report your progress using the chart below.** You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., established copayment policies that sustain income and sustain quality, or established eligibility policies that promote continuity of care). If applicable, describe any barriers to implementing your planned goals.

| **Goals Described in FY 2014-2015 CCDF Plan** | **Describe Progress – Include Examples and Numeric Targets where Possible** |
| --- | --- |
| To implement the QRIS system, Grow NJ Kids, statewide |  |
| To continue to serve all children without creating a waiting list |  |
| To increase children access to higher quality of care |  |
| To support child care providers move towards higher standards of care |  |
| Integrate professional development workforce system with QRIS, Grow NJ Kids |  |

# APPENDIX 2CCDF PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures (§98.15) that:

(1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))

(2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))

(3) in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))

(4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))

1. with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
2. that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
3. that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 109-149)

The Lead Agency also certifies that:

(1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))

(2) it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))

(3) it will collect and disseminate to parents of eligible children and the general public consumer education information that will promote informed child care choices. (658E(c)(2)(D))

(4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))

1. there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
2. procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
3. payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

CCDF Regulations 45 CFR §98.13(b)(2)-(6) require the following certifications.

1. **Assurance of compliance with Title VI of the Civil Rights Act of 1964:**

<http://www.hhs.gov/forms/HHS690.pdf>

1. **Certification regarding debarment:**

<http://www.acf.hhs.gov/grants/certification-regarding-debarment-suspension-and-other>

1. **Definitions for use with certification of debarment:**

<http://www.acf.hhs.gov/grants/certification-regarding-debarment-suspension-and-other-0>

## ****HHS certification regarding drug-free workplace requirements**:** <http://www.acf.hhs.gov/grants/certification-regarding-drug-free-workplace-requirements>

## **C**ertification of Compliance with the Pro-Children Act of 1994**:**

## <http://www.acf.hhs.gov/grants/certification-regarding-environmental-tobacco-smoke>

## Certification regarding lobbying:

http://www.acf.hhs.gov/grants/certification-regarding-lobbying

These certifications were obtained in the 1997 Plan and need not be collected again if there has been no change in Lead Agency. If the there has been a change in Lead Agency, these certifications must be completed and submitted with the Plan.