CHILD CARE AND DEVELOPMENT FUND PLAN

FOR: OREGON

FFY 2010-2011

This Plan describes the CCDF program to be conducted by the State/Territory for the period 10/1/09 – 9/30/11. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

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

Public reporting burden for this collection of information is estimated to average 162.5 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: 0970-0114 expires April 30, 2012
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CHILD CARE AND DEVELOPMENT FUND PLAN FOR: OREGON
FOR THE PERIOD: 10/1/09 – 9/30/11

Lead Agencies must submit plan amendments within 60 days of the effective date of an amendment (§98.18 (b)).

Instructions for Amendments:

1) Lead Agency completes the first 3 columns of the Amendment Log and sends a photocopy 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.

2) ACF completes column 4 and returns a photocopy of the Log to the grantee.

3) The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

Note: This process depends on repeated subsequent use of the 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 The Lead Agency is advised to retain "old" plan pages that are superseded by amendments in a separate appendix to its Plan.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.

<table>
<thead>
<tr>
<th>SECTION AMENDED</th>
<th>EFFECTIVE/PROPOSED EFFECTIVE DATE</th>
<th>DATE SUBMITTED TO ACF</th>
<th>DATE APPROVED BY ACF</th>
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PART 1
ADMINISTRATION

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

1.1 Lead Agency Information (as designated by State/Territory Chief Executive Officer)

Name of Lead Agency: Oregon Employment Department
Address of Lead Agency: 875 Union Street NE; Salem, OR; 97311
Name and Title of the Lead Agency’s Chief Executive Officer: Laurie A. Warner, Director
Phone Number: 503-947-1477
Fax Number: 503-947-1472
E-Mail Address: laurie.a.warner@emp.state.or.us
Web Address for Lead Agency (if any): www.workinginoregon.org

1.2 State/Territory Child Care (CCDF) Contact Information (day-to-day contact)

Name of the State/Territory Child Care Contact (CCDF): Tom L. Olsen
Title of State/Territory Child Care Contact: Administrator
Address: 875 Union Street NE, Room 308; Salem, OR; 97311
Phone Number: 503-947-1409
Fax Number: 503-947-1428
E-Mail Address: tom.l.olsen@emp.state.or.us
Phone Number for CCDF program information (for the public) (if any): 503-947-1243
Web Address for CCDF program information (for the public) (if any): www.childcareinoregon.org

1.3 Estimated Funding

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2009 through September 30, 2010. (§98.13(a))

CCDF: $62,682,307
Federal TANF Transfer to CCDF: $0
Direct Federal TANF Spending on Child Care: $5,100,000
State CCDF Maintenance of Effort Funds: $11,714,966
State Matching Funds: $11,700,362 *
Total Funds Available: $91,197,635
* NOTE: The State of Oregon uses the refundable portion of Working Family Tax Credits to meet part of the matching requirements of the CCDF. This refundable credit is available to low-income working families with qualifying child care expenses. Income limits for this tax credit are higher than the income limits for the state’s child care subsidy program, as stated in the CCDF plan. Due to this difference, some taxpayers that would be unable to receive a federal child care subsidy may be able to receive a refund of child care expenses. Income limits for this tax credit can be found at:


1.4 Estimated Administration Cost

The Lead Agency estimates that the following amount (and percentage) of Federal CCDF and State Matching Funds will be used to administer the program (not to exceed 5 percent): $4,259,633 ( 5 %). (658E(c) (3), §§98.13(a), 98.52)

1.5 Administration of the Program

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

☐ Yes.

☒ No. If no, use Table 1.5.1 below to identify the name and type of agency that delivers services and activities. If more than one agency performs the task, identify all agencies in the box under “Agency,” and indicate in the box to the right whether each is a non-government entity.

Table 1.5.1: Administration of the Program

<table>
<thead>
<tr>
<th>Service/ Activity</th>
<th>Agency</th>
<th>Non-Government Entity (see Guidance for definition)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Determines individual eligibility:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a) TANF families</td>
<td>Dept of Human Services</td>
<td>☐ Yes ☒ No</td>
</tr>
<tr>
<td>b) Non-TANF families</td>
<td>Child Care Division and Contractors</td>
<td>☒ Yes ☒ No</td>
</tr>
<tr>
<td>Assists parents in locating care</td>
<td>Local child care resource &amp; referral agencies</td>
<td>☒ Yes ☐ No</td>
</tr>
</tbody>
</table>
1.5.2. Describe how the Lead Agency maintains overall internal control for ensuring that the CCDF program is administered according to the rules established for the program (§98.11).

The Lead Agency, through discussions with and approval of the Childhood Care and Education Coordinating Council membership, sets the state-level priorities for spending on child care services and activities. As the Lead Agency, the Child Care Division (CCD) administers contracts and issues payments to organizations and providers serving children in high risk populations.

The CCD maintains overall control of expenditures by monitoring performance-based contracts and agreements for compliance with federal regulations and negotiated performance targets. Contracts and interagency or intergovernmental agreements contain language that requires the contractor to certify that federal and state guidelines are followed. Contractors are required to submit quarterly or semi-annual performance reports on specific performance indicators.

Since July 2007, the Oregon Commission for Child Care has been responsible for performance-based reporting out by all contracted agencies and organizations in addition to written reports due to the Child Care Division. Contracts with agencies and other organizations are negotiated to provide specific services funded under the CCDF Act as follows:

- **Oregon Department of Human Services (DHS)**: administers the Integrated Child Care Program for children of low-income working families and families transitioning off Temporary Assistance for Needy Families (TANF). DHS sub-contracts with Oregon Department of Education, Head Start programs to provide full-day/full-year care for children from very low-income working families. DHS issues payments to providers caring for children of low-income working families through the Direct Pay Unit within the Integrated Child Care Program. See Attachment 3.2.1 for administrative rules regarding eligibility of children and child care providers under the subsidy program.
• **Center for Career Development in Childhood Care and Education (OCCD):** administers The Oregon Registry and Oregon Registry Trainer Program, a voluntary professional development system for early childhood and school-age care and education providers and trainers. OCCD provides guidance in curriculum development, monitors trainer and mentor program standards, and is leading the development of The Oregon Registry Training and Education Database (described in Section 5.2.5).

• **Department of Education:** administers grants to school districts to improve quality in child development and teen parent programs.

• **Oregon Child Care Resource & Referral Network:** a non-profit organization, administers contracts with local child care resource and referral agencies statewide to provide resource and referral information for parents and employers; deliver training to child care providers, and provide critical supply and demand data to state agencies and policymakers.

• **Oregon Council on Developmental Disabilities:** the Child Care Division contracts with this council to provide child care services for children with disabilities. The council emphasizes child care services for children that are inclusive, meaning child care placements that provide environments where children can regularly interact with their peers and participate in as many activities as possible.

• **High-Risk, Targeted Population contractors:** the Child Care Division enters into agreements with and makes payments to public and non-profit providers of child care services to migrant and seasonal farm workers, teen parents, parents in substance abuse treatment, and children with special needs or disabilities.

• **Oregon After School for Kids (OregonASK):** a public/private partnership between the Child Care Division and the Charles Steward Mott Foundation, is the statewide network for out-of-school, before and after school, and extended-day learning programs. With over 26 public and private sector members on its Steering Committee, OregonASK provides access to school age workforce training, statewide technical assistance and training to 21st Century Community Learning Centers in 109 sites, development of statewide policies on school age funding, and development of program standards and workforce competencies.

1.5.3. **Describe how the Lead Agency ensures adequate personnel, resources, systems, internal controls, and other components necessary for meeting CCDF reporting requirements (658K, §§98.67, §§98.70 & 98.71, §§98.100 to 102), including the Lead Agency’s plans for addressing any reporting deficiencies, if applicable. At a minimum, the description should address efforts for the following reporting requirements:**

   **a) Fiscal Reporting**
   The Lead Agency complies with Oregon Accounting Manual (OAM) 15.42.00 for Federal grants. The Lead Agency also complies with OMB Circular A-133 for statewide reporting/auditing, which also requires follow-up by auditors under the Generally Accepted Governmental Auditing standards and OMB Circular A-133. Additionally, the Lead Agency complies with the agency’s portion of required statewide sub-recipient monitoring under OAM 30.40.00, which is overseen by an internal auditor as required by
OAR 125.700.0020. The Lead Agency is subject to annual audit by the Oregon Secretary of State auditors as part of a statewide audit of the State's financial statements and report of expenditures of Federal financial assistance. Rules on auditees' responsibilities can be found in OAM 10.80.00.

b) Data Reporting
Two of the reporting entities have programs set up where data is automatically sent to the Child Care Division on the 19th of each month. The programs are listed programs and children in foster care, both within the Department of Human Services.

Two programs are sent reminders and report monthly to the division. These include the migrant and seasonal farm workers reported through Oregon Community Development Center and Head Start programs funded through a contract with the Department of Human Services. Other targeted population programs report directly to the division, which run reports on a monthly basis.

Each program reports in a different format. Currently, the division has software programs set up to convert data into the required format to report to the appropriate federal agency. Oregon submits reports on a quarterly basis.

c) Error Rate Reporting
Oregon uses Data Viewer to track errors from each reporting entity. Data is researched and originating offices are contacted with a list of errors that need to be corrected before submitting to the appropriate federal agency. Some data may not meet the validations within the Data Viewer, but they do meet Oregon's requirements for program participation.

1.6 Funds Used to Match CCDF

1.6.1 Will the Lead Agency use public funds to meet a part of the CCDF Match requirement pursuant to §98.53(e)(1)?

☐ Yes, describe the activity and source of funds: ______

☒ No.

1.6.2 Will the Lead Agency use private donated funds to meet a part of the matching requirement of the CCDF pursuant to §98.53(e)(2)?

☒ Yes. If yes, are those funds: (check one below)

☒ Donated directly to the State?

☐ Donated to a separate entity or entities designated to receive private donated funds?
a) How many entities are designated to receive private donated fund?  
b) Provide information below for each entity:

☐ No.

1.6.3 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF maintenance of effort (MOE) requirement?

☒ Yes (respond to 1.6.5), and:

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

b) (20 %) Estimated percentage of the MOE requirement that will be met with Pre-K expenditures. (Not to exceed 20%).

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

☐ No.

The Child Care Division and Department of Human Services collaborate with the Department of Education Pre-K program to provide full-day and full-year child care for children of low-income working families. CCDF dollars are used to match Pre-K expansion grants awarded for full-day and full-year child care for working families.

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

☒ Yes (respond to 1.6.5), and

a) (30 %) Estimated percentage of the Matching Fund requirement that will be met with pre-K expenditures. (Not to exceed 30%).

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

The Child Care Division and Department of Human Services collaborate with the Department of Education Pre-K program to provide full-day and full-year child care for children of low-income working families. CCDF dollars are used to match Pre-K expansion grants awarded for full-day and full-year child care for working families.
1.6.5 If the Lead Agency indicated “yes” to 1.6.3 or 1.6.4, describe Lead Agency efforts to ensure that pre-K programs meet the needs of working parents: (§98.53(h)(2))

The State provides CCDF dollars for children eligible for the Employment Related Day Care program who attend Head Start/Pre-K programs. This allows low-income working families to have full-day and full-year child care.

1.6.6 Will the Lead Agency use any other funds to meet a part of the CCDF Match requirement pursuant to §98.53(e)(1)?

☑ Yes, describe the activity and source of funds:

The Child Care Division will use other funds to meet part of the CCDF Match requirement as follows:

- **Oregon Community Fund/John and Betty Gray Scholarship program:** funding from this private foundation is used to provide professional development scholarships to family, center-based, and before/after school program providers. Scholarships include, but are not limited to, training that moves providers up the steps of The Oregon Registry.

- **Charles Steward Mott Foundation:** funding from this private foundation is used as match for CCDF dollars that directly support Oregon’s statewide before and after school network, Oregon After School for Kids (OregonASK).

- **Child Care Contribution Tax Credit:** funds from this tax credit are used in conjunction with CCDF dollars to support 1) professional development for family and center-based child care providers, 2) subsidies for children of low-income working families, and 3) quality improvements for child care facilities.

☐ No.

1.7 Improper Payments

Has your State implemented any strategies to prevent, measure, identify, reduce, and collect improper payments? (§98.60(i), §98.65, §98.67)

☑ Yes, and these strategies are:

Approximately 200 billing forms are randomly selected each month for a desk audit. Providers send in their attendance logs, which are checked against the amount billed and client care record information. This has resulted in the discovery of overpayments, but the Department of Human Services believes the main value is preventative since providers know they are being audited.
Provider records are matched monthly with TANF, Food Stamp, Medicaid, and child care subsidy client records to identify eligible providers as well as questionable child care payments.

The department has a statewide toll-free number for reporting fraud. This number is publicized in notices sent to child care providers and clients.

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

☐ Yes, and these planned strategies are:

☐ No.
PART 2
DEVELOPING THE CHILD CARE PROGRAM

2.1 Consultation and Coordination

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

Indicate the entities with which the Lead Agency has a) consulted and b) coordinated (as defined below), by checking the appropriate box(es) in Table 2.1.1.

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

Coordination involves the coordination of child care and early childhood development services, including efforts to coordinate across multiple entities, both public and private (for instance, in connection with a State Early Childhood Comprehensive System (SECCS) grant or infant-toddler initiative). At a minimum, Lead Agencies must coordinate with (1) other Federal, State, local, Tribal (if applicable), and/or private agencies responsible for providing child care and early childhood development services, (2) public health (including the agency responsible for immunizations and programs that promote children’s emotional and mental health), (3) employment services / workforce development, (4) public education, and (5) Temporary Assistance for Needy Families (TANF), and (6) any Indian Tribes in the State receiving CCDF funds (noted by the asterisks in the chart below).

Table 2.1.1 Consultation and Coordination

<table>
<thead>
<tr>
<th>Agency</th>
<th>a) Consultation in Development of the Plan</th>
<th>b) Coordination with Service Delivery</th>
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</thead>
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<tr>
<td>Representatives of local government</td>
<td>☒ *</td>
<td>☐</td>
</tr>
<tr>
<td>Other Federal, State, local, Tribal (if applicable), and/or private agencies providing child care and early childhood development services.</td>
<td>☒</td>
<td>☒ *</td>
</tr>
<tr>
<td>Public health</td>
<td>☒</td>
<td>☒ *</td>
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<td>Employment services / workforce development</td>
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<tr>
<td>Public education</td>
<td>☐</td>
<td>☒ *</td>
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<tr>
<td>TANF</td>
<td>☒</td>
<td>☒ *</td>
</tr>
<tr>
<td>Indian Tribes/Tribal Organizations, when such entities exist within the boundaries of the State</td>
<td>☒</td>
<td>☒ *</td>
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</tbody>
</table>
Development of Oregon’s CCDF State Plan is guided by the state’s Childhood Care and Education Coordinating Council (CCECC). The Council is a collaborative, ad hoc partnership working to create a balanced system of care that supports and empowers working families and promotes safe, healthy, child development. The Council’s role is to advise the Child Care Division (CCD) and other member agencies and organizations on:

- development of the federal CCDF State Plan;
- building the state’s child care system infrastructure;
- coordination of programs and service delivery;
- creation and prioritization of funding for new projects; and
- prioritization of funding cuts for programs and/or services when levels of funding are reduced.

The CCECC is chaired by the administrator of the Child Care Division. Meetings are open to all interested stakeholders and are held bi-monthly. Membership includes representatives of the following agencies, organizations, and constituency groups:

- Department of Human Services (DHS)/Child Care
- Oregon Child Care Resource & Referral Network
- Oregon Commission for Child Care
- Oregon Family Child Care Network
- Oregon Department of Education (ODE) – Head Start Collaboration Project
- ODE – Child Nutrition Programs
- ODE – Early Childhood Education
- Oregon Student Assistance Commission
- Provider Resource Organizations
- Oregon Head Start Association
- OregonASK (After School for Kids)
- Oregon Child Development Coalition
- Parent Voice Project (6)
- Early Intervention and Early Childhood

- DHS – Child Protective Services
- DHS – Family Health Services
- Oregon Commission on Children and Families
- Child Care Resource & Referral agencies
- Center for Career Development in Childhood Care and Education/Portland State Univ.
- Assoc. for the Education of Young Children
- Oregon Community Foundation
- Employment Department, Child Care Division
- Oregon Council on Developmental Disabilities
- Oregon State Library
- Oregon Association of Child Care Directors
- DHS – Drug and Alcohol Prevention
- Oregon Child Care Research Partnership

For each box checked in Table 2.1.1, (a) identify the agency(ies) providing the service and (b) describe the consultation and coordination efforts. Descriptions must be provided for any consultation or coordination required by statute or regulation.
Special Education

The Child Care Division consults with the Oregon Commission for Child Care, an 18-member body appointed by the Governor and Legislative leadership. The Commission provides a biennial report to the Governor and the Legislative Assembly on the ‘state of child care in Oregon’ in odd number years during the legislative session. Recommendations on child care issues from this report are incorporated into the CCDF state plan. The Commission also shares an accountability role with the Child Care Division, through reports to the Commission from CCDF funded agencies and programs.

The Child Care Division also consults with the state Commission on Children and Families, consisting of members appointed by the Governor and Legislative leadership. State commission staff support the membership and the work of the local commissions in each of the 36 counties. This statewide system focuses on prevention based services and support for children 0-18 years of age and their families. The state and local commissions are designated in statute as the lead conveners of the Coordinated Comprehensive Plan which includes planning for early childhood care and education.

Each of Oregon’s nine federally recognized Tribes are provided copies of the draft plan and are encouraged to comment. Several of the Tribes use the subsidy rates established by the Department of Human Services for the Employment Related Day Care program.

To achieve the widest involvement possible in the CCDF planning process, the Council provides the draft plan through the networks of each partner agency and organization. The draft plan was available for comment on the Child Care Division website for over 90 days.

Additionally, a logic model (Attachment 2.1.1a) developed in 2005 and updated in 2007 was used to identify and analyze services and program gaps. This analysis led to development of the Program and Accountability Tracking Tool (PATT) in 2007 (Attachment 2.1.1b). The PATT identifies the standards for activities under seven (7) broad outcomes for the child care system. Council members rated the state’s progress toward the standards and updated the PATT in December 2007 and 2008 in preparation for development of the 2010-2011 CCDF State Plan.

The PATT is updated annually in December to ensure that progress towards standards is being made or identify areas where a decline has occurred. Progress toward achievement of standards is linked with the services delivered and programs offered by child care system partners.

PATT: 5.1 to 5.3, 6.1 to 6.4, 6.6, 7.4 to 7.8

2.1.2 Emergency Preparedness and Response Plan for Child Care and Early Childhood Programs. Lead Agencies are encouraged to develop an emergency preparedness and response plan for child care and other early childhood programs
operating in the State/Territory. The plan should include provisions for continuity
of services and child care assistance payments to families and providers in the event
of an emergency or disaster. Indicate which of the following best describes the
current status of your efforts in this area. Check only ONE.

☐ 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.

☒ Developing. A plan is being drafted. Include the plan as Attachment
2.1.2, if available.

☐ Developed. A plan has been written but has not yet been implemented.
Include the plan as Attachment 2.1.2, if available.

☐ Implementing. A plan has been written and is now in the process of
being implemented. The plan is included as Attachment 2.1.2.

☐ Other. Describe:

a) Describe the progress made by the State/Territory in planning for an
emergency or disaster event with regards to the operation of child care and
early childhood education programs.

The Child Care Division has a draft comprehensive plan in place. See Attachment 2.1.2
for details.

For child care subsidies, a list of the Department of Human Services ‘Mission Critical
Functions and Services,’ including the Child Care Program, has been compiled and is
awaiting Executive Management approval. Leaders have been assigned to the seven
areas of focus. Next steps will be to establish workgroups to write alternate procedures in
the case of disaster or business interruption. The target date for completion of this project
is August 10, 2009.

b) Describe provisions the Lead Agency has in place for the continuation of
core child care functions during and after a disaster or emergency.

See Attachment 2.1.2.

c) Describe efforts the Lead Agency has undertaken to provide resources and
information to families and child care providers about ways to plan and prepare
for an emergency or disaster situation.

No plans are in place at this time. Discussions on how resources and information can be
provided to families and child care providers will occur as part of the workplan of the
Training/Quality Committee in the 2009-10 planning period.

d) Describe how the Lead Agency is coordinating with other State/Territory
agencies, private, and/or non-profit charitable organizations to ensure that child
care and early childhood programs are included in planning, response, and recovery efforts.

No plans are in place at this time. Discussions on coordination with other child care partners and stakeholders will occur as part of the workplan of the Childhood Care and Education Coordinating Council in the 2009-10 planning period.

2.1.3 Plan for Early Childhood Program Coordination. Lead Agencies are encouraged to develop a plan for coordination across early childhood programs. Indicate which of the following best describes the current status of your efforts in this area. Note: Check only ONE.

☐ Planning. Are there steps under way to develop a plan?
  ☐ Yes, and describe the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
  ☐ No.

☐ Developing. A plan is being drafted. Include the draft as Attachment 2.1.3 if available.

☐ Developed. A plan has been written but has not yet been implemented. Include the plan as Attachment 2.1.3 if available.

☒ Implementing. A plan has been written and is now in the process of being implemented. Include the plan as Attachment 2.1.3.

☐ Other (describe):

a) Describe the progress made by the State/Territory in planning for coordination across early childhood programs since the date of submission of the 2008-2009 State Plan.

Oregon’s Early Childhood Systems Plan was developed through a two-year process that engaged numerous and diverse stakeholders – organizations, agencies and individuals, throughout the state. The plan builds on previous work and existing strengths, and promotes the combined efforts of parents and multiple stakeholders to achieve positive outcomes for children and their families.

In 2008, a new framework was introduced as the result of a Governor’s Summit on Early Education. The framework, Early Childhood Matters, brings leadership from both the public and private sectors together to plan and implement strategies, and builds on the earlier Early Childhood Systems Plan. It outlines pathways to improve early childhood coordination and collaboration for health, family supports, and early education.
b) Indicate whether there is an entity that is, or will be, responsible for ensuring that such coordination occurs. Indicate the four or more early childhood programs and/or funding streams that are coordinated and describe the nature of the coordination.

The Early Childhood Council (ECC) is the lead coordination entity for Early Childhood Matters. The Oregon Commission on Children and Families is the lead agency and staffs the ECC, committees, and workgroups. The ECC is comprised of social service and workforce agency leadership and has three committees: Health Matters, Early Learning Matters, and Family Matters.

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

The Early Childhood Matters framework and plan is intended to guide development and implementation of strategies for improvements in workforce knowledge and skills, early education, and child health and well-being outcomes. The following goals were adopted by the Early Childhood Council; each of the committees has selected priorities to develop action plans for implementation.

Health Matters – Desired Results

Children
- All children have health insurance and are connected to a familiar medical provider
- All children show appropriate patterns of physical, social, and emotional development
- Children and parents develop strong, healthy bonds
- Children demonstrate appropriate social and emotional skills when they enter Kindergarten
- Children with any health risks or conditions have early access to effective services and support

Parents and Caregivers
- All pregnant women and families with children have health insurance
- All pregnant women access affordable prenatal care
- Parents and providers are partners in young children’s health
- Parents have the skills and support they need to foster their children’s health, development, and well-being

System
- Communities and environmental conditions promote healthy lifestyle
- Health and behavioral health care providers consistently link with other early childhood services
- Health risks and conditions – including physical, developmental, behavioral and mental – are identified and treated early
• More highly skilled health and behavioral health problems are available for assessment, consultation, and treatment

**Family Matters – Desired Results**

**Children**
- All children live in stable and supportive families
- All children will have more confident, skilled, and nurturing parents
- All children will have a healthy start because their parents understand behavioral risks and act in a safe manner during pregnancy

**Parents and Caregivers**
- Parents are physically and emotionally healthy and safe so they can parent their children
- Parents and caregivers have the knowledge and skills to support children’s health, development, and learning
- Parents are competent and confident as their child’s caregiver

**System**
- Family services and support are adequate, appropriate, and coordinated
- Parenting education resources and services are accessible to all families

**Early Learning – Desired Results**

**Children**
- Children enter Kindergarten healthy and ready for school
- Children demonstrate appropriate growth and development patterns
- Children can attend high-quality childcare and preschool programs that prepare them intellectually and socially for school and life

**Parents and Caregivers**
- Parents and caregivers understand early childhood development concepts, including how health and loving relationships promote a child’s cognitive and emotional development, early literacy, and school readiness
- Parents and caregivers know how to identify quality, child-focused environments

**System**
- Children and their families have access to early care and education services that meet the system’s high standards
- Oregon promotes, supports, and sustains early childhood system improvement initiatives and incentives
- Early childhood providers use their effective professional development system
- The general public understands that early brain development and education are essential for school readiness, academic success, and economic growth
- The system supports families as the child’s most important nurturers and teachers

**PATT  5.2, 5.4, 7.2, 7.3**
d) Describe how the State/Territory’s plan supports, or will support, continued coordination among the programs. Are changes anticipated in the plan?

Oregon’s Child Care and Development Fund plan provides the foundation for planning and funding for child care regulation, child care workforce skills and professional development, resource and referral services for parents and providers, and subsidies for low-income working families and those transitioning from public assistance. A key component of the early childhood system is safe, affordable, accessible and quality child care.

The Childhood Care and Education Coordinating Council will continue to promote the linkages between the larger early childhood system, child care system, and CCDF funded programs.

As with all plans, changes will occur as:
- the economy expands and contracts;
- new federal and state laws and rules are enacted;
- funding streams are adjusted to meet gaps in services and programs; and
- leadership and/or stakeholder priorities evolve as the childhood care and education system matures.

2.2 Public Hearing Process

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 must provide:

a) Date(s) of notice of public hearing: May 27, 2009

b) Manner of notifying the public about the public hearing:

Hearing notices were posted on the Lead Agency website and made available to interested parties, state and local agencies, organizations, and Tribal governments. Notice of Hearing was printed in several statewide newspapers of general circulation at least 20 days before the scheduled hearing. A transcript of the public hearing is on file at the Lead Agency office. A copy of the hearing notice is included in Attachment 2.2.

c) Date(s) of public hearing(s):

June 23, 2009; 6:00 to 7:00 p.m.

d) Hearing site(s):

Roth’s West Salem, Doaks Ferry Room; Salem, Oregon
e) How the content of the plan was made available to the public in advance of the public hearing(s):

The content of the plan was made available to the public and statewide constituency groups through the members and committees of the Childhood Care and Education Coordinating Council (CCECC). The plan was also posted on the Lead Agency website [www.childcareinoregon.org](http://www.childcareinoregon.org) for over 60 days. An electronic submission form was made available for comments. Notice was given to all local child care resource and referral agencies. Notification of the website posting was sent to all members of the CCECC (30+), all CCECC committees and members, all Oregon Tribes, and the 36 local Commissions on Children and Families.

f) Attach a brief summary of the public comment process as Attachment 2.2.

2.3 Public-Private Partnerships

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?

☑ Yes. If yes, describe these activities or planned activities, including the results or expected results.

1) Oregon Commission for Child Care

The Commission is comprised of 18 members appointed by the Governor, Speaker of the House, and President of the Senate, representing elected officials, local governments, business members, parents, service providers, and child care advocates. Primary responsibilities include a biennial report to the Governor and Legislative Assembly, advises the Lead Agency on child care policy, and provides leadership on accountability for the use of Child Care and Development Funds.

**Results:** Extensive public input to child care policy through statewide hearings and forums on child care issues. This information is used to develop legislation and advocacy to improve the child care system. While the Lead Agency contracts CCDF dollars through performance-based contracts, actual reporting on the use of these funds is made to the Commission. This reporting mechanism combines the role of the Commission on setting child care policy with ensuring those policies are implemented within the overall child care system.

**PATT:** 6.1, 7.2, 7.3, 7.5, 7.6

2) Childhood Care and Education Coordinating Council

The Council is comprised of representatives from state and local entities, private nonprofit organizations, child care advocates, consumers, and providers. Primary responsibilities of the Council are:
• lead development of the State CCDF Plan;
• coordinate building the state’s child care infrastructure;
• coordinate the development of programs and service delivery to avoid duplication of effort;
• prioritize funding for new projects; and
• prioritize cuts to programs and services if, or when, funding is decreased.

Results: Coordination, communication, and dissemination of information throughout Oregon’s child care system and communities; elimination of duplication of effort.

PATT: 3.5, 5.1 to 5.3, 6.1 to 6.4, 7.4 to 7.8

3) Education and Quality Investment Partnership (EQUIP)
Oregon’s newest, and most innovative, public/private strategy was launched in the Fall of 2008 to improve the quality of care, promote provider professional development, and increase child care supply. The partnership advisory group, called Strategic Investments, includes the Oregon Community Foundation, Children’s Institute, Child Care Research Partnership, Child Care Division, Department of Human Services, Head Start Collaboration/Department of Education, Commission for Child Care, and the Oregon Child Care Resource and Referral Network.

Funding for EQUIP will be a combination of private investment from the Oregon Community Foundation, CCDF, Child Care Contribution Tax Credits, and American Recovery and Reinvestment Act. EQUIP has a two-pronged approach:

• Provide education awards to child care staff, in licensed facilities, that are working directly with children or supervise staff in that capacity. Awards will be based on the staffperson’s Step on the The Oregon Registry.

• Develop a child care facilities model that incorporates the Structural Indicators of Quality and national standards which move a facility toward accreditation, and professional development standards incorporated in The Oregon Registry. The pilot model will be field tested in September 2009 with statewide roll-out in January 2010. Facilities that achieve the standards incorporated in the model will be designated as ‘partner ready’ for:
  i. Head Start placements,
  ii. Early Intervention/Early Childhood Special Education placements,
  iii. infant/toddler subsidy slots
  iv. school age care, or
  v. other hard-to-find care subsidy slots

Recommendations will be reviewed and approved by the advisory group, Strategic Investments, and approved by the CCECC and Commission for Child Care. Ultimate goal is national accreditation for more facilities and programs.
**Results:** Increased training and education of the child care workforce; increased enrollment on The Oregon Registry backed with monetary incentives; increased supply of infant/toddler and other hard-to-find care slots; increased quality of care, as determined by a state standard, which also moves more facilities toward national accreditation; increased stability of care through an increase in retention and compensation of staff; move more facilities toward national accreditation.

**PATT:** 2.1, 2.3, 2.4, 2.6, 4.1, 5.4, 5.6

4) **Child Care Structural Indicators of Quality (QI)**
With three years of experience and a statewide roll-out to family and center-based facilities underway, the QI project will be one of the key components for EQUIP. As Oregon’s answer to much more expensive to administer Quality Rating Systems, this public/private partnership project has developed an information system about the quality of local child care based on objective criteria. The project collects data from facilities, through the existing regulatory infrastructure, to establish levels of quality based on seven research-based structural indicators:
- Ratio of children per adult
- Group size
- Education levels of teachers/caregivers
- Specialized training levels of teachers/caregivers
- Teacher/caregiver compensation level
- Staff turnover or stability in caregiver/child relationships
- Accreditation

**Results:** Increased consumer education and information on the selection of child care. Parents are able to use QI reports to compare different characteristics important to them in their child’s care and development. Child care providers are able to compare their facilities to others in their community or statewide, which enables them to identify areas in which they are outstanding or need to improve. QI reports can be used for planning, marketing, and as a fundraising tool. Community members, funders, and policymakers will have information on areas in need of investments, measure impacts of investments made, and get a higher level of accountability. The community will invest in child care facilities with increased confidence that outcomes will improve.

**PATT:** 2.1, 2.3

5) **Oregon’s Registry Campaign**
Starting in 2009 and continuing through 2010 and 2011, child care system partners are launching a statewide campaign to increase the number of providers enrolled on The Oregon Registry, the state’s professional development system for child care, early education, and school age providers. Using CCDF and federal American Recovery and Reinvestment Act funds, cash incentives to providers and teachers to
enroll and move up the Steps of The Oregon Registry will be provided through education awards.

**Results:** Increased enrollment on The Oregon Registry; increased number of providers moving up the Steps; increase access to funding for continued education and training; increased quality of facilities and care through advancement of training and education offerings.

**PATT:** 2.3, 2.4, 2.6

6) **Child Care Health/Mental Health Consultation Program**

Now in its fifth year of implementation, this program is a partnership between child care providers, Department of Human Services/Office of Family Health Services, Oregon Pediatric Association, local Commission on Children and Families, and local health providers. Consultation regarding children’s social/emotional development and behavior in child care is strengthened with consultation methods learned through Promoting First Relationships training. A mental health specialist and/or early childhood educator is included on each consultation team. The long-term goal of this program is a statewide system of physical and mental health consultations with child care providers. Each program site works to provide relevant information to providers, increase access to health services, and improve collaborations on health/mental health services with the local community.

**Results:** Improvement of children’s physical and mental health through provider health education and consultation services, particularly for infants, toddlers, and children that may lack access to those services.

**PATT:** 4.3, 4.5

7) **Early Childhood Education Virtual Degree Program**

The Virtual Degree Project was created to facilitate the transition of child care providers from community-based training to community college credit training. The project is now providing options for students to:

- Receive community college credit for achieving Step 7 on the Oregon Registry
- Take classes at nontraditional times or via distance delivery methods
- Take classes at other Oregon community colleges and transfer the credit to their home institution in order to complete a degree.

The goal of the project is to give child care providers increased flexibility and therefore encouragement and support in obtaining a higher level of education.

Community colleges in Oregon have greatly increased their online program offerings since this project began. Several community colleges have all or a majority of their classes available online. All but one community college with an early childhood education (ECE) degree program now have provisions for awarding credit for prior
community-based training whether it is the national Child Development Associate Credential (CDA) or the Oregon Registry Step 7 Certificate. Access to statewide ECE programs offers child care providers the most scheduling flexibility and connection to their “home” community colleges, and preserves their financial aid package.

The project, managed through a contract with the Oregon Association for the Education of Young Children, is continuing to encourage increased flexibility and recognition of the needs of child care providers. It is now entering the third phase of increasing the articulation of community college ECE degrees into the four-year college and university system, which will enable more child care workers to achieve a bachelor’s degree. The current challenges are to increase efficiencies and avoid duplication where possible, and to identify strategies to reach more child care providers and help them move through the secondary education system.

Results: Access to higher education in early childhood development for child care providers that 1) have not felt they could attend college, 2) have not had access to post-secondary educational opportunities, and 3) have extensive backgrounds and hours in community-based training and education but have no college credit.

PATT: 5.5

8) Oregon After School for Kids (OregonASK)
Now in its fourth year, OregonASK, a public/private partnership between the Child Care Division and the Charles Steward Mott Foundation, is the statewide network for out-of-school, before and after school, and extended-day learning programs. With over 26 public and private sector members on its Steering Committee, OregonASK provides access to school age workforce training, statewide technical assistance and training to 21st Century Community Learning Centers in 109 sites, development of statewide policies on school age funding, and development of program standards and workforce competencies. OregonASK is launching a project with the Governor’s Oregon Hunger Relief Task Force to increase the number of school age programs participating in the federal USDA Child and Adult Care Food Program.

Results: increased awareness of the importance of school age programs for working families; increased awareness of child care subsidies available for low-income working families with school age children; development of a policy platform at the state level to coordinate and align public funding for school age programs.

PATT: 1.5, 2.3, 3.4, 4.1, 5.1, 5.2, 6.2, 7.2

9) Child Care Director Certificate Training Series
The original pilot in 2005 was funded with CCDF dollars administered by the Multnomah County Commission for Children, Families, and Community. The research-based 60-hour training series is now offered statewide, by contract, through
the Oregon Association for the Education of Young Children (OAEYC) with a variety of community funding sources including CCDF.

Six counties (Clackamas, Multnomah, Umatilla, Washington, and Yamhill) have used CCDF dollars to pay fees for the certificate for participants from their counties. These ‘scholarships’ paid for all 60 hours of training in Program Management for a selected cohort of 20 participants each year.

American Recovery and Reinvestment Act funds will be used to provide up to 100 scholarships over two years for participation in this certificate training series.

**Results:** The training series is the foundation for the Oregon Registry Director Credential which is nationally recognized by the National Association for the Education of Young Children; provides Set Two training in the Core Knowledge Category of Program Management in The Oregon Registry; helps directors form cohort networks and support for each other.

**PATT:** 2.3, 2.5, 5.4, 5.5, 6.3

10) **Oregon Child Care Research Partnership**

This partnership brings together university-based researchers, state agency child care staff, private sector program evaluators, statisticians, and child care resource and referral data management staff under the leadership of the Lead Agency administrator. Partners facilitate data sharing and coordinate program evaluation to ensure Oregon is building a shared body of knowledge about program effectiveness, impact, and accountability.

**Results:** Increased accountability for core components of the Oregon child care system through performance measurements and program evaluations; increased knowledge of the effectiveness and impact of child care system investments.

**PATT:** 7.1

11) **Child Care Contribution Tax Credit**

A first in the nation because of its funding mechanism, the Child Care Contribution Tax Credit program enables individuals and businesses to receive state tax credits and federal tax deductions for contributions to the Child Care Fund. The sunset date for the tax credit was extended to 2012 in the 2007 Legislative Session. The legislative intent of the original pilot projects was to address three core components of the child care system: provider compensation, parent subsidies, and quality of facilities. The pilot project in Lane County, Child Care Enhancement Project, has now moved to program maintenance after showing positive evaluations results. The second pilot program in Multnomah County, Child Care Community Fund, will move to maintenance after completion of evaluation in 2010. Information learned from both of these pilot programs has provided the foundation for EQUIP. Funding for both the pilot programs will continue along with the new initiatives funded with a combination
of this tax credit, private sector funding, and CCDF Discretionary and ARRA Discretionary dollars.

**Results:** Evaluations from both the pilot projects has provided valuable information for the EQUIP initiative. Information on the cost and effectiveness of both the projects will be incorporated into the model facilities criteria and education award strategies which will be rolled out statewide starting in mid-2009 and early 2010.

**PATT:** 7.1

**12) Infant/Toddler Mental Health Certificate Program**
This certificate program is a graduate level Certificate of Completion opportunity offered by Portland State University. The distance learning program offers multidisciplinary professionals working with children age 0 to 36 months old and their families opportunities to increase their knowledge about current research and interventions in infant mental health. A partner organization, Oregon Community Foundation, has subsidized several positions for child care providers to participate. American Recovery and Reinvestment Act funding through the Child Care Division will be used to augment private sector funding and provide scholarships to 20 participants in the certificate program over two years.

**Results:** Increased number of child care and early education providers in the certificate program; promote understanding of early childhood mental health needs and interventions; increased number of early childhood professionals with infant mental health expertise.

**PATT:** 4.2 to 4.5

**13) Inclusive Child Care Program**
A partnership between state agencies and advocates for children with special needs, the program is targeted to child care providers. Information and training gives providers the supports the need to care for children with special needs. The program also provides child care subsidies, through a contract with the Child Care Division, to families based on the specific needs of the child. Additional CCDF funding provided through the Department of Human services helps the program provide consultation and supports to families with very high needs children and access to inclusive care.

**Results:** Increased inclusion of children with special needs in typical child care settings where they can interact with other children and be a part of the educational and social environment.

**PATT:** 3.3, 4.2 to 4.5

**14) Partnership for Inclusive Child Care and Education (PICCE)**
Funded with a combination of CCDF and various funding sources within local communities, individuals are trained in a Training-of-Trainers format to provide the
Teaching Research Assistance to Childcare providers (TRAC) inclusion curriculum developed at Western Oregon University. The 40-hour TRAC curriculum is designed to give providers information and skills-based training to increase their ability to serve children with special needs. Participants in local trainings may receive follow-up supports from trainers or other community resources. Supports include consultation, mentoring or technical assistance. In 2008 and 2009, project activities were coordinated with the Department of Education, Western Oregon University and other public/private partners through the Oregon Early Childhood Collaborative. An additional cohort of trainers will be funded from 2009 to 2011 along with additional trainer support services for the original three cohort groups.

**Results:** Increased skills, abilities, and confidence levels of child care providers who want to increase their capacity to provide care for children with special needs.

**PATT:** 4.4

15) Early Childhood System – State and Local Councils

The State Early Childhood Council (ECC) with members from many state and local entities was established to address systemic issues relating to early childhood in Oregon. Oregon law provides the vision, goals and requirements of the Oregon Early Childhood System for children zero to eight years of age and their families. The ECC charter defines the scope of their work within the parameters of the statutes.

Oregon law also established local ECCs in every county to work at achieving outcomes at a community level. Early intervention, early childhood special education, education service districts, Head Start, Healthy Start, child care resource and referral agencies among other interested partners are represented in the planning.

**Results:** The state council has crafted quality assurance standards for early childhood and has identified benchmarks (high level outcomes) and intermediate outcomes to measure systemic progress in early childhood. The state council is working to further develop and connect the major components (childcare and early education, healthcare, mental health, parent education, and family support) of the early childhood system, and to provide training, technical assistance and other resources to local ECCs. County comprehensive plans for children and families demonstrate what is being accomplished through local ECCs to improve early childhood systems at the local level.

**PATT:** 5.2, 5.4, 7.2, 7.3, 7.6, 7.8

16) Oregon Child Care Online Training Calendar

This web-based training calendar, on a hosted server at the Oregon Child Care Resource & Referral Network, provides statewide access to community-based early childhood, school age, and required training for licensing. Training in alternate languages is also listed, for example: Spanish, Russian, Vietnamese, and Chinese. The calendar provides information by county, training category and core knowledge.
areas. Conferences of interest to providers are also listed. Future enhancements to the calendar include video-based, online, and other distance learning alternatives. The calendar can be accessed at:  www.oregonchildcaretraining.org

Results:  Child care providers, school age practitioners, early childhood educators and the general public can access training information 24/7.  Over 500 training events are listed at any time.  Family and center-based providers can access training for licensing requirements outside of their county if nothing is available locally in the time frame needed.

**PATT 2.7, 5.4, 5.5**

☐  No.
PART 3
CHILD CARE SERVICES OFFERED

3.1 Description of Child Care Services

3.1.1 Certificate Payment System. Describe the overall child care certificate process, including, at a minimum:

a) a description of the form(s) of the certificate (§98.16(k)):

Parents receive a ‘certificate of eligibility’ in the form of a computer-generated notice when eligibility is determined.

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

Typically, a family has already chosen a provider by the time they apply for the child care subsidy. If not, consumer education services are provided which emphasize the right of parental choice and how to choose providers who understand and employ appropriate health, safety, and quality program practices. Once eligibility is determined, a child rebilling form is issued to the provider chosen by the family.

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

At the time of application and intake, parents are informed they may choose the option of a certificate (voucher) to purchase child care. In the Employment Related Child Care program, if a parent selects this option, the parent gives the voucher to the chosen provider and the Department of Human Services (DHS) enters into a contract with the provider of choice. DHS requires the provider of choice to become listed and issues payments directly to them (not the family). The majority of parents choose the certificate program.

In FFY 2008, the certificate and/or cash option was selected by parents for child care services for approximately 46,230 children, almost 95 percent of all child care services funded by the Child Care and Development Fund in Oregon.
d) Attach a copy of your eligibility worker’s manual, policy handbook, administrative rules or other printed guidelines for administering the child care subsidy program as Attachment 3.1.1.

Note: If these materials are available on the web, the Lead Agency may provide the appropriate Web site address in lieu of attaching hard copies to the Plan.

Attachment 3.1.1. can be found at:

http://www.dhs.state.or.us/policy/selfsufficiency/em_firstpage.htm

3.1.2 In addition to offering certificates, does the Lead Agency also have grants or contracts for child care slots?

☐ Yes, and describe the type(s) of child care services available through the grant or contract, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))

Parents identified for targeted, high risk services have access to child care through contracts with community-based programs. These contracts do not pay for slots; the providers bill the Lead Agency for services provided. Targeted populations include: a) parents engaged in migrant and seasonal farm worker jobs; b) teen parents enrolled in high school completion programs; c) parents participating in state-approved substance abuse treatment; and, d) children with disabilities and special needs who need access to child care.

Application for services is processed by intake workers at program sites. Eligibility for child care is determined immediately upon parent admission. Point of entry to point of eligibility does not exceed five working days. Parents requesting their own choice of care may receive a certificate to purchase another option.

The Lead Agency also provides CCDF dollars through an interagency agreement with the Department of Human services for full-day, full-year Head Start slots. These slots are available in a full range of child care options, including centers and family child care homes.

☐ No.

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

☐ Yes.
No, and identify the localities (political subdivisions) and services that are not offered:

3.1.4 The Lead Agency must allow for in-home care (i.e., care provided in the child’s own home) but may limit its use. Does the Lead Agency limit the use of in-home care in any way?

☐ Yes, and the limits and the reasons for those limits are (§§98.16(g)(2), 98.30(e)(1)(iv)):

☒ No.

3.2 Payment Rates for the Provision of Child Care

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

3.2.1 Provide a copy of your payment rates as Attachment 3.2.1. The attached payment rates were or will be effective as of: October 1, 2007.

3.2.2 Are the attached payment rates provided in Attachment 3.2.1 used in all parts of the State/Territory?

☒ Yes.

☐ No, and other payment rates and their effective date(s) are provided as Attachment 3.2.3.

3.2.3 Provide a summary of the facts relied on by the State to determine that the attached rates are sufficient to ensure equal access to comparable child care services provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:

a) The month and year when the local market rate survey(s) was completed (§98.43(b)(2)): June 2008.

b) A copy of the Market Rate Survey instrument and a summary of the results of the survey are provided as Attachment 3.2.3. At a minimum, this summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

3.2.4 Does the Lead Agency use its current Market Rate Survey (a survey completed no earlier than 10/1/07) to set payment rates?
3.2.5 At what percentile of the current Market Rate Survey is the State payment rate ceiling set?

Oregon’s ceiling rate varies depending on rate areas and types of care, but the average is approximately at the 75th percentile of the 2006 Market Rate Study, and at approximately the 68th percentile of the 2008 Oregon Child Care Market Price Study.

Note: If you do not use your current Market Rate Survey to set your rate ceilings or your percentile(s) varies across categories of care (e.g., type of setting, region, or age of children), describe and provide the range of variation in relation to your current survey.

Oregon’s maximum payment rates currently equal the 68th percentile of market prices observed in the 2008 Oregon Child Care Market Price Study. Also, the Employment Related Day Care income limit is currently at 185 percent of the Federal Poverty Level. The current budget includes additional funding through the current child care training system to help license-exempt family, friends, and neighbor child care providers meet DHS enhanced rate requirements.

3.2.6 Describe the relationship between the attached payment rates and the market rates observed in the current survey, including at a minimum how payment rates are adequate to ensure equal access to the full range of providers based on the results of the above noted local market rate survey: (§98.43(b)

The Market Price Study identifies child care prices or rates and the geographic distribution of these rates across the state. Rates vary by several factors including the age of child served, type of care (family child care, center, certified family care), the local supply and demand for child care, and providers’ perceptions of the capacity of families to pay for care.

The rates vary depending on the type of care and the area of the state in which the care is provided. The Oregon Market Price Study examines geographic patterns in the rates charged by providers by age of child served, type of care, and reporting modes (hourly, monthly, etc). This study fulfills the federal requirement that the state complete a market rate survey every two years. Oregon's maximum payment rates for licensed care are equal to the 75th percentile of market rates observed in the 2006 Oregon Child Care Market Rate study. This gives families access to approximately 68 percent of the child care market.

Oregon also supports a strong child care resource and referral system that educates and encourages families to make informed choices about child care and helps them access care that meets their particular need. Oregon has invested more heavily in the Child Care
Resource and Referral system than many other states. For the 2009-2011 biennium, the subsidy program will pay $2.6 million to CCR&Rs for enhanced services to DHS clients and providers who participate in the subsidy system. Many CCR&R staff specialize in helping subsidy parents find care, including hard to find care such as infant and odd hour care.

Also, CCR&R staff help providers serving subsidy clients by offering technical assistance with subsidy questions, troubleshooting payment problems, and advocating with the client and caseworker on behalf of the provider. This also includes additional funding through the current child care training system to help license-exempt family, friends and neighbor child care providers meet DHS enhanced rate requirements.

Oregon has a reliable provider payment system. Once a provider is entered on the provider pay system, payments are typically received within a week after the provider bills DHS for the care they provided. Billing forms are sent to the provider in advance of the care being provided and the provider can be certain they will be paid for the authorized care they provide. Providers, particularly in low-income areas, report that an advantage to caring for children on the subsidy is that they can count on at least the subsidy portion of the child care bill being paid. They can't always do that with families who are not receiving the subsidy. DHS also has Direct Deposit available to child care providers.

3.2.7 Does the Lead Agency consider any additional facts to determine that its payment rates ensure equal access? (§98.43(d))

☐ Yes. If yes, describe.

Oregon supports a strong child care resource and referral system that educates and encourages families to make informed choices about child care and helps them access care that meets their particular need.

☐ No.

3.2.8 Does the State have any type of tiered reimbursement or differential rates?

☐ Yes. If yes, describe:

Market rates are adjusted as funds are available to reflect the most recent price study data; this maintains stability of the system and accessibility to care. Current reimbursement rates to providers are identified in Attachment 3.2.1. The subsidy agency has developed a tiered reimbursement system to compensate informal providers for obtaining the same training required of registered providers.

☐ No.
3.2.9 Describe how the Lead Agency ensures that payment rates do not exceed the amount paid by the general public for the same service. (§98.43(a))

Payments to providers are capped on the 2006 Market Rate Study. Standard Rate providers are paid at 88 percent of the 75th percentile, Enhanced Rate providers are paid at 95 percent of the 75th percentile, and Licensed Rate providers are paid at 100 percent of the 75th percentile.

Subsidy program enhancements have increased access to some types of care that are generally hard to find. For children with especially high needs, payment up to approximately 200 percent of the maximum rate can be authorized based on an individual assessment of the additional care a child requires in a typical child care setting. (NOTE: this refers to the Department of Human Services ‘High Need Rate,’ which was established in 2000 and has not changed since then. At current rates, 300 percent of the maximum enhanced center rate ($9900/month) is $2,700/month. The maximum payment with a High Need Rate is $1,740/month ($900 + $840.)

Parents who require more than the typical number of child care hours can receive up to 150 percent of the maximum rate. This includes parents who work an overnight shift and require child care for both work and sleep time, and parents who need two providers to cover both weekday and weekend care.

3.3 Eligibility Criteria for Child Care

3.3.1 Age Eligibility

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

☑ Yes. If yes, define physical and mental incapacity in Appendix 2, and provide the upper age limit 17

☐ No.

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

☑ Yes, and the upper age is 17

☐ No.

3.3.2 Income Eligibility
Complete columns (a) and (b) in Table 3.3.2 below based upon 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.

Table 3.3.2 Income Eligibility

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a) 100% of State Median Income (SMI) ($/month)</th>
<th>(b) 85% of State Median Income (SMI) ($/month) [Multiply (a) by 0.85]</th>
<th>IF APPLICABLE</th>
<th>Income Level if lower than 85% SMI</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>(c) $/month</td>
<td>(d) % of SMI [Divide (c) by (a), multiply by 100]</td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>$3,830</td>
<td>$3,256</td>
<td>$2,268</td>
<td>59%</td>
</tr>
<tr>
<td>3</td>
<td>$4,432</td>
<td>$4,022</td>
<td>$2,857</td>
<td>60%</td>
</tr>
<tr>
<td>4</td>
<td>$5,634</td>
<td>$4,789</td>
<td>$3,446</td>
<td>61%</td>
</tr>
<tr>
<td>5</td>
<td>$6,535</td>
<td>$5,555</td>
<td>$4,035</td>
<td>62%</td>
</tr>
</tbody>
</table>

Note: Table 3.3.2 should reflect maximum eligibility upon initial entry into the CCDF program.

a) Does the Lead Agency have “tiered eligibility” (i.e., a separate income limit for remaining eligible for the CCDF program)?

☐ Yes. If yes, provide the requested information from Table 3.3.2 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.

b) If the Lead Agency does not use the SMI from the most current year, indicate the year used: 2010

c) These eligibility limits in column (c) became or will become effective on: February 1, 2011

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

Countable income includes all income received by immediate family members living in the household except transfer income or earned income of children. There are no income deductions.
e) Is any income deducted or excluded from total family income (e.g., work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments)?

☐ Yes. If yes, **describe** what type of income is deducted or excluded from total family income.

☐ No.

f) **Describe** whose income is excluded for purposes of eligibility determination.

Earned income of the child (under 18 or 18 and still in high school) is excluded when determining eligibility.

### 3.3.3 Work/Job Training or Educational Program Eligibility

a) How does the Lead Agency define “working” for the purposes of eligibility? Describe the specific activities that are considered “working” for purposes of eligibility determination, including minimum number of hours. (§§98.16(f)(6), 98.20(b))

Employment normally means working that results in earned income. This includes paid work experience and paid practicum assignments. For ERDC, this also includes work study as part of an education program.

At least one caretaker (see OAR 461-001-0000) must receive income from employment (other than self-employment), including employment through a work study program. There is no required minimum work hours; however, child care need must be determined by comparing the amount of subsidy payment to the parent’s co-pay amount. If the co-pay amount is larger than the subsidy payment, there is no child care need and, therefore, no eligibility.

b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program?

☐ Yes. If yes, **how does the Lead Agency define “attending job training or educational program” for the purposes of eligibility?** Describe, the specific activities that are considered “job training and/or educational program”, including minimum number of hours. (§§98.16(f)(3), 98.20(b))

The Department of Human Services, Employment Related Day Care program does not allow child care assistance to parents who are attending job training or an educational program. However, there are student/parents accessing child care subsidies through the
Inclusive Child Care program, administered by the Council on Developmental Disabilities. These parents have to meet eligibility guidelines for the program and the child has to meet the state definition for ‘special needs’ as described in Appendix 2.

Training or education is described as a program that leads to a degree or certificate completion. Student/parents must be attending at least six hours per week.

☐ No.

3.3.4 Eligibility 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))

☐ Yes. If yes, provide a definition of “protective services” in Appendix 2. 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))

☐ Yes.

☐ No.

☒ No.

Current funding levels do not allow services to this population. If additional funds become available, Oregon would serve this population if the statewide Childhood Care and Education Coordinating Council approved funding for this population as a priority.

b) Does the Lead Agency 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? (§§98.20(a)(3)(ii), 98.16(f)(7))

☐ Yes. (NOTE: This means that for CCDF purposes the Lead Agency considers these children to be in protective services.)

☒ No.

The State of Oregon chooses to provide child care to children in foster care whose foster parents are working, or who are in education and/or training activities.

Payments to working foster parents are allowed under Oregon’s definition, but current funding levels do not allow services to this population. If additional funding becomes available, Oregon would serve this population if the statewide Childhood Care and Education Coordinating Council approved funding for this population as a priority.
3.3.5 Additional Conditions for Determining CCDF Eligibility

Has the Lead Agency established any additional eligibility conditions for determining CCDF eligibility? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

☐ Yes, and the additional eligibility conditions are: (Terms must be defined in Appendix 2)

☐ No.

3.4 Priorities for Serving Children and Families

3.4.1 At a minimum, CCDF requires Lead Agencies to give priority for child care services to children with special needs, or in families with very low incomes. Complete Table 3.4.1 below regarding eligibility priority rules. For columns (a) through (c), check only one box if reply is “Yes”. Leave blank if “No”. Complete column (e) only if you check column (d).

Table 3.4.1 Priorities for Serving Children

<table>
<thead>
<tr>
<th>Eligibility Categories</th>
<th>How does the Lead Agency prioritize the eligibility categories in Column 1?</th>
<th>CHECK ONLY ONE</th>
<th>CHECK ONLY IF APPLICABLE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(a) Priority over other CCDF-eligible families</td>
<td>(b) Same priority as other CCDF-eligible families</td>
<td>(c) Guaranteed subsidy eligibility</td>
</tr>
<tr>
<td>Children with special needs*</td>
<td>☐</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Children in families with very low incomes*</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Families receiving Temporary Assistance for Needy Families (TANF)</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Families transitioning from TANF</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Families at risk of becoming dependent on TANF</td>
<td>☐</td>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>

* Required

Children are not guaranteed eligibility by virtue of having a disability or other special need. Families must still meet income, employment/training or TANF requirements.

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

Children eligible for services are listed and defined in Appendix 2. Targeted, high risk populations served by the Lead Agency include children of teen parents, children of...
migrant and seasonal farm workers, children of parents in alcohol and drug treatment programs, and children with special needs.

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

CCDF subsidies are used to meet the needs of families by helping them achieve self-sufficiency through safe, dependable child care that is necessary for employment and participation in other activities. Child care is available through the subsidy agency for families who:

- a) receive TANF benefits and become employed, both while they remain on TANF and as a transition benefit when they are no longer eligible for TANF; or
- b) are participating in JOBS (the state’s employment and training program for individuals on public assistance) activities to become self-sufficient; or
- c) are at risk of becoming dependent on TANF benefits.

Effective, October 1, 2010 due to budget reductions, all applicants not transitioning from the TANF/JOBS program will be denied benefits and placed on a Child Care Reservation List per 461-135-0400. When enrollment in the ERDC case load drops below 10,000 the Child Care Reservation List will be used to randomly select ERDC applicants to re-apply for ERDC.

3.4.4 Has the Lead Agency established additional priority rules that are not reflected in the table completed for Section 3.4.1? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

☐ Yes, and the additional priority rules are: (Terms must be listed and defined in Appendix 2)

☒ No.

3.4.5 Does the Lead Agency serve all eligible families that apply?

☐ Yes.

☒ No.

3.4.6 Does the Lead Agency have a waiting list of eligible families that they are unable to serve?

☒ Yes. If yes, describe. At a minimum, the description should indicate:
a) Whether the waiting list is maintained for all eligible families or for certain populations?
b) Whether the waiting list is maintained for the entire State/Territory or for individual localities?
c) What methods are employed to keep the list current?

Please see Attachment 3.4.3 for waiting list information.

☐ No.

3.5 Sliding Fee Scale for Child Care Services

3.5.1 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 (co-payment) to the cost of child care (§98.42).

a) Attach the sliding fee scale as Attachment 3.5.1.

b) Describe how the sliding fee scale is administered, including how the family’s contribution is determined and how the co-payment is assessed and collected:

The administration of the sliding fee scale and how family contribution is determined is described in Attachment 3.5.1.

c) The attached sliding fee scale was or will be effective as of October 1, 2008

d) Does 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:

☒ No.

3.5.2 Is the sliding fee scale provided as Attachment 3.5.1 used in all parts of the State? (658E(c)(3)(B))

☒ Yes.

☐ No, and other scale(s) and their effective date(s) are provided as Attachment 3.5.2.
3.5.3 The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: $1,526.

The Lead Agency must select ONE of these options:

- ☐ ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.
- ☐ ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
- ☒ SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. Describe these families:
  
  1) High-risk targeted populations
     - Migrant and seasonal farm workers
     - Teen parents
     - Children with a parent(s) in an alcohol or drug treatment program
     - Children with special needs
  2) Families receiving TANF benefits
  3) JOBS program participants
  4) Families receiving child care as a part of Head Start services

3.5.4 Does the Lead Agency allow providers to charge parents the difference between the maximum reimbursement rate and their private pay rate?

- ☒ Yes.

EXCEPTION: Under Targeted High-Risk Populations only, providers are not allowed to charge parents the difference between maximum reimbursement rates and their private pay rate or a one-time registration fee. These parents are in the high-risk category because they cannot afford to pay this different and stay in the program. The only ‘fee’ parents pay is the co-payment if applicable.

- ☐ No.

3.5.5 Describe how the co-payments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))

The sliding fee scale is based on income an size of the family. Co-payments are waived for families enrolled in the TANF program who require child care subsidies in order to participate in employment or JOBS program activities.

Families eligible for the Employment Related Day Care program and earning less than 100 percent of Federal Poverty Level (for their family size) are responsible for a co-payment that is ten percent or less of their incomes. Those families earning more than
100 percent of Federal Poverty Level are responsible for a co-payment that is 7.5 percent of their income.

Teen parents in high school completion programs and parents in state-approved alcohol and drug treatment programs who are at or below poverty levels are exempt from the co-payment and thus are eligible for fully subsidized care.
PART 4
PARENTAL RIGHTS AND RESPONSIBILITIES

4.1 Application Process / Parental Choice

4.1.1 Describe the process for a family to apply for and receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §98.16(k), 98.30(a through (e)). At minimum, describe:

a) How parents are informed of the availability of child care services under CCDF (i.e., parental choice of child care services through a certificate or grant of contract)

The Department of Human Services contracts with the local Child Care Resource and Referral (CCR&R) agencies throughout the state to provide consumer information and education about Oregon’s child care subsidy program. The CCR&Rs also help child care providers with equipment costs to come into compliance with health and safety requirements.

Targeted Populations Services: Parents involved in a high risk population program are informed of the availability of child care through designated programs and assisted by program staff in determining the type of care most appropriate for their family situation.

b) How parents can apply for CCDF services

Families who may be eligible for a child care subsidy are referred to the Department of Human Services field offices. Applications may be requested by phone and are also accepted by mail. When a complete application is received, eligibility is usually determined within five to ten days. Eligibility must be determined within 45 days from the date of request for assistance.

Targeted Populations Services: The application for child care is available to parents participating in targeted populations described in Section 3.1.2 and applications are processed on-site by an intake worker.

c) What documentation parents provide as part of their application to determine eligibility?

For new employment, acceptable verification includes first paycheck from a new job (if hours are representative of future) or, when no pay has yet been received an employer statement including anticipated hours, pay dates and rate of pay. If verified by phone, a narration of the conversation is completed, including anticipated hours, pay dates, rate of pay, the name of person who verified the information, employer name and phone number. Additional verification may be needed and requested if income is variable, questionable, or if income changes between the date of request and interview.
• Citizen/Alien status of a child needing care (See Worker Guide NC #1 - Noncitizen Chart (http://dhsmanuals.hr.state.or.us/EligManual/15ncwg1.htm)).
• Second parent unable to provide adequate child care. If questionable, anything that affects eligibility or benefit level.
• Verify or document why a child 12 or older needs care, or why a child with a disability needs special care.

Note: Staff may not ask applicants or recipients to verify their citizenship solely on the basis of the client's ethnicity or ability to communicate in English. If an applicant identifies a child needing care as a non-citizen on the application, non-citizen status must be verified.

A family’s eligibility, once approved, begins with the month in which assistance was requested. Parents receive assistance in selecting a child care provider if they do not already have one. A provider listing form is given to the parent(s) to be completed by the provider of choice. If the provider meets initial health and safety requirements, he/she is listed on the Department of Human services provider payment system and a criminal and child abuse records check is completed. The payment system issues the initial and all subsequent billing forms directly to the provider.

Targeted Populations Services: Payment for subsidies through the Inclusive Child Care Program can only begin after all signatures are on the Client Services Certificate. This can be well after the month assistance was requested.

d) How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4

Parents who receive TANF benefits are informed about the exception as described in Section 4.4. They are informed at the intake interview and by signing the Rights and Responsibilities while in JOBS and JOBS Plus programs (Department of Human Services form 7819).

Rule 461-130-0327 (1) states:
A client is excused for good cause from a failure to comply with a requirement of an employment program, including an activity in a case plan (both terms defined in OAR 461-001-0025) in the following circumstances:
   a. Participation in a required activity in a case plan would have an adverse effect on or risk to the client’s physical or mental health or would expose the client to increased risk of domestic violence.
   b. Except in the Food Stamp program, participation is likely to cause undue hardship for the child.
   c. In the JOBS, Pre-TANF, and SFPSS programs, when the failure to comply is caused by the failure of the Department to timely provide or authorize a support service payment.
d. Appropriate child care, or day care for an individual in the household who has a disability that substantially reduces or eliminates the individuals ability to care for himself or herself, cannot be obtained.

A. Both the provider and the place where care is provided meet health, safety, and provider requirements as required in OAR 461-165-0180.

B. The care accommodates the parent’s work schedule, and

C. The care meets the specific needs of the child, such as age and special needs requirements.

e. The work attachment position or employment offered is vacant due to strike, lockout, or other labor dispute.

f. The work attachment position or employment requires the client to join a union, and the client has religious objections to unions.

g. The client belongs to a union and the employment violates the conditions of the client’s membership in the union.

h. The wage for the client’s current or potential job is:

A. less than applicable minimum wage, or

B. if minimum wage laws to not apply, the wage (rate for piece work) is less than that normally paid for similar work.

i. The client’s prospective employer engages in employment practices that are illegally discriminatory on the basis of age, sex, race, religious or political belief, marital status, disability, or ethnic origin.

j. The client’s participation in a required activity in a case plan would prevent or interfere with the client’s participation in an activity of the Grant Ronde Tribe’s NEW program.

k. The client’s failure to participate is due to a circumstance beyond his or her reasonable control.

l. When the failure to comply is caused by an aspect of the client’s disability.

m. The following are also ‘good cause’ criteria in the Food Stamp program:

A. The client has no means of transportation and would have to walk an unreasonable distance to meet the participation requirement. An ‘unreasonable distance’ is a distance that requires a commute of more than two hours each day. The client must make a good-faith effort to secure the needed transportation.

B. Lack of adequate child care for children who have reached age 6 but are under age 12.

e) What steps the Lead Agency has taken to reduce barriers to initial and continuing eligibility for child care subsidies?

f) Attach a copy of your parent application for the child care subsidy program as Attachment 4.1.1.
4.1.2 Is the application process different for families receiving TANF?

☑ Yes, and describe how the process is different:

For TANF families, the client is required to have a face-to-face interview with an intake worker. For Employment Related Day Care, the interview can be done over the phone if a face-to-face interview is not practical.

☐ No.

4.1.3 What is the length of eligibility period upon initial authorization of CCDF services?

The length of client eligibility varies depending on the benefit program and stability of family income. Redetermination of client eligibility is required periodically, generally every three to six months. The client must provide verification of earned income from the past two months, changes in unearned income, and other questionable information if needed to determine eligibility. If the child is enrolled in a contracted Head Start collaboration program, eligibility may extend to the end of the Head Start program year.

Targeted Populations Services: The length of eligibility varies depending on the targeted population program and stability of family income. Re-determination of eligibility is required every 12 months or as determined due to changes to the eligible family unit.

a) Is the initial authorization for eligibility the same for all CCDF eligible families?

☑ Yes.

☐ No and describe any variations that relate to the services provided (e.g., through collaborations with Head Start or pre-kindergarten programs or differences for TANF families):

4.1.4 Describe how the Lead Agency ensures that parents are informed about their ability to choose from among family child care and group home child care, center-based care and in-home care, including faith-based providers in each of these categories.

The Department of Human Services contracts with the local Child Care Resource and Referral (CCR&R) agencies throughout the state to provide consumer information and education about Oregon’s child care subsidy programs and provides listings of providers available in the community. Information about subsidized child care for targeted and high-risk populations is also provided through the CCR&R agencies, the Lead Agency,
4.1.5 Describe how the Lead Agency reaches out and provides services to eligible families with limited English proficiency, including how the Lead Agency overcomes language barriers with families and providers.

The Department of Human Services has bilingual staff, interpreters, and access to the Language Line services. Program applications and information is printed in several essential languages and alternate formats for people with disabilities. Child care resource and referral agencies also have bilingual staff in most service delivery areas. Many provider training opportunities also have curriculum in essential languages and interpreters available upon request. The Oregon Child Care Training Calendar also offers alternate versions of the website in Spanish, Russian, Vietnamese, and Chinese (Mandarin) at: www.oregonchildcaretraining.org

Migrant and seasonal farm worker (MSFW) program requirements are to present written and verbal communication about program services in a language understood by applicants and child care providers. MSFW forms are available in both English and Spanish in Oregon.

4.2 Records of Parental Complaints

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))

The Lead Agency investigates all serious complaints received against child care providers. Subject to confidentiality laws, complaint dispositions are open public records. The Lead Agency maintains a file of program and provider complaint information that is available to the public upon request. In January 2008, the Lead Agency put facility complaints history online for public access at: http://www.employment.oregon.gov/EMPLOY/CCD/complaints.shtml

4.3 Unlimited Access to Children in Child Care Settings

Provide a detailed description of the Lead Agency 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))

Parental access provisions are included in all Lead Agency provider agreements and Department of Human Services provider listing agreements. Licensure laws for child care providers ensure that parents have unlimited access to their children.

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

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

NOTE: The TANF agency, not the Child Care Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record. The TANF agency that established these criteria or definitions is: Oregon Department of Human Service

- "appropriate child care": (a) both the provider and the place where care is provided meet the Department of Human Services health, safety and provider requirements defined in administrative rules; (b) the care accommodates the parent’s work schedule; and (c) the care meets the specific needs of the child, such as age and special needs requirements.

- "reasonable distance": the parent’s total travel time from home to the child care provider and the workplace or JOBS activity will be no more than one hour either way unless a longer commute time is customary in the community.

- "unsuitability of informal child care": the Department of Human services uses the same standards for informal care as for regulated care. Care that does not meet the criteria in ‘appropriate child care’ would be considered unsuitable.

- "affordable child care arrangements": are those where the expense to the parent(s) is less than ten percent of family income.
PART 5
ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND AVAILABILITY OF CHILD CARE

5.1 Quality Targeted Funds and Set-Asides

Federal appropriations law has targeted portions of the CCDF for quality improvement and for services for infants and toddlers, child care resource and referral (CCR&R) and school-age child care. For each targeted fund, provide the following information.

5.1.1 Infants and Toddlers:

Note: For the infant and toddler targeted funds, the Lead Agency must provide the maximum age of a child who may be served with such targeted funds (not to exceed 36 months).

The Child Care Division and other child care partners follow the Department of Human Services, Oregon Administrative Rule (OAR) 000-155-0150, where the following definitions apply for child care rates:

- Infant: a child aged birth through 12 months
- Toddler: a child aged one year to 3 years
- Preschool child: a child aged 3 years through 5 years
- School age child: a child age 6 years or older

a) Describe the activities provided with these targeted funds
b) Identify the entities providing the activities
c) Describe the expected results of the activities.

Oregon Center for Career Development in Childhood Care (OCCD) and Education/Portland State University: houses Oregon’s childhood care and education professional development system, The Oregon Registry, provides supportive and refresher training services to trainers of the First Connections/Infant and Toddler curriculum. OCCD also developed and provides trainer supports for the Early Brain curriculum that stresses the importance of early brain and social/emotional development. Both of these curriculums are offered through the child care resource and referral agencies, independent trainers, and Oregon Registry sponsoring organizations.

American Recovery and Reinvestment Act funds provided to OCCD will be used to develop two additional infant/toddler curriculums, which will support the new Infant/Toddler Credential. Field testing for the credential will be completed in the fall of 2009 with statewide roll-out in early 2010.
Expected results: increased access to quality infant/toddler training; increased quality child care for infants and toddlers.

PATT: 2.5, 2.6, 3.5

Portland State University/EQUIP Initiative: offers an Infant and Toddler Mental Health Certificate, which is a one-year course that provides 25 graduate credits over six quarters of both on-line and face-to-face instruction. Support for child care provider/early childhood education staff is provided as part of the EQUIP initiative. Initial scholarships will be awarded with American Recovery and Reinvestment Act funds; approximately 20 scholarships will be awarded over two (2) years.

Expected results: increased access to quality infant/toddler health/mental health training; increased quality child care for infants and toddlers; increased connections between providers and parents regarding care of their infants and/or toddlers.

PATT: 2.5, 2.5, 2.6, 3.5, 4.2, 4.3, 4.4

Child Care Division/EQUIP Initiative: as part of the EQUIP initiative and Employment Related Day Care program, facilities that achieve model facility status will be eligible for infant/toddler subsidy slots, which provides stable income for these facilities and high quality care for subsidy families. Initial slot subsidy payments will be made from American Recovery and Reinvestment Act funds.

Expected results: increased access to quality infant/toddler care statewide; increase in number of facilities that are moving toward national accreditation; stabilize and increase continuity of care of infant/toddlers for low-income working families; increased stability of compensation for high quality care facilities.

PATT: 3.1, 3.2, 3.3, 6.1, 6.4

5.1.2 Resource and Referral Services:

a) Describe the activities provided with these targeted funds
b) Identify the entities providing the activities
c) Describe the expected results of the activities.

The Oregon Child Care Resource and Referral Network (OCCRRN), a 501(c)(3) non-profit, contracts with the Lead Agency to provide technical assistance, training, and coordination services for the development and improvement of Oregon’s local child care resource and referral organizations (CCR&R).

Child Care and Development Funds are contracted to OCCRRN for the delivery of core resource and referral services to parents, providers, communities, and employers. Parents receive consumer education designed to help them select, obtain and manage quality
child care arrangements. The local CCR&R agencies help improve the availability and quality of child care through recruitment, training, technical assistance, and professional development support of child care providers. The OCCRRN is responsible for the collection of data from the CCR&Rs on supply, demand, and quality of care, then reports this data to child care partners and state agencies for research, funding, and policymaking decisions.

The OCCRRN is a key partner for the Child Care Quality Indicators, Oregon’s quality rating system, and provides structural indicators of quality data to Oregon State University, Office of Family Policy. This data is compiled and reports are produced and provided to individual child care facilities (both family and center-based) to use for parent education, marketing, rate setting, or grant proposals.

Expected results: 1) increased access to child care provider information for parents, which results in better-informed decision-making on the types and quality of care available; 2) improvement in the quality of care through increased training and technical assistance to child care providers; 3) increase the quantity and quality of child care data for program development and policymaking decisions.

**PATT: 2.1 TO 2.3, 2.5, 2.7, 4.1, 4.3, 4.4, 5.4, 5.5, 6.1, 7.2, 7.3, 7.8**

**5.1.3 School-Age Child Care:**

a) Describe the activities provided with these targeted funds
b) Identify the entities providing the activities
c) Describe the expected results of the activities.

The child care system has made a significant investment in school age professional development, program standards, and youth worker core competencies through the establishment of a statewide after school network – OregonASK (After School for Kids). Oregon is the recipient of a Charles Steward Mott Foundation grant, for a second grant period of three years, to continue to bring together after school partners and resources. Funding for this private sector grant is support by CCDF matching funds. OregonASK is comprised of over 25 public and private partners who represent education, youth development, child care, and education programs. For the 2009-11 Mott grant period, OregonASK, in collaboration with Oregon School Boards Association, is conducting Links to Learning, a series of after school advocacy and outreach community events to connect after school and extended learning opportunities with K-12 student achievement.

The Center for Career Development (OCCD) at Portland State University is a member of OregonASK and provides the foundation for school age professional development recognition, standards development, and national accreditation. Linkages between The Oregon Registry and training provided by school age practitioners have been significantly expanded over the past three years. OCCD is developing a School Age Credential and training curriculum to support achievement. Statewide program standards and youth worker competencies were reviewed by OCCD staff and are now out
for statewide input from school age practitioners. The standards and competencies are expected to be adopted by OregonASK and OCCD in 2010.

**Expected results:** 1) increased access to information on core competencies, standards, program development, funding/stabilization strategies by providers of family and center-based school age and mixed age child care; 2) increased coordination and cooperation between local after school and out-of-school time programs with the child care community; 3) increased connections between the child care community and school-based or school-linked after school and community school programs, and 4) increased awareness of and education on school age funding policies for policy and decision-makers in state agencies.

**PATT:** 2.3, 3.4

5.1.4 The law requires that not less than 4% of the CCDF be set aside for quality activities. (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51) The Lead Agency estimates that the following amount and percentage will be used for the quality activities (not including targeted funds) during the 1-year period: October 1, 2009 through September 30, 2010:

$18,800,000 (16.5 %)

5.1.5 Check each activity in Table 5.1.5 that the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the targeted funds for quality activities). (658D(b)(1)(D), 658E(c)(3)(B), §§98.13(a), 98.16(h)). CHECK ALL THAT APPLY.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Check if undertaking/will undertake</th>
<th>Name and type of entity providing activity</th>
<th>Check if non-governmental entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive consumer education</td>
<td>☒</td>
<td>Department of Human Services</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Oregon Child Care Division</td>
<td>☐</td>
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<td></td>
<td></td>
<td>Oregon Child Care Resource &amp; Referral Network</td>
<td>☒</td>
</tr>
<tr>
<td>Grants or loans to providers to assist in meeting State and local standards</td>
<td>☒</td>
<td>Oregon Child Care Division – (as funding allows)</td>
<td>☐</td>
</tr>
<tr>
<td>Monitoring compliance with licensing and regulatory requirements</td>
<td>☒</td>
<td>Oregon Child Care Division - Govt</td>
<td>☐</td>
</tr>
<tr>
<td>Professional development, including training, education, and technical assistance</td>
<td>☒</td>
<td>Portland State University</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Oregon Child Care Division</td>
<td>☐</td>
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<tr>
<td></td>
<td></td>
<td>Oregon Child Care Resource &amp; Referral Network</td>
<td>☒</td>
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<tr>
<td></td>
<td></td>
<td>Oregon Association for the Education of Young Children</td>
<td>☒</td>
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<tr>
<td>Activity</td>
<td>Check if undertaking/will undertake</td>
<td>Name and type of entity providing activity</td>
<td>Check if non-governmental entity</td>
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<td>-------------------------------------------------------------------------</td>
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<tr>
<td>Improving salaries and other compensation for child care providers</td>
<td>X</td>
<td>Portland State University</td>
<td></td>
</tr>
<tr>
<td>Activities to support a Quality Rating System</td>
<td>X</td>
<td>Oregon State University</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Oregon Child Care Division</td>
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<td></td>
<td></td>
<td>Oregon Child Care Resource &amp; Referral Network</td>
<td></td>
</tr>
<tr>
<td>Activities in support of early language, literacy, pre-reading, and early math concepts development</td>
<td>X</td>
<td>Oregon Center for Career Development</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Oregon Child Care Resource &amp; Referral Network</td>
<td></td>
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<tr>
<td>Activities to promote inclusive child care</td>
<td>X</td>
<td>Oregon Council on Developmental Disabilities</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Western Oregon University</td>
<td></td>
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<tr>
<td>Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children</td>
<td>X</td>
<td>Department of Human Services/Office of Family Health</td>
<td></td>
</tr>
<tr>
<td>Other quality activities that increase parental choice, and improve the quality and availability of child care. (§98.51(a)(1) and (2))</td>
<td>X</td>
<td>Various agencies and organizations, of which some are non-governmental</td>
<td></td>
</tr>
</tbody>
</table>

5.1.6 For each activity checked in Table 5.1.5, a) describe the expected results of the activity. b) If you have conducted an evaluation of this activity, describe the results. If you have not conducted an evaluation, describe how you will evaluate the activities.

**Comprehensive Consumer Education**

In FFY 2008 more than 47,200 families received consumer education services in Oregon. Direct services were provided through a statewide system of child care resource and referral sites and through subsidy agency field offices. In addition, other agencies, including the Oregon Commission on Children and Families, Oregon Department of Education, Oregon Health Division, and Oregon State Library, were instrumental in the development and distribution of consumer education materials statewide through their local constituent agencies and other networks (e.g., Healthy Start programs and pediatricians). These materials included parent resources on the importance of quality care and how to find it as well as how to promote healthy early brain development.

During this plan period, the CCR&R system will continue to deliver comprehensive consumer education services. Families receiving services will be offered information about categories of care, rates for care, what to look for in selecting quality care, names and locations of providers, histories of inspections and licensing, and educational consultations and referrals. Other agencies (e.g., those listed above) will continue to develop and disseminate informational materials. In addition, a new public information campaign has been developed focusing on informing employers about the importance of...
child care to the workforce and how Oregon’s employer tax credits can help offset expenses.

**Expected results:** A majority of Oregon parents with child care needs have enough information to make informed choices about the quality, location, and cost of child care.

**Evaluation:** An evaluation of consumer education activities is not planned.

**PATT:** 2.1, 2.2, 2.3

**Grants or loans to providers to assist in meeting State and local standards**

The Department of Education receives CCDF to assist school districts in starting and operating on-campus child development centers for preschool children and for centers serving the children of teen parents. On-campus centers will help increase the availability of child care supply in communities and serve as training sites for modeling appropriate child care. Campus-based child development centers must demonstrate the need for child care though consultation with the local CCR&R and are designed to accommodate the needs of low income working parents and student parents. Use of CCDF monies to purchase child care slots is not allowed.

**Expected results:** increase in the number of on-campus child care for preschool children and centers serving teen parents; increase the availability of child care for this target population; improved quality of child care environments that model appropriate child care.

**Evaluation:** An evaluation of the teen-parent subsidy program is not planned.

**PATT:** 3.2

**Monitoring compliance with licensing and regulatory requirements**

The Child Care Division uses CCDF funds to improve compliance with state licensing and registration laws. Responsibilities include: certification and registration activities, on-site review of all providers, investigation of all serious complaints, technical assistance to providers in meeting standards, improvement of infant/toddler care, and work on collaborative projects to build awareness and commitment to quality child care.

**Expected results:** increase the number of child care providers that move toward quality child care; increase the number of providers that are certified (increased health and safety inspections and monitoring); lead development of projects or programs that improve quality, affordability, and accessibility of child care.

**Evaluation:** The Child Care Division completed an extensive survey of Registered Family Child Care Providers in 2008 with a published report in March 2009 (See Attachment 5.1.6). A survey of Certified Family and Center-based Care will be conducted in 2009 with a published report available in early 2010. Surveys are done every three years for division performance and customer service evaluation.
**PATT: 1.1 to 1.6**

Professional development, including training, education, and technical assistance

a) The Center for Career Development in Childhood Care and Education/Portland State University (OCCD), receives quality funding for administration of the statewide career development system, The Oregon Registry and Oregon Registry: Trainer Program. OCCD conducts training-of-trainer sessions and provides materials to trainers on state-sponsored training, Child Care Health & Safety, Social/Emotional Development, and Recognizing & Reporting Child Abuse and Neglect.

b) The Oregon Child Care Resource and Referral Network receives funding to conduct child care provider training through a statewide network of service delivery areas.

**Expected results:** increase the amount of quality training and education to providers, which will promote career development in childhood care and education; increase the attitude of professionalism in the child care field through quality, higher level training and education.

**Evaluation:** evaluations of all training and training-of-trainer sessions are conducted by the local resource and referral entities and OCCD. A compilation of evaluations are provided to the Child Care Division as part of the required contract reporting process.

**PATT: 2.1 TO 2.3, 2.5, 2.7, 4.1, 4.3, 4.4, 5.4, 5.5, 6.1, 7.2, 7.3, 7.8**

**Improving salaries and other compensation for child care providers**

Oregon is committed to building a quality child care system, which balances appropriate compensation for providers and affordability for working parents. Market rates are adjusted as funds are available to reflect the most recent price study data; this maintains stability of the system and accessibility to care. Current reimbursement rates to providers are identified in Attachment 3.2.1. The subsidy agency has developed a tiered reimbursement system to compensate informal providers for obtaining the same training required of registered providers.

**Expected results:** increase the quality of care by providing monetary incentives to providers that participate in additional training hours equal to registered providers.

**Evaluation:** At this time, no evaluation has been done for the tiered reimbursement system. The Department of Human Services did receive additional training funds for exempt providers in their 2009-11 budget. Evaluation of expected results is a component of this program option package.

**PATT: 2.6, 3.1 to 3.4, 6.1, 6.2, 6.4**

**Activities to support a Quality Rating System**
Structure Indicators of Quality or Quality Indicators (QI) – With three years of experience and a statewide roll-out to family and center-based facilities underway, the QI project will be one of the key components for EQUIP. As Oregon’s answer to much more expensive to administer Quality Rating Systems, this public/private partnership project has developed an information system about the quality of local child care based on objective criteria. The project collects data from facilities, through the existing regulatory infrastructure, to establish levels of quality based on seven research-based structural indicators:

- Ratio of children per adult
- Group size
- Education levels of teachers/caregivers
- Specialized training levels of teachers/caregivers
- Teacher/caregiver compensation level
- Staff turnover or stability in caregiver/child relationships
- Accreditation

Expected results: Parents will have more information to select child care. They will be able to use quality indicator reports to compare different characteristics that are important to them and their child’s development. Child care providers will be able to compare themselves to others on these quality indicators. They will identify areas in which they are outstanding and others in which they want to improve. As such, the indicators are a strategic planning, marketing and fundraising tool. Community members and funders will have increased levels of accountability. Areas in need of investment will be clearer, and impacts of investments can be measured. The community will invest in child care centers with increased confidence that outcomes will improve.

Evaluation: This project is still in the implementation stages and went statewide to center-based care facilities in January 2009. Implementation for family-based child care will not occur until January 2010. Evaluation of the project will consist of continuous improvement meetings conducted between the Oregon Child Care Research Program and Child Care Division licensing specialists until a comprehensive third-party evaluation is conducted.

**PATT: 2.1, 2.3**

Activities in support of early language, literacy, pre-reading, and early math concepts development

Early language, literacy, pre-reading and numeracy components are included in the *First Connections/Infant and Toddler* and *Building Blocks: Social and Emotional training* (ages 0 to 6).

Expected results: increase the knowledge level of child care providers in early brain development and the importance of literacy, pre-reading and numeracy in early childhood education; increase the quality of child care by increasing the knowledge level of child care providers in these areas.
Evaluation: Individual training sessions include evaluation of the training and the trainer and are provided in quarterly reports for both the Center and the OCCRRN.

PATT: 2.3 to 2.7, 3.4, 3.5, 4.3, 4.4, 5.4, 7.2 to 7.6

Activities to Promote Inclusive Child Care
The Inclusive Child Care Program is a partnership between state agencies and advocates for children with special needs. Activities are aimed at giving child care providers the information, training, and supports they need to care for children with special needs, and developing subsidies for families based on the needs of the child. The Inclusive Child Care Committee is a workgroup charged with monitoring issues related to child care for children and youth with special needs. The committee advises the Inclusive Child Care Program and reports to the Child Care and Education Coordinating Council.

Partnership for Inclusive Child Care and Education (PICCE) is a training program to increase the number of regulated child care providers caring for children who have special needs. In 2005, eight individuals from five Oregon communities were trained to provide the Teaching Research Assistance to Childcare providers (TRAC) inclusion curriculum, which was developed at Western Oregon University. The curriculum is designed to increase provider skills and abilities in special needs care. An additional eight trainers were sponsored in the second and third cohort groups in 2006 and 2008. Additional cohort groups are planned for 2009 to 2011 with the goal of providing trainers statewide within four years.

Participants in local training events receive follow-up supports from trainers or other community resources that support inclusive child care. Examples of supports include consultation, mentoring, or technical assistance.

Expected results: increase the supply of child care providers that have the skills, abilities, and confidence to care for children with special needs; increase the number of special needs trainers in rural and small communities where this type of training is not easily accessible.

Evaluation: Funds for a comprehensive evaluation of this program were not available in 2008-09. Additional funding from the Oregon Department of Education will be used in 2009-10 to complete a comprehensive evaluation of the program which complete its first full program year after a four-year pilot period.

PATT:

Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children

Child Care Health Consultation Program is a partnership between Oregon’s child care partners and the Oregon Pediatric Society aimed at developing a state-wide system of health and mental health consultation to providers. Expansion of this program statewide
is contingent upon additional funding, but core funding has been secured to ensure supports for the original pilot counties in 2009 and 2010. More comprehensive data collection for evaluation is also a primary goal for the next two years.

**Expected results:** develop a cadre of health/mental health consultants statewide that focus on and work directly with child care providers; increase the access of providers to these types of services.

**Evaluation:** Complete evaluation of this program has been conducted each year for the first three years of the pilot project. Now that this is a fully-funded program, annual evaluation is built into the program and budget.

**PATT:** 4.3 to 4.5

Other quality activities that increase parental choice, and improve the quality and availability of child care

**Education and Quality Investment Partnership (EQUIP)**

Oregon’s newest, and most innovative, public/private strategy was launched in the Fall of 2008 to improve the quality of care, promote provider professional development, and increase child care supply. The partnership advisory group, called Strategic Investments, includes the Oregon Community Foundation, Children’s Institute, Child Care Research Partnership, Child Care Division, Department of Human Services, Head Start Collaboration/Department of Education, Commission for Child Care, and the Oregon Child Care Resource and Referral Network.

Funding for EQUIP will be a combination of private investment from the Oregon Community Foundation, CCDF, Child Care Contribution Tax Credits, and American Recovery and Reinvestment Act. EQUIP has a two-pronged approach:

- Provide education awards to child care staff, in licensed facilities, that are working directly with children or supervise staff in that capacity. Awards will be based on the staffperson’s Step on the The Oregon Registry.
- Develop a child care facilities model that incorporates the Structural Indicators of Quality and national standards which move a facility toward accreditation, and professional development standards incorporated in The Oregon Registry. The pilot model will be field tested in September 2009 with statewide roll-out in January 2010. Facilities that achieve the standards incorporated in the model will be designated as ‘partner ready’ for:
  1. Head Start placements,
  2. Early Intervention/Early Childhood Special Education placements,
  3. infant/toddler subsidy slots
  4. school age care, or
  5. other hard-to-find care subsidy slots

Recommendations will be reviewed and approved by the advisory group, Strategic Investments, and approved by the CCECC and Commission for Child Care. Ultimate goal is national accreditation for more facilities and
programs.

Expected results: Increased training and education of the child care workforce; increased enrollment on The Oregon Registry backed with monetary incentives; increased supply of infant/toddler and other hard-to-find care slots; increased quality of care, as determined by a state standard, which also moves more facilities toward national accreditation; increased stability of care through an increase in retention and compensation of staff; move more facilities toward national accreditation.

Evaluation: The Child Care Division has contracted with a private consultant to evaluate both the process and outcome objectives through November 2011.

PATT: 2.1, 2.3, 2.4, 2.6, 4.1, 5.4, 5.6

Child Care Structural Indicators of Quality (QI)
With three years of experience and a statewide roll-out to family and center-based facilities underway, the QI project will be one of the key components for EQUIP. As Oregon’s answer to much more expensive to administer Quality Rating Systems, this public/private partnership project has developed an information system about the quality of local child care based on objective criteria. The project collects data from facilities, through the existing regulatory infrastructure, to establish levels of quality based on seven research-based structural indicators:

- Ratio of children per adult
- Group size
- Education levels of teachers/caregivers
- Specialized training levels of teachers/caregivers
- Teacher/caregiver compensation level
- Staff turnover or stability in caregiver/child relationships
- Accreditation

Expected results: Increased consumer education and information on the selection of child care. Parents are able to use QI reports to compare different characteristics important to them in their child’s care and development. Child care providers are able to compare their facilities to others in their community or statewide, which enables them to identify areas in which they are outstanding or need to improve. QI reports can be used for planning, marketing, and as a fundraising tool. Community members, funders, and policymakers will have information on areas in need of investments, measure impacts of investments made, and get a higher level of accountability. The community will invest in child care facilities with increased confidence that outcomes will improve.

Evaluation: The pilot phases of this project have been evaluated. The follow-up evaluation for the first year of statewide evaluation has been contracted to a private consultant as part of the overall EQUIP evaluation.

PATT: 2.1, 2.3
Oregon’s Registry Campaign
Starting in 2009 and continuing through 2010 and 2011, child care system partners are launching a statewide campaign to increase the number of providers enrolled on The Oregon Registry, the state’s professional development system for child care, early education, and school age providers. Using CCDF and federal American Recovery and Reinvestment Act funds, cash incentives to providers and teachers to enroll and move up the Steps of The Oregon Registry will be provided through education awards.

Expected Results: Increased enrollment on The Oregon Registry; increased number of providers moving up the Steps; increase access to funding for continued education and training; increased quality of facilities and care through advancement of training and education offerings.

Evaluation: Evaluation of this campaign will be part of the quarterly reports already in place that are submitted to the Oregon Child Care Division. Final evaluation will be part of the overall evaluation of EQUIP that has been contracted to a private consultant.

5.2 Early Learning Guidelines and Professional Development Plans

5.2.1 Status of Voluntary Early Learning Guidelines. Indicate which of the following best describes the current status of the State's efforts to develop, implement, or revise research-based early learning guidelines (content standards) for three-to-five year-olds. NOTE: Check only one box that best describes the status of your State/Territory’s three-to-five-year-old guidelines.

☐ Planning. The State is planning for the development of early learning guidelines. Expected date of plan completion: ______ If possible, respond to questions 5.2.2 through 5.2.4.

☐ Developing. The State is in the process of developing early learning guidelines. Expected date of completion: ______ If possible, respond to questions 5.2.2 through 5.2.4.

☒ Developed. The State has approved the early learning guidelines, but has not yet developed or initiated an implementation plan. The early learning guidelines are included as Attachment 5.2.1, if available.

☐ Implementing. In addition to having developed early learning guidelines, the State has embarked on implementation efforts which may include dissemination, training or embedding guidelines in the professional development system. The guidelines are included as Attachment 5.2.1.

☐ Revising. The State has previously developed early learning guidelines and is now revising those guidelines. The guidelines are included as Attachment 5.2.1.

☐ Other. Describe:
a) Describe the progress made by the State/Territory in developing, implementing, or revising early learning guidelines for early learning since the date of submission of the 2008-2009 State Plan. Efforts to develop early learning guidelines for children birth to three or older than five may be described here.

Birth to Five voluntary early learning guidelines have been developed and posted at the Oregon Department of Education website. Oregon is still in the beginning stages of implementation and is using the Born to Learn training manual developed in 2007.

Work in Oregon is guided by the Early Childhood Foundations Advisory Group, which is facilitated by the Head Start Collaboration Director. Membership includes the following:

- Child Care Division, Administrator
- OCCRRN, Executive Director
- Commission for Children and Families
- DHS Office of Family Health/Office of Mental Health and Addiction Services
- OAEYC, Executive Director
- Center for Career Development/PSU
- DHS Child Care Team Administrator
- ODE EI/ECSE and PreK Specialists
- Commission for Children and Families
- DHS Office of Family Health/Office of Mental Health and Addiction Services

No revisions have been made to the guidelines. No guidelines for children older than five have been developed. The ECFs will be used in the development of model facility criteria as part of the EQUIP initiative. Full implementation of the ECFs will not occur until curriculum has been developed to support the foundations and early learning guidelines.

b) If developed, are the guidelines aligned with K-12 content standards or other standards (e.g., Head Start Child Outcomes, State Performance Standards)?

☑ Yes. If yes, identify standards:

☐ No.

The Oregon Birth to Five Early Childhood Foundations (ECF) are aligned with the Head Start Child Outcomes and the K-12 content standards. The Center for Career Development at Portland State University (OCCD) took the lead in aligning the ECF with the Oregon Registry’s core knowledge categories and the Core Body of Knowledge and the DEC standards; a draft assessment tool was also developed but the use of this tool has been put on hold.

c) If developed, are the guidelines aligned with early childhood curricula?

☑ Yes. If yes, describe:

☐ No.
The ECFs are aligned with the Kindergarten Foundations, grade three public school content standards, and the Head Start Child Outcomes Framework. The Kindergarten Foundations address all but four of the domain areas: art, physical education and health, approaches to learning, social/emotional development. Grade three content areas address all but two domain areas: approaches to learning and social/emotional development. The Head Start Child Outcomes Framework addresses all domain areas.

d) Have guidelines been developed for children in the following age groups:

☐ Birth to three. Guidelines are included as Attachment 5.2.1
☒ Birth to five. Guidelines are included as Attachment 5.2.1
☐ Five years or older. Guidelines are included as Attachment 5.2.1

If any of your guidelines are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan):

www.ode.state.or.us
Offices
Office of Student Learning and Partnerships
   Early Learning Guidelines for All Early Childhood Programs
   Early Childhood Foundations
   Born to Learn (training manual)

5.2.2 Domains of Voluntary Early Learning Guidelines. Do the guidelines for three-to-five-year-olds address language, literacy, pre-reading, and early math concepts?

☒ Yes.
☐ No.

a) Do the guidelines for children three-to-five-year-olds address other domains such as social/emotional, cognitive, physical, health, or creative arts?

☒ Yes. If yes, describe.
☐ No.

The Oregon Early Childhood Foundations address eight domains or foundation areas: 1) Language and Literacy, 2) Mathematics, 3) the Arts, 4) Science, 5) Social Science, 6) Physical Education, 7) Social/Emotional, and 8) Approaches to Learning.

5.2.3 Implementation of Voluntary Early Learning Guidelines.
a) Indicate which strategies the State used, or expects to use, in implementing its early learning guidelines.

Check all that apply:
- Disseminating materials to practitioners and families
- Developing training curricula
- Partnering with other training entities to deliver training
- Aligning early learning guidelines with licensing, core competencies, and/or quality rating systems
- Other. Describe:

b) Indicate which stakeholders are, or are expected to, actively support(ing) the implementation of early learning guidelines:

Check all that apply:
- Publicly funded (or subsidized) child care
- Head Start
- Education/Public pre-k
- Early Intervention
- Child Care Resource and Referral
- Higher Education
- Parent Associations
- Other. Describe:

c) Indicate the programs that mandate or require the use of early learning guidelines

- Publicly funded (or subsidized) child care
- Head Start
- Education/Public pre-k
- Early Intervention
- Child Care Resource and Referral
- Higher Education
- Parent Associations
- Other. Describe:

Head Start is required to use the Head Start Child Outcomes. Use of the Birth to Three Early Childhood Foundations is not required or mandated for any early childhood program in Oregon.

d) Describe how cultural, linguistic and individual variations are (or will be) acknowledged in implementation.

The Oregon Cultural Competency Committee reviewed the Early Childhood Foundations and provided input into the language of the document. Their input was integrated into the final document. Training manuals were developed (completed in 2008); however, no specific implementation plans have been made. The Early Childhood Foundations
Advisory Committee will continue to work with the Cultural Competency Committee to ensure cultural, linguistic, and individual variations are acknowledged as implementation plans are developed.

e) Describe how the diversity of child care settings is (or will be) acknowledged in implementation.

The Oregon Department of Education is the lead for two training manuals for children ages birth to five. The manuals address center-based or classroom environments and home-based or family home environments. Both manuals provide Early Learning Foundations and teaching strategies for children ages birth to five. Training addresses center-based Head Start, child care, and preschool environments, and home-based child care environments including home environments for children in family, friend and neighbor care, Head Start home-based models, and Early Intervention/Early Childhood Special Education services.

Materials developed to support implementation of the guidelines are included as Attachment 5.2.3. If these are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan):

A training manual called Born to Learn has been completed and is on the Oregon Department of Education website included in Attachment 5.2.3.

5.2.4 Assessment of Voluntary Early Learning Guidelines. As applicable, describe the State's plan for:

The plan for a state assessment of the Voluntary Early Learning Guidelines as described in the 2008-09 CCDF State Plan has been cancelled. There are no future plans, at this time, for a state assessment due to severe budget constraints.

a) Validating the content of the early learning guidelines

b) Assessing the effectiveness and/or implementation of the guidelines

c) Assessing the progress of children using measures aligned with the guidelines

d) Aligning the guidelines with accountability initiatives
Written reports of these efforts are included as Attachment 5.2.4. If these are available on the web, provide the appropriate Web site address (reports must still be attached to Plan):

5.2.5 Plans for Professional Development. Indicate which of the following best describes the current status of the Lead Agency’s efforts to develop a professional development plan for early childhood providers that includes all the primary sectors: child care, Head Start, and public education. NOTE: Check ONLY ONE box that best describes the status of your State’s professional development plan.

☐ Planning. Are steps underway to develop a plan?
☐ Yes, and describe the entities involved in the planning process, the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.

☐ No.

☐ Developing. A plan is being drafted. The draft or planning documents are included as Attachment 5.2.5, if applicable.

☐ Developed. A plan has been written but has not yet been implemented. The plan is included as Attachment 5.2.5, if applicable.

☒ Implementing. A plan has been written and is now in the process of being implemented, or has been implemented. The plan is included as Attachment 5.2.5.

☒ Revising. The State previously developed a professional development plan and is now revising that plan, or has revised it since submitting the 08-09 State Plan. The revisions or the revised plan are included as Attachment 5.2.5.

☐ Other. Describe:

The State Plan for Professional Development is aligned with the Professional Development System Components as outline by the National Child Care Information Center (NCCIC) “Elements of a Professional Development System for Early Care and Education: A Simplified Framework.” The plan is also in alignment with Oregon’s services and program accountability tool, PATT, and is being utilized as a long-term planning guide for the development and implementation of the various system components.

a) Describe the progress made by the State in planning, developing, implementing, or revising the professional development plan since the date of submission of the 2008-2009 State Plan.

PATT: 2.5, 2.6, 4.4, 5.1, 5.4, 7.4.
Attachment 5.2.5 indicates completion, revision, and/or continuation of goals, activities, and events listed in the original state CCDF Plan for 2008-09. While most sections of the professional development plan are currently being implemented, there are sections that are undergoing significant revisions since that state CCDF Plan was written and approved in October 2007.

b) If developed, does the plan include (Check EITHER yes or no for each item):

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<thead>
<tr>
<th>Item</th>
<th>Yes</th>
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<tr>
<td>Specific goals or desired outcomes</td>
<td>☑</td>
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<tr>
<td>A link to Early Learning Guidelines</td>
<td>☑</td>
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<tr>
<td>Continuum of training and education to form a career path</td>
<td>☑</td>
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<tr>
<td>Articulation from one type of training to the next</td>
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<tr>
<td>Quality assurance through approval of trainers</td>
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<td>Quality assurance through approval of training content</td>
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<td>A system to track practitioners’ training</td>
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<td>Assessment or evaluation of training effectiveness</td>
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<tr>
<td>State Credentials – Please state for which roles (e.g. infant and toddler credential, directors’ credential, etc.)</td>
<td>☑</td>
<td>☐</td>
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<tr>
<td>Specialized strategies to reach family, friend and neighbor caregivers</td>
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c) For each Yes response, reference the page(s) in the plan and briefly describe.

Specific goals or desired outcomes: Oregon’s State Plan for Professional Development includes individual goals and specific activities to be completed in the 2010-11 CCDF Plan years. Goals and activities are detailed in accordance with the five main components of professional development systems as established by the NCCIC: core professional knowledge, qualifications and credentials, quality assurances, access and outreach, and funding.

Link the Early Learning Guidelines:
Section 1 – Core Professional Knowledge
The Center for Career Development/PSU has worked closely with the Oregon Department of Education to infuse the Early Childhood Foundations (Early Learning Guidelines) into the Core Body of Knowledge. The guidelines have been added to standards for Learning Environments & Curriculum core knowledge category. A powerpoint presentation has been created that provides an overview of the Early Childhood Foundations and outlines are in place for three distinct training sessions.

Continuum of training and education to form a career path
Section 1 – Core Professional Knowledge
Section 5 – Career and Professional Development
Oregon has diverse opportunities for providers to receive a variety of training and education offerings. Ten Core Knowledge Categories (CKC) have been defined in terms
of knowledge required and practice, desired standards of knowledge, key knowledge concepts, supporting explanations, and examples of topics for training (for each of the ten). These documents guide the development of training and education curriculums for family, center-based and school-age care.

A twelve step Oregon Registry Career Lattice has been created and is being used extensively by approximately 11,900 providers in Oregon. This lattice incorporates core knowledge categories and standards and focuses on training/education requirements for each step. Progress on the lattice can be accomplished using two distinct professional development pathways: degree/certificated and/or community-based training/credit courses, which use the CKCs and standards and focus on training/education requirements.

Significant effort has been made by child care partners to ensure training and education is available across the CKCs at basic and advanced levels (which are indicated by Set One, Two, or Three levels). Oregon has 17 standardized curricula that link to the CKCs and are offered on a statewide basis through the child care resource and referral system, independent trainers, and sponsoring organizations.

Articulation from one type of training to the next
Section 2 – Qualifications and Credentials
The Oregon Registry career lattice includes recognition of all appropriate professional credentials, degrees and community based training. It provides for movement upward from one Step to another and also movement, laterally from one type of training to another except for the highest Steps.

Two credentials have been developed and are currently in field testing: Infant/Toddler Professional Credential and the Director Credential. These credentials are both aligned with the Oregon Registry.

Articulation agreements exist between some high school early childhood programs and the Oregon Registry to articulate a student’s high school certificate into an Oregon Registry Step. Some high schools also articulate with their local community college in a program called 2+2 to award community college credit for high school classes.

Some community colleges have developed credit classes tied to a series of Oregon Registry Standardized training sessions. This introduces the early childhood workforce to the community college system.

Articulation agreements exist between most community colleges and 4-year institutions; however, we are seeking stronger agreements so that credits in Early Childhood Education can transfer in and meet requirements rather than electives. The Virtual Degree Project has encouraged Oregon community colleges to increase accessibility for working professionals.
At this time almost all community colleges have provisions to provide credit for either or both the CDA or the Oregon Registry Step 7. Many more colleges have on-line classes available and one college has their complete degree program available on-line. The colleges are now more fully collaborative in allowing students to transfer coursework from one college to another. This project has greatly increased accessibility of associate degrees to the child care workforce.

**Quality Assurance through approval of trainers**

Section 3 – Quality Assurances

An Oregon Registry Trainer Program is in place with trainer standards, review, approval, database, and registry system. Through a formalized process of certification, the child care system has trainers with knowledge of and adherence to the standards established in the Core Body of Knowledge.

The database and registry, which includes all approved and/or specialty trainers for the child care system, is maintained and available on-line. As of December 31, 2008, 398 standardized trainers, 45 community trainers, and 83 master trainers have been approved through the Oregon Registry Trainer Program.

**Quality Assurance through approval of training content**

Section 3 – Quality Assurances

The Oregon Registry Trainer Program includes training session standards, as well as a review and approval process. This program ensures that training sessions adhere to the standards established in the Core Body of Knowledge and follow guidelines of best practices in adult education. A database and registry of all approved and certified Oregon Registry Trainer standards-based training sessions is maintained and available on-line.

**System to track practitioners’ training**

Section 1 – Core Professional Knowledge

The Oregon Registry has been developed as a review and approval process to document the acquisition of the Core Body of Knowledge through the Steps of the Oregon Registry Career Lattice. Child care and education providers apply to a Step in the Oregon Registry that represents their documented training and education. Practitioners are encouraged to continue professional development activities and advance along the continuum of development.

In 2009 and 2010, the Oregon Registry will include a state level database which will provide documented, verified training and education of child care and education providers. Business rules, principles, and high-level outcomes to guide development for the database were started in 2007. All database development objectives, activities, and timelines have been established with a targeted field test date of February 2010 and statewide rollout in late Spring 2010.

**Assessment or evaluation of training effectiveness**

Section 3 – Quality Assurances
Every Oregon Registry Trainer Program standardized, community, master, and training-of-trainers sessions include an evaluation component. These evaluations are objectives-based and measure the acquisition of the knowledge standards identified in the Core Body of Knowledge. The new training and education database will provide a tracking mechanism which allows for better analysis of training evaluation information.

State Credentials
Section 2 – Qualifications and Credentials
An Infant/Toddler Professional Credential and a Director’s Credential have been developed; processes and all necessary forms are being field tested. These credentials will draw from training that has already been established in each of these focus areas. The Director’s Credential have been reviewed and approved by the National Association of Education to Young Children and can be used for accreditation documentation.

A School-Age Credential is in development and should be ready for field testing in early 2010. Coursework that can support the credential has been developed or brought to Oregon. Training curricula includes: Afterwords: Launching Lifelong Readers from Afterschool Programs, In the Mix: Including Schooagers with Younger Children in Your Family Child Care, and Opening Doors to Inclusive After School Programs.

A basic infrastructure has been developed by the Training and Quality Committee, Professional Development Standards subcommittee for placement in the Oregon Registry for any future credentials that are developed.

Specialized strategies to reach family, friend, and neighbor caregivers
A Family, Friends, and Neighbors subcommittee of the Training and Quality Committee was established in 2005 to conduct planning, outreach, and services to caregivers that are not licensed by the Lead Agency (exempt care).

Family, Friends, and Neighbor Toolkits were developed and will continue to be distributed to all exempt care providers. The toolkits contain materials on health, safety, child development, and literacy and are distributed statewide by the child care resource and referral agencies in collaboration with the federal Child and Adult Food Care Program and other partners.

Data is collected and analyzed regarding the usage of these toolkits by a third party evaluator. Initial findings find that the toolkits are being used and are helping to increase knowledge of providers and the quality of care. Other findings indicate that over 75 percent of exempt care providers use library services, which has resulted in a budding partnership with local libraries and literacy training.

Child care resource and referral agencies are contracted by the Department of Human Services to offer mandatory orientation sessions on the child care subsidy program. In 2007 and 2008, over 700 providers attended orientations with over 75 exempt providers moving to licensed car (NOTE: See Attachment 5.2.6 for details).
d) For each No response, indicate any plans the Lead Agency has to incorporate these components.

All components have been incorporated into the Oregon Registry professional development system and statewide plan.

e) Are the professional development opportunities described in the plan available:

Note: Check either yes or no for each item:

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<td>To Center-based Child Care Providers</td>
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<td>To Group Home Providers</td>
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<td>To In-Home Providers</td>
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<td>Other (describe):</td>
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The professional development system and statewide plan is designed to include broadly defined groups including, but not limited to, ten constituencies: family child care, center-based care, school age before and after school care, Head Start programs, K-3 programs (pre-school), early intervention/early childhood special education programs, teen parent programs, child care resource and referral staff, community colleges, and universities. Outreach and recruitment for the Oregon Registry has primarily been targeted to family child care, center-based care, school age programs, and Head Start.

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

Early language, literacy, pre-reading, and early math concepts development are included in the early learning standards (Early Childhood Foundations) document which is included in the core knowledge categories of the Oregon Registry.

Oregon also has standardized curricula that meet the Oregon Registry Trainer Program standards and primarily address early language and literacy development. These include: *Early Words, Early Words Series 2, Early Brain Development Research and Implications, Teaching Research Assistance to Child Care Providers, Infant/Toddler Environmental Rating Scale* and *Family Day Care Environmental Rating Scale*.

g) Are program or provider-level incentives offered to encourage provider training and education?
Yes. Describe, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts.

Scholarships are available for family child care and center-based care providers working toward professional goals through increased training and education, such as:
- Oregon Registry Steps
- Child Development Associate (CDA) credentialing
- Professional accreditation (NAFCC, NAA, NAEYC)
- For credit coursework
- Degree completion

Scholarships pay for tuition, assessments and accreditation fees, application fees, books and other approved costs. This support is made available through a partnership with the Oregon Community Foundation.

The tiered reimbursement system for subsidized child care (Enhanced Rate Program) is incorporated within the Oregon Registry Steps and provides a higher subsidy rate for documented training and education. Child care providers become eligible to receive higher payment rates by meeting specific training and education standards in the Oregon Registry.

No. Describe any plans to offer incentives to encourage provider training and education, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts?

h) As applicable, does the State assess the effectiveness of its professional development plan, including the achievement of any specified goals or desired outcomes?

Yes. Describe how the professional development plan’s effectiveness/goal is assessed.

The Child Care System Accountability Committee (committee of the CCECC) developed a logic model with state and program level outcomes, strategies and activities, gap identification, and priorities. This logic model includes items related to high quality child care and specifically addresses provider knowledge, practice, training and education levels.

The logic model was used to create a Performance and Accountability Tracking Tool (PATT), which includes performance measures and a process to track accountability for professional development and all other components of the child care system.

The Child Care Quality Indicators program (Oregon’s facility rating system) collects data from child care facilities to measure seven structural indicators of quality, including the level and specialized education of teachers and other caregivers. The main data source
for training and education levels will be from the Oregon Registry training and education database and providers’ Steps on the Oregon Registry.

☐ No. Describe any plans to include assessments of the professional development plan’s effectiveness/goal achievement.

i) Does the State assess the effectiveness of specific professional development initiatives or components?

☒ Yes. Describe how specific professional development initiatives or components’ effectiveness is assessed.

The Oregon Registry maintains awareness of and works to follow national registry standards established through The National Registry Alliance. The standards are followed to achieve a high quality, coordinated, documented, and accessible statewide career and professional development system. The overall outcome will be a trained, supported, and adequately compensated child care workforce. The Center for Career Development will continue to work with The National Registry Alliance to pilot the Registry Assessment Tool in 2009 and 2010.

Periodic evaluations of the Oregon Registry and the Oregon Registry Trainer Program are conducted. A variety of methods are used to gather information including surveys, focus groups, and ongoing collection of comments during technical assistance calls. The data is compiled and reported to the Training and Quality Committee (TQC), Professional Development Standards subcommittee, which assists with the analysis of data and provides input on how to use the data for program improvements. The Oregon Registry Trainer Program completed an evaluation in 2008 and staff are currently analyzing the information and working with the Professional Development Standards subcommittee on recommendations for improvements.

Various subcommittees and workgroups of the Training and Quality Committee develop activities, monitor progress, and report out on established TQC annual workplan goals. The subcommittees and workgroups are as follows:

- Articulation Subcommittee: developed the state level on-line Early Childhood Education Virtual Degree program and the articulation of Oregon Registry Step 7 to community college credit. The subcommittee continues to work with community colleges on the articulation and implementation of the degree program and the articulation of other community-based training and education to community colleges and universities.

- Family, Friends, and Neighbors Subcommittee: works on strategies for outreach to family, friend, and neighbors that provide child care. These providers are not part of the regulatory structure (exempt care), do not consider themselves ‘child care providers,’ but do want access to information on how to provide better care.

- Professional Development Standards Subcommittee: develops and reports on the structure and processes for professional development system, develops and
reviews training/trainer standards, and monitors the effectiveness of the system in meeting the needs of the diverse community of the childhood care and education workforce.

- Training Gaps Subcommittee: develops activities, monitors effectiveness, and identifies gaps in the training opportunities for the child care workforce. Ensures that training opportunities cover all core knowledge categories, age groups, language needs, and diverse care settings.

- Training Review Subcommittee: reviews standardized training curricula and reports on needed revisions or updates. Curricula include: Child Care Health and Safety, Building Blocks: Social/Emotional Development, Recognizing and Reporting Child Abuse and Neglect, and other training needed to meet regulatory requirements.

☐ No. Describe any plans to include assessments of specific professional development initiatives or components’ effectiveness.

j) As applicable, does (or will) the State use assessment to help shape or revise its professional development plan?

☒ Yes. Describe how assessment informs the professional development plan.

Results of the Oregon Registry Trainer Program assessment were shared with the Professional Development Standards Subcommittee and a full report given to the Training and Quality Committee, Childhood Care and Education Coordinating Council, and the Commission for Child Care in 2009. Recommendations were developed and will be implemented in the 2009-11 biennium. In addition, recommendations will be used to revise the overall professional development system plan and linked to priorities in the PATT.

☐ No. Describe any plans to include assessment to inform the professional development plan.
PART 6
HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

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

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. Note: This database typically contains information on licensing requirements for meeting State or local law to operate (§98.40). This database does not contain registration or certification requirements specific only to participation in the CCDF program.

In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements.

The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: http://nrc.uchsc.edu/.

CCDF regulations (§98.2) define the following categories of care:

- **Center-based child care provider**: 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.

- **Group home child care provider**: 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.

- **Family child care provider**: 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.

- **In-home child care provider**: Individual who provides child care services in the child’s own home.

6.1 Health and Safety Requirements for Center-Based Providers (658E(c)(2)(F), §98.41, §98.16(j))

6.1.1 Are all center-based providers paid with CCDF funds subject to licensing under State law per the NRCHSCC's compilation? Note: Some States use the
term certification or registration to refer to their licensing regulatory process. Do not check “Yes” if center-based providers simply must register or be certified to participate in the CCDF program separate from the State regulatory requirements.

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

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

Excluded facilities include:
  a) Are primarily educational and provide care to children 36 months or old or older but not yet attending kindergarten, for less than four hours a day;
  b) Are primarily supervised, child-focused training in a specific subject, including, but not limited to, dancing, drama, music, or religion. This exclusion applies only to the time children are involved in training;
  c) Are primarily an incident of group athletic or social activities sponsored by or under the supervision of an organized club or hobby group. This exclusion applies only to the time engaged in the group athletic or social activities and if the children can come and go as they please;
  d) Are operated by a school district, political subdivision of this state, or a government agency;
  e) Are operated on an occasional basis by a person, sponsor, or organization not ordinarily engaged in providing child care;
  f) Operated as a parent cooperative for no more than four hours a day; or
  g) Provide care while the child’s parent remains on the premises and is engaged in an activity offered by the facility or in other non-work activity.

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

☐ Yes, and the changes are as follows:

☒ No.

6.1.3 For center-based care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

a) The prevention and control of infectious disease (including age-appropriate immunizations)

Center-based providers deliver child care through standards that are comparable to certified centers. Providers must comply with state health requirements for age
appropriate immunizations and follow control procedures in the event of a communicable disease outbreak.

b) Building and physical premises safety

Facility standards are similar to certified center care and must be in compliance with state and local safety codes. See listing rules in Attachment 3.2.1.

c) Health and safety training

To become eligible for a higher reimbursement rate and more flexible billing practices, exempt providers are required to participate in Child Care Health and Safety and Recognizing and Reporting Child Abuse and Neglect training. All providers are encouraged to participate in First Connections infant and toddler training. All providers, substitute caregivers, and persons having unsupervised access to children are background checked through the Oregon State Police, Law Enforcement Data System (LEDS) and child protective services records.

d) Other requirements for center-based child care services provided under the CCDF

None.

6.2 Health and Safety Requirements for Group Home Child Care Providers
(658E(c)(2)(F), §§98.41, 98.16(j))

6.2.1 Are all group home providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? Note: Some States use the term certification or registration to refer to their licensing regulatory process. Do not check “Yes” if group home child care providers simply must register or be certified to participate in the CCDF program separate from the State regulatory requirements.

☐ Yes. Answer 6.2.2, skip 6.2.3, and go to 6.3.

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

☐ N/A. Group home child care is not a category of care in this State. Skip to Question 6.3.1

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

☐ Yes, and the changes are as follows:
For group home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- a) The prevention and control of infectious disease (including age-appropriate immunizations)
- b) Building and physical premises safety
- c) Health and safety training
- d) Other requirement for group home child care services provided under the CCDF

There are no exempt group homes in Oregon.

6.3 Health and Safety Requirements for Family Child Care Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.3.1 Are all family child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? Note: Some States use the term certification or registration to refer to their licensing regulatory process. Do not check “Yes” if family child care providers simply must register or be certified to participate in the CCDF program separate from the State regulatory requirements.

☐ Yes. Answer 6.3.2, skip 6.3.3, and go to 6.4.

☒ No. Describe which family child care providers are exempt from licensing under State law and answer 6.3.2 and 6.3.3.

In Oregon, family child care providers are exempt if the care is provided:
- a) to three or fewer children, not including the provider’s own children;
- b) to children from one family, not including the provider’s own children;
- c) on an occasional basis by a person not ordinarily engaged in providing child care;
- d) by a person related to the child care children by blood, marriage, or adoption;
- e) by a person who is a member of the child’s extended family, as determined by the division on a case-by-case basis.

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

☐ Yes, and the changes are as follows:
6.3.3 For family care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

a) The prevention and control of infectious disease (including age-appropriate immunizations)

Oregon Administrative Rules (OAR) govern requirements for listed providers. This is further referenced in Attachment 3.2.1. Effective July 1, 1999, the Department of Human Services requires families applying for subsidized child care to meet immunization requirements (OAR 461-135-0400).

b) Building and physical premises safety. See Attachment 3.1.1.

There are no building or physical premises safety inspections for license exempt providers. Information is self-declared on the provider listing form application which asks the provider the following information on DHS health and safety standards. If the provider checks “No,” DHS contacts the provider on how to get help meeting the standards. Financial assistance may be available. The provider must meet the standards within 30 days or their listing will not be approved.

- Each floor used by children must have 2 usable outdoor exits (this can include a window), or there is a written plan for evacuating children.
- Has water that is safe to drink.
- Has a working smoke detector on each floor and each area where children nap.
- Fireplaces, space heaters, electric outlets, wood stoves, stairways, pools, ponds, and other hazards have barriers to protect children.
- The building, grounds, toys, equipment and furniture are kept clean, sanitary and hazard-free.
- Firearms, ammunition and dangerous items like medicine, drugs, poisons, cleaning supplies, paint, and plastic bags are kept out of children’s reach.
- Has a working telephone.

c) Health and safety training. See Attachment 3.1.1.

Exempt care providers are not required to participate in health and safety training. They self report that they meeting the health and safety standards on the provider listing application form. If the provider checks “No,” DHS contacts the provider on how to get help meeting the standards. Financial assistance may be available. The provider must meet the standards within 30 days or their listing will not be approved.

To become eligible for a higher subsidy reimbursement rate and more flexible billing practices, exempt providers are required to participate in Child Care Health and Safety and Recognizing and Reporting Child Abuse and Neglect training. Providers are
encouraged to participate in First Connections infant and toddler training. All providers, substitute caregivers, and persons having unsupervised access to children are background checked through the Oregon State Police, Law Enforcement Data System (LEDS) and child protective services records.

d) Other requirements for family child care services provided under the CCDF. None

6.4 Health and Safety Requirements for In-Home Child Care Providers (658E(c)(2)(F), §§98.41, 98.16(j))

Note: Before responding to Question 6.4.1, check the NRCHSCC's compilation of licensing requirements to verify if in-home child care as defined by CCDF and your State is covered. If not, check no for 6.4.1. Do not check “Yes” if in-home child care providers simply must register or be certified to participate in the CCDF program separate from the State regulatory requirements.

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

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

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

In Oregon, an in-home provider is exempt from regulation if care is provided:

a) to three or fewer children, not including the provider’s own children;
b) to children from one family, not including the provider’s own children;
c) on an occasional basis by a person not ordinarily engaged in providing child care;
d) by a person related to the child care children by blood, marriage, or adoption;
e) by a person who is a member of the child’s extended family, as determined by the division on a case-by-case basis.

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

☐ Yes, and the changes are as follows:

☒ No.
6.4.3 For in-home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

a) The prevention and control of infectious disease (including age-appropriate immunizations)

See Attachment 3.2.1. Effective July 1, 1999, the Department of Human Services requires families applying for subsidized child care to meet immunization requirements (OAR 461-135-0400).

b) Building and physical premises safety. See Attachment 3.1.1.

There are no building or physical premises safety inspections for license exempt providers. Information is self-declared on the provider listing form application which asks the provider the following information on DHS health and safety standards. If the provider checks “No,” DHS contacts the provider on how to get help meeting the standards. Financial assistance may be available. The provider must meet the standards within 30 days or their listing will not be approved.

- Each floor used by children must have 2 usable outdoor exits (this can include a window), or there is a written plan for evacuating children.
- Has water that is safe to drink.
- Has a working smoke detector on each floor and each area where children nap.
- Fireplaces, space heaters, electric outlets, wood stoves, stairways, pools, ponds, and other hazards have barriers to protect children.
- The building, grounds, toys, equipment and furniture are kept clean, sanitary and hazard-free.
- Firearms, ammunition and dangerous items like medicine, drugs, poisons, cleaning supplies, paint, and plastic bags are kept out of children’s reach.
- Has a working telephone.

c) Health and safety training. See Attachment 3.1.1.

Exempt care providers are not required to participate in health and safety training. They self report that they meeting the health and safety standards on the provider listing application form. If the provider checks “No,” DHS contacts the provider on how to get help meeting the standards. Financial assistance may be available. The provider must meet the standards within 30 days or their listing will not be approved.

To become eligible for a higher subsidy reimbursement rate and more flexible billing practices, exempt providers are required to participate in Child Care Health and Safety and Recognizing and Reporting Child Abuse and Neglect training. Providers are encouraged to participate in First Connections infant and toddler training. All providers, substitute caregivers, and persons having unsupervised access to children are background
checked through the Oregon State Police, Law Enforcement Data System (LEDS) and child protective services records.

d) Other requirements for child care services provided under the CCDF

None.

6.5 Exemptions to Health and Safety Requirements

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

Indicate the Lead Agency’s policy regarding these relative providers:

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

☐ All relative providers are exempt from all health and safety requirements.

☐ Some or all relative providers are subject to different health and safety requirements from those described in sections 6.1 - 6.4. The following a) describes those requirements and b) identifies the relatives they apply to:

6.6 Enforcement of Health and Safety Requirements

6.6.1 Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) Describe how health and safety requirements are effectively enforced, including at a minimum:

a) Are child care providers subject to routine unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?

☑ Yes, and indicate the provider categories subject to routine unannounced visits and the frequency of those visits:

Center and Certified Family Child Care homes are subject to annual unannounced visits. Certified and Registered Family Child Care providers receive unannounced visits to investigate serious complaints.

☐ No.
b) Are child care providers subject to background checks?

- Yes, and indicate the types of providers subject to background checks and when such checks are conducted:

  All registered, certified, and child care subsidy providers are subject to criminal background checks prior to state approval.

- No.

c) Does the State require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)

- Yes, and describe the State’s reporting requirements and how such injuries are tracked (if applicable):

  All injuries that occur in regulated child care that require third party medical attention must be reported to the Child Care Division. The division maintains a database to track the number and nature of injuries.

- No.

d) Describe any other methods used to ensure that health and safety requirements are effectively enforced:

1) All persons who wish to work in regulated child care in Oregon must first be enrolled in the Central Background Registry (CBR). In order to be enrolled, an individual must pass a criminal background check that includes state criminal history and child protective services check. FBI checks are required for applicants who have lived out of state during the previous 18 months, or whose state background check indicates a multi-state offender. CBR enrollment must be renewed every two years. The state checks Oregon State Police records on a quarterly basis for any additional convictions by the provider or household members.

2) Center-based care: local zoning regulations, local health department sanitation inspection, occupancy, and building codes apply.

3) Certified family child care homes – Oregon Department of Health sanitation rules apply; non-occupied same as center rules/regulations.

If a facility is not in compliance, three actions can be taken:

1) A recheck of the facility after a reasonable time for corrective actions;

2) Imposition of fines for continued non-compliance; or

3) Suspension of child care license.

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

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

- [ ] Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
- [ ] Children who receive care in their own homes.
- [X] Children whose parents object to immunization on religious grounds.
- [X] Children whose medical condition contraindicates immunization.
APPENDIX 1
CCDF 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))

5. with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))

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

7. that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 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))

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

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

(7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))
APPENDIX 2
ELIGIBILITY AND PRIORITY TERMINOLOGY

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

- **in loco parentis** – In place of the parent; may include, but is not limited to, a step-parent, guardian, or legal guardian.

- **physical or mental incapacity** (if the Lead Agency provides such services to children age 13 and older) – a child or youth under age 18 who may require a level of care above the norm for his/her age due to disabilities, emotional or behavioral disorders, or special health care needs. Same as special needs child.

- **protective services** – Children who have either experienced abuse or neglect or are at risk of abuse or neglect as a result of their parent/primary caregiver’s use and/or abuse of alcohol or other drugs. CCDF dollars are not used for children in protective services or under the care of the Department of Human Services, Children’s Services Division.

- **residing with** – Children shall reside with a parent, who is the person responsible for the care, control, and supervision of the child. Parent means a parent by blood, marriage or adoption, legal guardian, or other person standing in loco parentis.

- **special needs child** – A child or youth under age 18 who may require a level of care above the norm for his/her age due to disabilities, emotional or behavioral disorders, or special health care needs.

- **very low income** – 150 percent of the Federal Poverty Level.

List and define any additional terminology related to conditions of eligibility and/or priority established by the Lead Agency:

- **Working** – Employment in an occupation which provides earned income and requires periodic absence from, or an inability to care for a dependent child. Earned income includes (a) compensation for services performed, (b) income from on-the-job training or other paid work experience, (c) in-kind income in exchange for work performed, (d) income from self-employment, or (e) flexible benefits that the employee has the option of taking in cash.

- **Child of a teen parent** – child care for parents under the age of 20 who are actively participating in a high school diploma or high school equivalency program.

- **Child of a parent in substance abuse treatment** – child care for parents who are participating in state-approved substance abuse treatment prior to reentry to the workforce. The treatment service must include a recognized women’s program.
• *Child of a parent in farm work* – child care for parents employed in migrant and/or seasonal agriculture as defined by Oregon Administrative Rules.

• *Child of a post-secondary student-parent* – child care for parents enrolled full-time in vocational schools, community colleges, or institutions of higher education. Student-parents must demonstrate passing grades to maintain eligibility.
APPENDIX 3: ADDITIONAL CERTIFICATIONS

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:**

2. **Certification regarding debarment:**

3. **Definitions for use with certification of debarment:**

4. **HHS certification regarding drug-free workplace requirements:**

5. **Certification of Compliance with the Pro-Children Act of 1994:**

6. **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.
REQUIRED ATTACHMENTS

List all attachments included with this Plan.

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ATTACHMENT 2.1.1a

Child Care System Logic Model

http://www.employment.oregon.gov/EMPLOY/CCD/docs/Logic_Model_0212.pdf

ATTACHMENT 2.1.1b

Child Care System Program and Accountability Tracking Tool (PATT)


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<th>PATT Number</th>
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<td>Oregon Child Care Resource &amp; Referral Network</td>
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<td>Oregon After School for Kids</td>
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<tr>
<td>Oregon Assoc for the Education of Young Children</td>
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</table>
ATTACHMENT 2.1.2

Emergency Preparedness and Business Continuation Plan
Employment Department, Child Care Division


ATTACHMENT 2.1.3

Plan for Early Childhood Program Coordination

ATTACHMENT 2.2

Public Hearing Notice
and Public Comments

From: Craig C SPIVEY

To: Albany Democrat Herald; Argus Observer; Ashland Daily Tidings; Associated Press; Baker City Herald; Burns Times Herald; Capital Press; Catholic Sentinel; Central Oregonian; Clackamas County Review; Clatskanie Chief; Confederated Umatilla Journal; Coquille Valley Sentinel; Corvallis Gazette Times; Curry County Reporter; Deschutes Source Dunn, Katia; East County News; East Oregonian; El Centinela de los Hispanos; El Hispanic News; Eugene Weekly; Forrest Grove Times; Frazier, Joe; Hamner, Elise; Headlight Herald; Hells Canyon Journal; Herald & News; Hester, Mark; Hill, Gail; Hillsboro Argus; Hood River News; Just Out; Keizer Times; Klamath County Report; La Grande Observer; Lake County Examiner; Lebanon Express; Lenhart, Harry; Lorton, Barney; Linfield Review; Mail Tribune; Manthey, Toby; McKenzie River Reflections; Mitchell, Ted; Multnomah Village Post; Myrtle Point Herald; Newport News Times; News Register; News, Latin; Outlook; Gresham; Port Orford News; Portland Family Magazine; Portland Tribune; Portland Tribune; Record Courier; Reuters News Service; Rogue River Press; Salem News.com; Sandy Post; Santarris, Ben; Sargent, Jennifer; Seaside Signal; Skagit Valley Herald; Skidmore, Sarah; South Lincoln County News; Spokesman; Springfield News; St. Johns Review; The Bend Bulletin; The Bridge; The Business Journal; The Canby Herald; The Chronicle; The Curry Coastal Pilot; The Daily Astorian; The Daily Courier The Daily Emerald; The Daily Journal of Commerce; The Dalles Chronicle; The Douglas County Mail; The Eastern Voice; The Heppner Gazette; The Hermiston Herald; The Jewish Review; The Madras Pioneer; The Mallala Pioneer; The New Era; The Newberg Graphic; The News Guard; The News Review; The Nugget; The Oregon Metro East; The Oregonian; The Oregonian West Metro; The Pioneer Log; The Portland Observer; The Regal Courier; The Register Guard; The Sellwood Bee; The Silverton Appeal; The Siuslaw News; The Skinner; The South County Spotlight; The Statesman Journal; The Sun; The Umpqua Free Press; The Umpqua Post; The Villager; The World; Tri County News; Upper Rogue Independent; Wallowa County Chieftain; Wallowa County Chieftain; West Lane News; Willamette Week; Woodburn Independent

Date: 5/27/2009 4:05 PM
Subject: PUBLIC NOTICE: Child Care Division
Attachments: Child_Care_05-27-09.pdf

PUBLIC NOTICE

FOR IMMEDIATE RELEASE

CONTACT: Sonja Svenson
Child Care Division
WorkSource Oregon Employment Department
503 947 1243

Sonja.Svenson@state.or.us

Notice is hereby given that the Oregon Employment Department, Child Care Division, will hold a hearing for public comment on the 2008 2009 Child Care and Development Fund (CCDF) state plan. The plan was developed in coordination and consultation with state and local child care, early childhood, and school age care agencies and advocates under the provisions of 45 Code of Federal Regulations Parts 98 and 99. Funding from the CCDF program assists with affordability, availability, quality, and safety of child care in Oregon. The hearing will be held on Tuesday, June 23, 2009 from 6 to 7 p.m. at Roth’s West Salem, Doaks Ferry Room, Salem, Oregon. A copy of the Final Draft plan may be obtained from Sonja Svenson, Oregon Employment Department 22, P.O. Box 4395, Portland, Oregon 97208-4395 or by accessing the Child Care Division public website at: www.childcareinoregon.org.

For the duration of public posting, notification to public and private sector entities, and the Public Hearing, 27 public comments and/or corrections were received from eleven (11) state agencies and/or divisions, two (2) non-profits, and one (1) private individual.

Seven people attended the Public Hearing on June 23, 2009.
ATTACHMENT 3.1.1

Eligibility worker’s manual, policy handbook, administrative rules or other printed guidelines for administering the child care subsidy program


http://www.dhs.state.or.us/policy/selfsufficiency/em_firstpage.htm

http://dhsforms.hr.state.or.us/Forms/Served/DE7494.pdf
(Provider listing form application for subsidies)
ATTACHMENT 3.2.1
(REVISED 10-1-10)

ERDC PAYMENT RATES

461-155-0150
Effective 10/01/10
Child Care Eligibility Standard, Payment Rates, and Copayments

The following provisions apply to child care in the ERDC, JOBS, JOBS Plus, and TANF programs:

1. The following definitions apply to the rules governing child care rates:
   a. Infant: A child aged newborn to 1 year.
   b. Toddler: A child aged 1 year to 3 years.
   c. Preschool: A child aged 3 years to 6 years.
   d. School: A child aged 6 years or older.
   e. Special Needs: A child who meets the age requirement of the program (ERDC or TANF) and who requires a level of care over and above the norm for his or her age due to a physical, behavioral or mental disability. The need for a higher level of care must be determined by the provider and the disability must be verified by one of the following:
      A. A physician, nurse practitioner, licensed or certified psychologist or clinical social worker.
      B. Eligibility for Early Intervention and Early Childhood Special Education Programs, or school-age Special Education Programs.
      C. Eligibility for SSI.

2. The following definitions apply to the types of care specified in the child care rate charts in subsections (4)(a) through (4)(c) of this rule:
   a. The Standard Family Rate applies to child care provided in the provider's own home or in the home of the child when the provider does not qualify for the enhanced rate allowed by subsection (b) of this section.
   b. The Enhanced Family Rate applies to child care provided in the provider's own home or in the home of the child when the provider meets the training
requirements of the Oregon Registry, established by the Oregon Center for Career Development in Childhood Care and Education.

c. The *Registered Family Rate* applies to child care provided in the provider's own home when the provider meets criteria established by the Child Care Division.

d. The *Certified Family Rate* applies to child care provided in a residential dwelling that is certified by the Child Care Division as a Certified Family Home. To earn this designation, the facility must be inspected, and both provider and facility are required to meet certain standards not required of a registered family provider.

e. The *Standard Center Rate* applies to child care provided in a facility that is not located in a residential dwelling and is exempt from Child Care Division Certification rules (see OAR 414-300-0000).

f. The *Enhanced Center Rate* applies to child care provided in an exempt center whose staff meet the training requirements of the Oregon Registry established by the Oregon Center for Career Development in Childhood Care and Education. Eligibility to receive the enhanced center rate for care provided in an exempt center is subject to the following requirements:

A. A minimum of one staff member for every 20 children in care must meet the Oregon Registry training requirements noted in paragraph (2)(b) of this rule.

B. New staff must meet the Oregon Registry training requirements within 90 days of hire, if necessary to maintain the trained staff-to-children ratio described in paragraph (A) of this subsection.

C. There must be at least one person present where care is provided who has a current certificate in infant and child CPR and a current American Red Cross First Aid card or an equivalent.

g. An enhanced rate will become effective not later than the second month following the month in which the Department receives verification that the provider has met the requirements of subsection (2)(b), (f), or (g) of this rule.

h. The *Certified Center Rate* applies to child care provided in a center that is certified by the Child Care Division.

3. The following provisions apply to child care payments:
a. Providers not eligible for the enhanced or licensed rate will be paid at an hourly rate for children in care less than 158 hours per month subject to the maximum full-time monthly rate.

b. Providers eligible for the enhanced or licensed rate will be paid at an hourly rate for children in care less than 136 hours a month unless the provider customarily bills all families at a part-time monthly rate subject to the maximum full-time monthly rate.

c. At their request, providers eligible for the enhanced or licensed rate may be paid at the part-time monthly rate if they provide 63 or more hours of care in the month and customarily bill all families at a part-time monthly rate.

d. Unless required by the circumstances of the client or child, the Department will not pay for care at a monthly rate to more than one provider for the same child for the same month.

e. The Department will pay at the hourly rate for less than 63 hours of care in the month subject to the maximum full-time monthly rate.

f. The Department will pay for up to five days each month the child is absent if:

   A. The child was scheduled to be in care and the provider bills for the amount of time the child was scheduled to be in care;

   B. The absent child's place is not filled by another child; and

   C. It is the provider's policy to bill all families for absent days.

g. The Department will not pay for more than five consecutive days of scheduled care for which the child is absent.

4. The following are the child care rates, the rates are based on the type of provider, the location of the provider (shown by zip code), the age of the child, and the type of billing used (hourly or monthly):

   a. Group Area A

<table>
<thead>
<tr>
<th>STANDARD RATE MAXIMUMS (Not Licensed)</th>
</tr>
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<tbody>
<tr>
<td>Standard Family Rate</td>
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<tr>
<td>1-157 Hours per month</td>
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<td>1-157 Hours per month</td>
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# PLAN FOR CCDF SERVICES IN: OREGON
FOR THE PERIOD 10/1/09 – 9/30/11

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<tr>
<th></th>
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## ENHANCED RATE MAXIMUMS (Not Licensed)

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Zip Codes for Group Area A:
Portland, Bend, Eugene, Corvallis, Springfield, Monmouth and Ashland areas
### Group Area B

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### PLAN FOR CCDF SERVICES IN: OREGON
FOR THE PERIOD 10/1/09 – 9/30/11

#### CCDF Plan Effective Date: October 1, 2009
Amended Effective: 10-1-10

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### Group Area C

#### STANDARD RATE MAXIMUMS (Not Licensed)

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#### ENHANCED RATE MAXIMUMS (Not Licensed)

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### PLAN FOR CCDF SERVICES IN: OREGON
FOR THE PERIOD 10/1/09 – 9/30/11

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Zip Codes for Group Area C: Balance of State, Other State Zips

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Stat. Auth.: ORS 411.060, 411.070, 412.049
Stats. Implemented: ORS 411.060, 411.070, 412.049
ATTACHMENT 3.2.3

2008 Oregon Market Price Study
Complete document can be found at:

EXECUTIVE SUMMARY

Starting with the Family Support Act of 1988, “federal funding requirements have stipulated that child care subsidy rates be informed by market rates.” In 1990 the federal government began a major investment in child care with the passage of the Child Care and Development Block Grant Act. Support of parental choice was a key component of this block grant program that sent new money to states to support child care. Parental choice and state control of policy remained central when the program was expanded in 1996 as a part of welfare reform legislation. At that time, child care funding became known as the Child Care and Development Fund (CCDF).

The present federal regulatory framework for market rate surveys was made public in the Federal Register in August 1998 (45 CFR Parts 98 and 99). As part of this rule, states are required to conduct a child care market rate survey within two years of the effective date of their currently approved CCDF plan. Although these surveys are described as market rate surveys by the federal government, we use the term market price survey because it clearly distinguishes the process of collecting price data from setting maximum rates.

The purpose of federal policy in having states conduct a market price survey is to have states establish maximum child care payment rates high enough to enable subsidy families to enter the child care market in a competitive position to find and afford care. A market price survey is a tool to be used by states to collect up-to-date information on what facilities, within given geographic areas, charge parents for various types of child care. This information is then considered during the state budget process when establishing state subsidy rate policies for facilities who serve CCDF eligible families. It should be noted that the federal CCDF Final Rule is for a survey of the prices charged for child care, not a survey of the costs of child care.

Purpose of the Market Price Study

The 2008 Oregon Market Price Study identifies child care prices and the geographic distribution of these prices across the state. Prices vary by several factors including the age of child served, type of care (family child care, center, certified family care), the local supply and demand for child care, and facilities’ perceptions of the capacity of families to pay for care.

The 2008 Oregon Market Price Study examines geographic patterns in the prices charged by facilities by age of child served, type of care, and pricing modes (hourly, monthly, etc). This study fulfills the federal requirement that the state complete a market price survey every two years.

Data Source Prior studies were completed in 1990, 1992, 1994, 1999, 2000, 2002, 2004, and 2006. As in past years, data collected through the
local Child Care Resource and Referral (CCR&R) was used as the source of data. The data were created when local CCR&Rs collect price data from enrolled child care facilities for the price study. CCR&Rs also use price data to inform parents of facility charges as part of a referral process.

The Oregon Child Care Resource and Referral Network (OCCRRN) compiles the data into a single database. In 1999, a sample of facilities were pulled from the OCCRRN database and surveyed by phone. In 2008 (as in years other than 1999) the price data from the OCCRRN database were analyzed. Prices charged by 4,255 family child care facilities, 994 centers, and 348 certified family facilities from every part of the state are included in the database.

Findings

**Between 1994 and 2008 statewide prices increased for all ages and types of care.** In family child care the hourly price of toddler care increased 50% since 1994 while in center care the monthly price increased 70% in the same time period. Family child care shows no consistent pattern in prices after taking into consideration cost of inflation. For center care, however, prices increased faster than inflation between 1999 and 2004 and, for the most part, have been keeping pace with inflation since 2004. However, center preschool prices increased slightly faster than inflation between 2006 and 2008.

**Child care markets are local with variation among communities.** When prices were analyzed by zip codes across Oregon, patterns around the state appeared. Urban areas and university communities have higher prices than do more rural communities in the state. Some zip code areas have moved up or down in child care prices over time. As in past studies, however, child care prices fall into three clusters or areas. The map of 2008 Rate Areas graphically depicts how the prices vary across the state (See Map in Appendix E of the full study). These three rate areas capture three distinct sets of prices regardless of type of care or age of child served.

**Current market prices are more similar to the licensed rate maximums set by the state of Oregon than anytime since 1995 (the last time rates were set in accordance with a price study).** This is primarily the result of significantly increasing maximum subsidy rates as of October 2007. As authorized by the Oregon Legislature, DHS increased maximum subsidy rates to the 75th percentile of 2006 prices for most licensed facilities.

The state subsidy or maximum payment rate affects parents’ access to all types of child care in the community. The study explored access in two ways: (1) percent of slots statewide that can be purchased at the subsidy rate, and (2) percent of facility care by zip code that can be purchased at the subsidy rate. The second measure was created to determine if the amount of access varied by geographic location. Findings include:
• In Oregon, current licensed rate maximums are adequate to purchase approximately 68 percent of child care toddler slots statewide. The primary reason for this increase compared to past years is due to the recent, October 2007, policy change of increasing subsidy rates to the 75th percentile of 2006 prices for most licensed facilities.

• In much of Oregon, current licensed rate maximums are adequate to purchase a large percentage of market child care

In 19 percent of Oregon zip code areas that have prices, no care from family child care facilities can be purchased at the licensed rate maximums. In 12 percent of Oregon zip code areas that have prices, the licensed rate maximums are not high enough to purchase any center child care. In 61 percent of zip code areas families can purchase over 50 percent of family child care in the community at the licensed rate maximums, and in almost four-fifths (78%) of zip code areas families can purchase over 50 percent of center child care. In almost two-thirds to three-fourths of Oregon zip code areas, the subsidy amount is sufficient to provide access to over 50 percent of care.

The DHS licensed rate maximums include both the amount families’ pay in co-pay and the DHS child care subsidy amount. The value of a child care subsidy, when combined with the family co-pay, covers child care prices in the market in most parts of the state.

Conclusions

The geographic price analysis identified three geographic market area boundaries that are generally similar to those identified in the previous market price studies.

DHS licensed rate maximums are adequate to purchase more than two-thirds (68%) of market child care slots statewide. In approximately 17 percent of zip code areas the DHS licensed rate maximums are not high enough to purchase market child care.

CCR&R data continues to be reported for both child care facilities and slots. Analysis should be based on slots since this most accurately represents what families experience when purchasing care.

CCR&Rs should continue to collect price information in the mode(s) that reflect how facilities charge.
ATTACHMENT 3.4.3
Eligibility/priority for ERDC Services
Child Care Reservation List

461-135-0400    Temporary Effective 10/01/10 through 03/30/11
Specific Requirements; ERDC

1. The Department makes payments for child care, including care covered by the ERD program, subject to the provisions of division 165 of this chapter of rules.

2. To be eligible for ERDC, a filing group (see OAR 461-110-0350) must meet the requirements of all of the following subsections:
   a. At least one caretaker (see OAR 461-001-0000) must receive income from employment (other than self-employment, see OAR 461-145-0910), including employment through a work study program.
   b. The filing group must include a child who needs child care.
   c. The filing group must have an allowable child care need as described in OAR 461-160-0040. If there are two adults required to be in the filing group, and one of the adults is unemployed or self-employed, the unemployed or self-employed adult is considered available to provide child care, making the filing group ineligible, except in the following situations:
      A. The unemployed adult is physically or mentally unable to provide adequate child care.
      B. The unemployed adult is unavailable to provide child care while participating in the requirements of a case plan (see OAR 461-001-0025) other than requirements associated with post-secondary education.
   d. The filing group must use a child care provider who meets the requirements in OAR 461-165-0160 and 461-165-0180.
   e. The child needing child care must meet the citizenship or alien status requirements of OAR 461-120-0110.

3. A filing group is not eligible for a child care payment for more than six calendar months if the filing group is unwilling to obtain a Certificate of Immunization Status for the child.

4. The child care must be necessary to enable the caretaker to remain employed (other than self-employed).
5. A filing group is not eligible for child care when the caretaker or parent in the filing group receives a grant for child care from the Oregon Student Assistance Commission for any month the grant is intended to cover, regardless of when the grant is received.

6. To be eligible for ERDC program benefits, a new applicant with an effective date of October 1, 2010 or later under OAR 461-180-0070 must meet all of the requirements of sections (1) to (5) of this rule, and:

   a. At least one member of the ERDC program filing group must have received a partial or full month of REF, SFPSS, or TANF program cash benefits from the State of Oregon in at least one of the preceding three months; and

   b. No member of the ERDC program filing group may be concurrently receiving TANF program benefits except as allowed under OAR 461-165-0030.

7. An applicant re-applying for ERDC benefits who had a break in ERDC program benefits of 30 days or more at the time of re-application is considered a new applicant and must meet the requirements of sections (1) to (6) of this rule.

8. The Department will place each applicant (including applicants under section (7) of this rule) who is sent a decision notice (see OAR 461-001-0000) of ineligibility for the ERDC program on a Child Care Reservation List.

9. An applicant selected from the Child Care Reservation List must then submit an application for child care benefits to the Department. The applicant has 30 days from the date on the selection letter sent by the Department for the Department to receive the application for child care benefits. If an applicant does not apply within the 30 days, the applicant is removed from the reservation list and must re-apply for the ERDC program to be placed back on the reservation list with a new reservation number.

10. An applicant with a valid and selected reservation number from the Child Care Reservation List found eligible for ERDC program benefits remains eligible until one of the circumstances in the following subsections occurs:

   a. The client has a break in ERDC program benefits of 30 days or more; or

   b. The client no longer meets the ERDC program eligibility requirements, excluding the requirement to have received REF, SFPSS, or TANF program cash benefits from the State of Oregon in the preceding three months.

Stat. Auth.: ORS 409.050, 411.060, 411.070
ATTACHMENT 3.5.1

ELIGIBILITY STANDARD
SLIDING FEE SCALE
ERDC COPAY STANDARD
OAR 461-155-0150
(REVISED 10-1-10)

5. This section establishes the ERDC eligibility standard and the client's copayment (copay).

   a. The ERDC eligibility standard is met for need groups (see OAR 461-110-0630) of eight or less if monthly countable income (see OAR 461-001-0000) for the need group is less than 185 percent of the federal poverty level (FPL), as described in OAR 461-155-0180(5). The eligibility standard for a need group size of eight applies to any need group larger than eight.

   b. The minimum monthly ERDC copay is $25.

   c. For filing groups (see OAR 461-110-0310) whose countable income is at or below 50 percent of the 2007 FPL, the copay is $25 or 1.5 percent of the filing group's monthly countable income, whichever is greater.

   d. For filing groups whose countable income is over 50 percent of the 2007 FPL, the copay amount is determined with the following percentage of monthly income:

      A. Determine filing group's countable income as a percent of FPL (rounding to the nearest whole number percentage), subtract 50, and multiply this difference by 0.12.

      B. Add 1.5 to the amount in paragraph (A) of this subsection. This sum is the percentage of monthly income to determine the copay amount.

   e. The 2007 federal poverty level used to determine copay amounts under subsections (c) and (d) of this section is set at the following amounts:

      | Number in Family | Gross Monthly Income | Gross Yearly Income |
      |------------------|----------------------|--------------------|
      | 2                | $1,141               | $13,690            |
      | 3                | 1,431                | 17,170             |
      | 4                | 1,721                | 20,650             |
### CCDF Plan Effective Date: October 1, 2009

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6. Subject to the provisions in section (9) of this rule, the monthly limit for each child's child care payments is the lesser of the amount charged by the provider or providers and the following amounts:

   a. The monthly rate provided in section (4) of this rule.
   
   b. The product of the hours of care, limited by section (8) of this rule, multiplied by the hourly rate provided in section (4) of this rule.

7. The limit in any month for child care payments on behalf of a child whose caretaker is away from the child's home for more than 30 days because the caretaker is a member of a reserve or National Guard unit that is called up for active duty is the lesser of the following:

   a. The amount billed by the provider or providers.
   
   b. The monthly rate established in this rule for 215 hours of care.

8. The number of payable billed hours of care for a child is limited as follows:

   a. In the ERDC and TANF programs, the total payable hours of care in a month may not exceed:
      
      i. 125 percent of the number of hours necessary for the client to perform the duties of his or her job, or to participate in activities included in a case plan (see OAR 461-001-0025) including, for clients in the JOBS Plus program, the time the client searches for unsubsidized employment and for which the employer pays the client; or
      
      ii. The monthly rate established in section (4) of this rule multiplied by a factor of not more than 1.5, determined by dividing the number of hours billed by
215, when the client meets the criteria for extra hours under section (10) of this rule.

b. In the ERDC program, for a client who earns less than the Oregon minimum wage, the total may not exceed 125 percent of the anticipated earnings divided by the state minimum wage not to exceed 172 hours (which is full time). The limitation of this subsection is waived for the first three months of the client's employment.

c. In the TANF program, for a client who earns less than the Oregon minimum wage or is self-employed, the total may not exceed 125 percent of the anticipated earnings divided by the state minimum wage not to exceed 172 hours (which is full time). The limitation of this subsection is waived for the first three months of the client's employment.

9. The limit in any month for child care payments on behalf of a child whose caretaker has special circumstances, defined in section (10) of this rule, is the lesser of one of the following:

   a. The amount billed by the provider or providers; or

   b. The monthly rate established in section (4) of this rule multiplied by a factor, of not more than 1.5, determined by dividing the number of hours billed by 215.

10. The limit allowed by section (9) of this rule is authorized once the Department has determined the client has special circumstances. For the purposes of this section, a client has special circumstances when it is necessary for the client to obtain child care in excess of 215 hours in a month to perform the requirements of his or her employment or training. This is limited to the following situations:

   a. The commute time to and from work exceeds two hours per day.

   b. The caretaker works an overnight shift and care is necessary for both work hours and sleep hours.

   c. The caretaker works a split shift and it is not feasible to care for the child between shifts.

   d. The caretaker consistently works more than 40 hours per week.

   e. Weekend work or other nonstandard work hours require care by more than one provider, and the total allowable hours billed by both providers exceeds the maximum limit.
f. The caretaker needs child care for both full-time work and participation in Department assigned activities.

11. The payment available for care of a child who meets the special needs criteria described in subsection (1)(e) of this rule is increased in accordance with OAR 461-155-0151 if the requirements of both of the following subsections are met:

a. The child requires significantly more direct supervision by the child care provider than normal for a child of the same age; and

b. The child is enrolled in a local school district Early Intervention or Early Childhood Special Education program or school-age Special Education Program. The enrollment required by this subsection is waived if determined inappropriate by a physician, nurse practitioner, licensed or certified psychologist, clinical social worker, or school district official.

Stat. Auth.: ORS 411.060, 411.070, 412.049
Stats. Implemented: ORS 411.060, 411.070, 412.049

ERDC Copay Calculator 2011

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### FOR THE PERIOD 10/1/09 – 9/30/11

**CCDF Plan Effective Date:** October 1, 2009  
**Amended Effective:** 10-1-10

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To access the ERDC Copayment Estimate Screen on the Internet:

Go to [http://dhsmanuals.hr.state.or.us/ERDC_CALC/FMPRO](http://dhsmanuals.hr.state.or.us/ERDC_CALC/FMPRO)

You will be asked the number of persons (in the family) and the monthly income. The system will then calculate the copayment or tell you that "the income exceeds eligibility for child care services."
ATTACHMENT 4.1.1

Parent Application
for Employment Related Day Care

http://dhsforms.hr.state.or.us/Forms/Served/DE7470.pdf

ATTACHMENT 5.1.6

2008 Survey of Registered Family Child Care Providers

conducted by

Oregon Employment Department, Child Care Division

ATTACHMENT 5.2.1

Voluntary Early Learning Guidelines

http://www.ode.state.or.us/superintendent/priorities/ready4school/introfoundations.pdf

http://www.ode.state.or.us/superintendent/priorities/ready4school/glossary.pdf

Birth to Three Foundations
http://www.ode.state.or.us/search/page/?id=1352

Birth to Three Summaries
http://www.ode.state.or.us/search/page/?id=1405

Three to Five Foundations
http://www.ode.state.or.us/search/page/?id=1286

Three to Five Summaries
http://www.ode.state.or.us/search/page/?id=1406
Attachment 5.2.3

Materials to Support Early Learning Guidelines

Born to Learn Training Manual

Introduction
http://www.ode.state.or.us/gradelevel/pre_k/ecborntolearnintro.pdf

Glossary of Terms
http://www.ode.state.or.us/gradelevel/pre_k/ecborntolearnGLOSSARYOFTERMS.pdf

Activities and Routines
http://www.ode.state.or.us/gradelevel/pre_k/ecborntolearnactivitiesroutines.pdf

Learning Centers
http://www.ode.state.or.us/gradelevel/pre_k/ecborntolearnlearningcenters.pdf

Foundations
http://www.ode.state.or.us/gradelevel/pre_k/ecborntolearncfoundations.pdf
ATTACHMENT 5.2.5

Oregon’s Professional Development Plan
Updated March 2009

1. CORE PROFESSIONAL KNOWLEDGE

A. Core body of knowledge/core competencies

- **Completed:** 10 core knowledge categories (CKC) have been identified and defined in terms of knowledge required and practice desired.
- **Completed:** Standards of knowledge, key knowledge concepts, and supporting explanations for each of the 10 core knowledge categories have been developed and are in use.
- **Completed:** Examples of topics for training in each of the 10 core knowledge categories have been created and are in use.

- **Continuation:** Disseminate information on the professional development system: linking with the profession, professional development, the state infrastructure, and the federal quality initiatives.
  - Information was disseminated at local, regional and statewide conferences.
  - Oregon Partners have participated in federal Region X conference calls and meetings.

- **Continuation:** Disseminate information on professional development system foundational documents: Core Body of Knowledge, Oregon Registry Steps.
  - The Core Body of Knowledge was evaluated, reviewed and revised. Information on changes was broadly disseminated to partners and providers
  - The Steps document was evaluated, reviewed and revised. Information on changes will be disseminated to partners and providers by the end of 2009.
  - Efforts will continue to explore effective marketing strategies.
  - Plans are in place to print the Core Body of Knowledge as a bound and useable document.

- **Continuation:** Disseminate information on core professional development programs: Oregon Registry, Oregon Registry Trainer Program.
  - Marketing efforts will continue, including updating the OCCD website.

- **Continuation:** Provide in depth training and follow up technical assistance to mentors, R&R specialists, licensing specialists, professional organization leaders, and certified trainers on Core Body of Knowledge, CKC, key concepts, and standards.
  - Mentors received an Oregon Registry orientation and a training of trainers and are providing training in “Starting Points,” a series of four training sessions regarding the Oregon Registry foundational documents, application forms and process.
  - Plans are in place to revamp the mentoring program and focus on professional development technical assistance for providers. A “tool kit” will be developed to assist TA specialists to provide support to providers, thus increasing numbers on the Oregon Registry. Standards will be developed for the TA specialists and training will be provided.
  - Training will also be provided for partners and end users of the new Training and Education Warehouse.
Completed: Develop a professional development overview presentation to be broadly disseminated through the above referenced partners.
- Developed on-line series of professional development system lessons for mentors, trainers, sponsoring organizations.
- Also developed an overview presentation that is incorporated into an Oregon Registry orientation for statewide mentors.

Completed: Develop a hands-on training session/presentation for providers on how to use the Core Body of Knowledge to be broadly disseminated through the above referenced partners.
- This training was developed and is one of the sessions of the Starting Points training series.

Completed: Develop a presentation regarding the use of the Core Body of Knowledge to support quality practice (link quality practice with knowledge and vice versa) to be broadly disseminated through the above referenced partners.
- A four part training series was developed, called Starting Points, and is being delivered by Mentors, CCR & R trainers, trainers from other training organizations, and independent trainers.

Completed: Provide the developed presentations at professional conferences.
- The above referenced presentations were presented at a variety of state and regional conferences.

Completed: Work with ODE to link the Core Body of Knowledge, core knowledge categories, key knowledge concepts, and supporting explanations to the Early Childhood Foundations (early learning standards).
- The Early Childhood Foundations have been incorporated into the Core Body of Knowledge. A PowerPoint presentation has been developed and outlines for three training sessions linking Oregon’s Early Childhood Foundations with Professional Knowledge Standards has been developed.

Revised/Continuation: Develop a planning document, Quality Assurance Standards for Oregon’s Childhood Care and Education System listing a variety of Quality Program Standards and tools for assessment. Removed focus from single program assessment tool.
- There are efforts currently underway to establish criteria linked to the Quality Indicators Program that would be a stepping stone towards accreditation and a marker of increased quality. Incentives are being targeted towards this marker.

Continuation: Work with the National Child Care Information Center and the National Registry Alliance toward common definitions and articulation among states of the Core Knowledge Categories
- Oregon Partners have attended federal Region X meetings and participated on conference calls to discuss common definitions and articulation possibilities.
- Submitted requested information regarding Core Knowledge Categories, Core Body of Knowledge, Oregon Registry Steps, etc., to The National Registry Alliance. Participated in initial work with TNRA to establish commonalities.
B. Career Lattice

- **Completed:** Created a twelve (fifteen) step Oregon Registry Steps, which uses the Oregon Core Body of Knowledge core knowledge categories and standards, and focuses on training/education requirements.
- **Completed:** Created the Oregon Registry Professional Enhancements to recognize professional experience, professional and personal attributes, and commitment to a professional code of ethics.
- **Completed:** Created the Oregon Registry Steps showing two distinct professional development pathways: degreed/certificated and community based training/credit courses.
- **Completed:** Created the Oregon Registry Steps for a broad spectrum of professionals in childhood care and education.
- **Completed:** Created The Oregon Registry as a review and approval process to document the acquisition of the Core Body of Knowledge through the steps of the Oregon Registry Steps.
- **In Development:** Initial steps have been taken to establish a state level training and education warehouse that would provide documented verified data to identified partners and programs.

- **Partially Completed:** Evaluate, Review and revise the Oregon Registry Steps, Oregon Registry Program, and Oregon Registry Trainer Program.
  - Completed a review and analysis of the data pertaining to the Oregon Registry Trainer Program.
  - Completed a review and analysis of data pertaining to the Oregon Registry Steps document.
  - A full review of the Oregon Registry program will occur in the next year.

- **Continuation:** Information on changes has been disseminated broadly to partners and providers and will continue as other changes are made.

- **Continuation:** Continue work with the Oregon Registry and the Oregon Registry Trainer Program regarding implementation of TQC directives including:
  - evaluation & renewal of trainers,
  - school age credential, and others to be determined by partners,
  - articulation of high school coursework,
  - links to other parts of the system,
  - review of use of steps 9 and 10 and availability of credit training.
  - the following have been completed:
    - director credential, infant toddler credential, have been developed and are currently being field tested,
    - inclusion of writing in training system has been incorporated,
    - the issue of time limits of accepted training has been resolved
    - out of country degrees are being translated and evaluated as part of the scholarship program,
    - adult education credential was dropped as the Oregon Registry Trainer Program now addresses this with a “Master Trainer” designation.

- **Continuation:** Work with the National Child Care Information Center and the National Registry Alliance toward common requirements and articulation among states of the Registry Lattice
• Submitted requested Core Body of Knowledge, and Oregon Registry Steps to the National Registry Alliance. Participated in initial work with TNRA to establish commonalities.
• Oregon Partners have attended federal Region X meetings and participated on conference calls to discuss common definitions and articulation possibilities.

2. QUALIFICATIONS AND CREDENTIALS

A. Pre-service requirements.

• Implementing: Child care licensing regulations  
  Minimal Requirements exist for family child providers and center based care providers and administrators and provide a baseline for children’s health and safety.

• Implementing: Public School regulations  
  Requirements exist for K-3 teachers

• Implementing: Early Childhood Special Education  
  Requirements exist for EI/SE teachers

• Implementing: Head Start Performance Standards regarding staff  
  Requirements exist for Head Start staff

< Continuation:  Contact CCD, DHS, ODE, and DHHS to receive and review above mentioned professional development regulations/requirements. (PATT #5.1)
  • Joint meetings were held to review requirements.
  • Add any new family friend and neighbor care rules to review.
  • Joint meetings will continue as needed.

< Completed:  Meet with agencies to go over results of review, look at any disparities, suggest actions etc. (PATT #5.1)
  • Developed a crosswalk for Oregon Registry, CCD licensing standards and CDA credential requirements.
  • Efforts will continue to ensure appropriate alignment to or variation from the Oregon Registry.

B. Continuing education requirements

• Implementing Child care licensing regulations  
  Minimal Requirements exist for family child providers and center based care providers and administrators and provide a baseline for children’s health and safety

• Implementing Public School regulations  
  Requirements exist for K-3 teachers

• Implementing Early Childhood Special Education  
  Requirements exist for EI/SE teachers

• Implementing Head Start Performance Standards regarding staff  
  Requirements exist for Head Start staff

< Completed:  Contact CCD, DHS, ODE, and DHHS and receive and review above mentioned professional development regulations/requirements. (PATT #5.1)
  • Joint meetings were held to review requirements.
  • Joint meetings will continue as needed to ensure consistency.
PLAN FOR CCDF SERVICES IN: OREGON
FOR THE PERIOD 10/1/09 – 9/30/11

Continuation: Review all requirements for alignment to or variation from the Oregon Registry. (PATT #5.1)
- Developed a crosswalk for Oregon Registry and CCD licensing standards.
- Efforts will continue to ensure appropriate alignment to or variation from the Oregon Registry as needed.

Continuation: Meet with agencies to go over results of review, look at any disparities, suggest actions etc. (PATT #5.1)
- Developed a crosswalk for Oregon Registry, CCD licensing standards and CDA credential requirements.
- Efforts will continue as needed to ensure appropriate alignment to or variation from the Oregon Registry.

C. Credentials
- Implementing: Director credential
  n Oregon Registry Director Credential has been developed and is currently in field test. This will be rolled out statewide in the next year.
- Implementing: Infant-Toddler credentials
  n Oregon Registry Infant-Toddler Professional Credential has been developed and is currently in field test. This will be rolled out statewide in the next year.
- Implementing: School-Age credentials
  School-Age Credential is planned for development and field testing in 2009-2010.
- Revised: Adult education credential
  CCD has developed over 60 separate hours of training in adult education, development, leadership, which formed the basis for an Adult Education Credential to be used for mentors, trainers, R&R specialists and other community leadership positions. The Oregon Registry Trainer Program has a “Master Trainer” designation that addresses this adult education specialization. This credential will most likely not be developed because of this designation.
- Implementing Certification by Board for Professional Teaching Standards
  - teacher hold state teaching credentials.
- Implementing national child care credentials/accreditation
  - OCCD has a professional relationship with NAFCC, NAEYC, and NAA (NSACA) as part of the statewide professional development scholarship supports.
  - OCCD has a professional relationship with National Council or Professional Recognition (CDA) as part of the statewide professional development scholarship supports.
  - The CDA credential is included in the Oregon Registry Steps

Partially Completed: Develop the standards for the infant toddler, adult education, school age, and director credentials within the registry regarding step, hours, and pathway
- The basic infrastructure for placement in Oregon Registry Step and Path for all credentials has been established.
- Infant-Toddler and Director Standards have been established.
- Adult education standards are part of the “Master Trainer” designation in the Oregon Registry Trainer Program so will not be pursued.
- School Age standards will be developed in the next year and will follow the established infrastructure for all credentials to fit within the Oregon Registry steps Partially Completed: Develop the outlines for accepted standards-based training sessions and
education coursework to meet the requirements of the infant toddler, school age
credentials, adult education.

- Developed 21 hours of training for school age *AfterWords: Launching Lifelong Readers from Afterschool Programs* training series and another 21 hours of training called *In the Mix: Including Schoolagers with Younger Children in Your Family Child Care* training series. Brought *Opening Doors to Inclusive Afterschool Programs* training series to Oregon with eight (8) hours of training in inclusion for school age. A social/emotional development for a school age training series, *Discovering Potentials*, has been developed and has 40 hours of training. These will become core training and education to meet future credential requirements.

**Continuation:** Work with trainers to develop training sessions that fit into the training and education outlines and standards for the infant toddler, director and school age credentials.

- Technical assistance is ongoing for trainers who are developing sessions.

**Partially completed:** Implement the piloted, evaluated, and approved Director Credential and related courses and training on a statewide basis.

- The credential is currently in field test and will be rolled out in the next year.
- A standardized series of training for directors, the *Director Certificate Training Series*, was piloted five years ago and provides on-going standardized training at an intermediate level (Set Two) for directors. The series is now available for implementation by partners statewide. The 60 hours of training provides one way to meet the training and education requirements of the Director Credential.

**Partially completed:** Pilot and evaluate the infant toddler credential and related courses and training.

- The credential is currently in field test and will be rolled out in the next year.
- A standardized series of training that focuses on infants and toddlers, *First Connections: Infant & Toddler Development & Care* has been developed and provides on-going statewide standardized training at an introductory level (Set One) for caregivers of infants and toddlers. The 60 hours of training provides one way to meet the training and education requirements of the Infant Toddler Professional Credential.

**Revised:** Pilot and evaluate the adult education credential and related courses and training.

- Decision has been made by state partners to drop this credential for Oregon because of the “Master Trainer” designation and requirements that are now in place.

**Revised:** Establish a professional relationship with National Association of Child Care Providers (NACCP) regarding their professional development and credentialing system

- Accreditation systems accepted in the professional development system (Oregon Registry, Scholarship, etc.) meet criteria which have been established by the Quality Indicators Program.

**D. Pathways leading to qualifications, degrees, and credentials**

- *Implementing: Articulation agreements among levels of higher education. (PATT #7.4)*

  Articulation agreements exist between some community colleges and four-year institutions. *OCCD continues to work with high schools, community colleges and universities to articulate the professional development steps of the Oregon Registry into the high school certificate*
completion and the community college formal degree credit. Articulation agreements exist between CDA credentials and many community colleges.

- **Implementing: Training Registries**
  OCCD maintains a registry of all approved trainers for the State system. The database for approved standardized, community and master trainers is available to all online at the OCCD website. The registry also includes information about registered Sponsoring Organizations. The database includes all approved training sessions, and this information is available at the OCCD website.

- **Implementing: Credit-bearing workshops and training series (PATT #7.4)**
  Several of the standardized training curricula are being packaged and offered for college credit by approved trainers in those curricula. The Virtual Degree Project has created a statewide online degree and that facilitates the transition of child care providers from community-based training to community college credit training.

- **Implementing: Credit for prior learning (PATT #7.4)**
  Some community colleges and universities provide credit for prior learning options for students. Efforts will continue in this area.

- **Continuation:** Continue work on articulation of the Oregon Registry to high school child development programs.
  - Articulation models have been established with selected high schools.
  - Further articulation work will be done by the Oregon Department of Education to work with all high schools offering child development programs.

- **Continuation:** Continue work on articulation of the Oregon Registry and the CDA to community colleges.
  - The Virtual Degree Project will continue to facilitate the articulation of Step 7 of the Oregon Registry and the CDA to community college credits. 14 of 17 Oregon community colleges now accept Step 7 for college credit in early childhood education or as electives for that discipline.

- **Continuation:** Disseminate (website, brochures, etc) existing approved, standardized, and certified trainer information to broad childhood care and education partners so Oregon Registry standards-based trainers are used.
  - Developed complete database on standardized, community and master trainers, contact information, training session approval and have made available on OCCD website.
  - In process of establishing standardized curricula page on website.
  - Efforts will continue to maintain this information and update as necessary.

- **Continuation:** Outreach was conducted to all targeted populations and will continue as needed.

- **Continuation:** Work with corporate child care programs, tribal child care programs, and Head Start programs to encourage inclusion of trainers and training sessions into the Oregon Registry Trainer Program.

- **Continuation:** Work with community college sites that are connecting Oregon Registry standards-based training sessions to college credit to disseminate the information broadly through the community college and university system.
• Currently offer an option for participants enrolled in the Director Certificate Training Series to enroll in undergraduate or graduate courses to receive 6 credits from Portland State University as they are taking the training series.
• Will work with Portland State University to establish a credit option for participation in training of trainer sessions.

Continuation: Continue work on the Virtual Degree Project to establish a statewide on-line degree and to articulate the Oregon Registry Step 7 to community college credit as part of this project.

3. QUALITY ASSURANCES

A. Approval and Evaluation

• Implementing: Trainer approval (standards and registries and database).
  An Oregon Registry Trainer Program is established with trainer standards, review, approval, database, and registry to increase provider knowledge through certified trainers with knowledge of and adherence to the standards established in the Core Body of Knowledge and the Oregon Registry Steps.

• Implementing: Training approval (standards are linked to core knowledge/adult learning).
  An Oregon Registry Trainer Program is established with training session standards, review, approval, database, and registry to increase knowledge through certified training session that adhere to the standards established in the Core Body of Knowledge and the Oregon Registry Steps.

• Implementing: Evaluation Processes: Built into each element and/or component
  o Oregon has established a state infrastructure plan with strategies, outcomes and benchmarks regarding childhood care and education services (PATT).
  o The Training Quality Committee (TQC) has established an evaluation process for the major quality and professional development activities including the Oregon Registry, and the Oregon Registry Trainer Program.
  o Each Oregon Registry Trainer Program standardized, community, master and training of trainers session includes a participant evaluation component. These evaluations follow an objectives-based format connected to the Core Body of Knowledge standards. The procedures still need to be developed for consistency in implementation.
  o The Oregon Research Partnership and the Oregon Commission on Children and Families are developing a Quality Compensation Initiative evaluation tool.
  o The statewide mentoring program has an evaluation component.
  o The Oregon Child Care Research Partnership has developed structural indicators for Quality of Care, the Quality Indicators. The Quality Indicators program is being rolled out for center based care across Oregon and licensing specialists are implementing it. Family Child Care Quality Indicators is in development.

Continuation: Recruit Oregon Registry Trainers from cultural and linguistic groups representative of childhood are and education providers in all regions of the state

• Trainer recruitment process between Center and OCCRRN includes review of trainer languages and locations. Special outreach efforts are used to recruit trainers who can train in the essential languages Spanish, Russian, Vietnamese, and Chinese.
Partially completed: Promote the development of Oregon Registry Trainer Program standards-based training sessions in all core knowledge categories at all steps of the Oregon Registry in core languages in all regions of the state

- A training matrix has been established by training gaps subcommittee of the TQC to review language, core knowledge category, age and settings
- Two state-level committees of partners, the Training Gaps Subcommittee and the Training Review Subcommittee are charged with these tasks.

Continuation: Develop state level and program level evaluation process and outcomes for all implemented components of the professional development system

- State logic model developed and transformed into PATT to establish system accountability measures and process. This tool is used to evaluate progress yearly.

Completed: Compile and report on evaluation data from the Oregon Registry Trainer program training sessions.

Completed: Continue to work with the Oregon Child Care Resource and Referral Network to evaluate the Mentoring Program Standards.

- Mentor standards are in place.

Continuation: Continue to work with the Quality Indicators program to provide data and information from the Oregon Registry Enrollment through Step 12 regarding provider professional development.

- Initial steps taken to establish a state level training and education database that would provide documented verified data to identified partners and programs
- A planning and process committee is meeting to establish business rules to guide the development of the warehouse.

B. Oregon has included a Research component

- Implementing: The Oregon Child Care Research Partnership has conducted research in many areas including:
  - Structural Indicators of Quality
  - Market Rate Survey Methodology
  - Inclusion of Parents in Policy-Making
  - Estimating Supply Methodology
  - Duration of Family Participation in Subsidy Programs
  - Quality from a Parent’s Point of View
  - Effective Investments in child Care and Early Education Literature Review

Completed: State logic model developed and transformed into PATT to establish system accountability measures and process for all implemented components of the professional development system.

Continuation: The Oregon Registry maintains awareness of and works to follow national registry standards established through The National Registry Alliance

Continuation: Continue to work with the Quality Indicators program to review data from the Oregon Registry Program regarding provider professional development.

- Initial steps taken to establish a state level training and education warehouse that would provide documented verified data to identified partners and programs. A planning and
A process group has been established to guide this development. This will allow more efficient access to data.

C. Oregon has included a Quality Practices component

All items in this section were Revised:

- Completed a planning document *Quality Assurance Standards for Oregon’s Childhood Care and Education System* listing a variety of Quality Program Standards and tools for assessment, and removed focus from single program assessment tool.
- Moved focus to accreditation systems which are a specific part of the Quality Indicators program and are also supported by scholarship funds.
- A Program Quality workgroup has been established to develop criteria linked to the Quality Indicators program that would be used to determine “partner ready” (such as Head Start and/or Early Childhood Special Education) programs that would be eligible to receive monetary rewards. These programs would be at a level of quality that would be commensurate to other partner agencies requirements for quality.

4. ACCESS AND OUTREACH

A. Online database of training and education opportunities (*PATT #2.5, 2.6, 5.4*)

- **Implementing: Training calendars**
  The Child Care Training Calendar is on-line and lists all classroom format training sessions posted by state-supported resource & referral programs by core knowledge category, Sets of knowledge, location, and date. Plans are underway to develop policies to allow certified Community and Master Trainers and all registered Sponsoring Organizations to post their training sessions on the training calendar. Plans are also being made to offer opportunities for the above trainers and organizations to post distance learning opportunities. The CCR&R’s have listings and calendars of training sessions offered in their areas. OAEYC also has listings and calendars of state professional development activities.

- **Implementing: Directory of college degree programs**
  Community College and Workforce Development has information regarding degree programs at the various community colleges.

- **Implementing: Training registries**
  CCD maintains registries of all approved standards-based Oregon Registry training sessions. A complete database of certified standardized, community and master trainers, contact information, and training session status made available on OCCD website.

- **Implementing: Complete database on Sponsoring Organizations as training partners in professional development system developed and made available on the OCCD website.**

- **Completed: Work with designated partners to develop the training calendar/clearinghouse component of the professional development system linked to the Oregon Registry and the Oregon Registry Trainer Program.**
  - A training calendar is available on-line for all CCR&R training sessions and all training sessions indicate relationship to Core Knowledge Categories and Sets of Knowledge.

- **Completed: Promote the established professional development partners and training and education activities through the state professional development display unit.**
  - A display was created, updated, and shown at variety of venues. This will continue to be used and updated as necessary.
Completed: Disseminate (website, brochures, etc) existing approved, standardized, and certified training session information to broad childhood care and education partners so Oregon Registry standards-based training sessions are known.
- Developed complete database on standardized, community and master trainers, contact information, training session status, and standardized curricula and made available on the OCCD website.

5. CAREER AND PROFESSIONAL DEVELOPMENT

A. Career development advising (PATT #2.5, 2.6, 5.4)
- Implementing: Career development advising
  Mentors provide career development advising as part of working on mentee professional goals. Mentors received introductory training in their role as career counselor. The role of the mentors will be more focused in the next two years with the outcome being “increased professional attitude as evidenced by increase in numbers of providers participating on the Oregon Registry, increased numbers participating on the Oregon Registry at Step 3 or above, increased movement to higher steps on the Oregon Registry”.
- Implementing: Mentoring and coaching
  A statewide mentoring program has been established for recognized professionals to provide guidance and support to those new to the field who want to work on professional goals. The Child Care Health & Mental Health Consultation Project has been institutionalized and is a program that is in process of being rolled out across Oregon. It provides training and consultation on health-related topics defined broadly. Work has been done to include mentoring/coaching components to several of the standardized curricula.
- Implementing: Peer support groups
  OAEYC, OACCD, PRO and OFCCN provide on-going support and development of their membership. Other models for peer support exist in Oregon. Some examples include the Washington County CCR & R Network for family child care providers, Clackamas County CCR & R support group for inclusion.
- Implementing: Leadership development
  OCCD promotes leadership development through the specialized trainings and supports established in the mentoring program. OAEYC sponsored a “Growing the Profession” Training Series.

Completed: Evaluate, review, and revise the Mentor standards and maintain consistency with the Oregon Registry, and the Oregon Registry trainer Program.
- Review and revision was completed by the Professional Development Standards Subcommittee of the TQC.

Continuation: Work with established health links and mental health links projects to include specialized trainers and specialized training sessions in the Oregon Registry Trainer Program.

Continuation: Work with National Council for Professional Recognition to develop and provide training for CDA advisors to increase the availability of CDA advisors in all cultural, linguistic, regional, and child care settings.

Continuation: Develop a database for CDA advisors in Oregon.
Continuation: Continue to develop and approve specialized adult education training sessions appropriate for mentors, resource and referral specialists, and other community leaders in mentoring, coaching, career counseling and other supportive systems.

Continuation: Work with the Child Care Division and the Oregon Child Care Resource and Referral network to replicate the professional development model of family child care networks.

Continuation: Work with professional organizations to incorporate information about Oregon’s professional development system and core programs of the Oregon Registry and Oregon Registry Trainer Program into membership activities, conferences and training events.
- All primary professional conferences, activities and events of registered Sponsoring Organizations include information about core knowledge categories and Sets of knowledge.

Completed: Develop a model for including on-site training/coaching as a follow-up to established state standardized training sessions.
- Model of on site mentoring as a follow up to delivered training has been developed for BBSED, Early Words, and Early Brain Development through OCCD and the Oregon Community Foundation Ready to Learn mentoring program.
- Model of community support as a follow up to specialized training in working with children with special needs has been developed for The Partners for Inclusive Child Care training series TRAC.

Completed: Pilot the on-site training and coaching model for selected standardized training sessions
- Model of on site mentoring as a follow up to delivered training has been developed for BBSED, Early Words, and Early Brain Development through OCCD and the Oregon Community Foundation Ready To Learn mentoring program.

Continuation: Work with the Oregon Child Care Resource and Referral network mentor program to replicate the model of on site mentoring as a follow up to delivered training as developed through the Center for BBSED, Early Words, and Early Brain Development and other standardized training curricula.
- Mentoring activities have been developed for several standardized training curricula. Mentoring activities will be developed for other standardized training curricula.

B. Multiple professional development delivery methods (PATT #2.5, 2.6, 5.4)
- Implementing:
  - There are coordinated statewide basic informational sessions such as Overviews and Food Handlers which is offered on-line.
  - There are coordinated statewide training initiatives offered on-site:
    - Child Care Health & Safety (PATT 4.4)
    - Recognizing & Reporting Child Abuse & Neglect
    - Building Blocks of Social & Emotional Development (PATT 4.4)
    - First Connections: Infant & Toddler Development & Care
    - In the Mix: School-Age Children in Family Child Care
    - Starting Points
  - There are additional standardized curricula, developed through other training initiatives, offered on-site, that meet the Oregon Registry Trainer Program standards:
- Early Words: Language & Literacy, Series 1 and 2
- Early Brain Development Research and Implications
- Director Certificate Training Series
- Is It Ethical? Solving Ethical Questions in Childhood Care & Education
- Discovering & Using the ITERS and FCCRS
- AfterWords: Launching Lifelong Readers from After-School Programs
- Opening Doors to Inclusive Child Care (PATT 4.4)
- Teaching Research Assistance to Child Care Providers serving young children with disabilities (PATT 4.4)
- Every Child Ready to Read @ Your Library
- Proteger a los Ninos es Neuestro Deber!

There are other standardized curricula in development or stages including:
- Social Emotional Development for School Age (PATT 4.4), Certified Family Child Care Management Series, Small Business Training focused on Setting Fees
- Additionally, Child Care Health & Safety is being revised and will most likely include a combination of on-site and distance learning formats.

Oregon’s training delivery system includes the child care resource & referral programs, professional membership organizations, Head Start programs, private for-profit and non-profit child care programs, unions, and other state agencies. Presently the vast majority of the training offered by these organizations is on-site formats.

There is also a cadre of certified Oregon Registry Trainer Program trainers that work both independently and within the established delivery systems. Most training offered by these trainers is on-site delivery format. A few of these trainers are offering a distance learning format.

There are also registered Sponsoring Organizations in the system that are offering training. Most of these offerings are on-site delivery but a few of the Sponsoring Organizations offer distance learning opportunities.

- Distance learning
  - Criteria have been developed for distance learning delivery.
  - The Articulation Subcommittee is working with community colleges to establish a statewide on-line AA degree program.
  - Continue work on the Virtual Degree Project to establish a statewide on-line degree.
  - and to articulate the Oregon Registry Step 7 to community college credit.
  - Some community colleges offer some ECE courses as on-line options.
  - Some trainers and Sponsoring Organizations offer distance learning opportunities.

- On-site delivery
  - Many community colleges have provided on-site delivery of classes to Head Start programs.
  - Many community based trainings are offered on-site by certified trainers and registered Sponsoring Organizations and other trainers and training organizations.

_completed:_ Establish a training matrix to review language, core knowledge category, age and setting.

- This was established by Training Gaps Subcommittee of the TQC and will be revised as appropriate.

_completed:_ Revise AfterWords curriculum to change model of delivery and conduct training of trainers.

- AfterWords curriculum was revised.
Training of field test trainers was conducted.
Implementation data will be collected, summarized and analyzed.
AfterWords curriculum will be adjusted as necessary and another training of trainers will be conducted in the end of 2009 and beginning if 2010.

**Revise/Continuation:** Work with state partners, Master Trainers and Sponsoring Organizations to incorporate other standardized curricula into the Oregon Registry Trainer Program, such as Dollars and Sense and the Creating a Climate for Growth.
- Currently developing a new curriculum on small business with a focus on setting fees, which will include concepts from Dollars and Sense.
- Developing a Certified Family Child Care management training series that will be modeled after the Director Certificate Training Series.

**Completed:** Work with the Oregon Child Care Resource and Referral Network and the Child Care Division to determine the need for and provide additional training of trainers in any of the standardized curricula.
- Two RRCAN training of trainers was provided in 2008-2009.
- One AfterWords training of trainers was provided in 2009.
- Two more training of trainers will be conducted in 2009 and 2010.

**Completed:** Conduct survey of trainers.
- A survey was completed. Data has been summarized and currently is being analyzed. Professional Development Standards Subcommittee and Training Quality Committee are reviewing the summary and recommendations will be made by the end of 2009.

**Continuation:** Conduct annual evaluations of standardized curricula using data collected through the Resource and Referral system. The processes for conducting these evaluations still need to be defined and implemented.

**Continuation:** Determine necessary translations for standardized curricula.
- Training Gaps Subcommittee of the TQC addresses this in their work plan.

**Continuation:** Work with trainers to develop training sessions that fit into the training and education outlines and standards for the infant toddler and school age credentials.
- This is ongoing work to provide support to Community and Master Trainers to develop trainings that may be used for the above credentials.

**Continuation:** Implement the piloted, evaluated, and approved director credential, infant toddler credential and related courses and training on a statewide basis.
- Credentials are developed; field test participants have been identified and oriented. The field test will be completed by the end of 2009.

**Continuation:** Implement the established standardized training sessions for delivery through CCR&R system.

6. **PUBLIC ENGAGEMENT EFFORTS AND INITIATIVES**
- **Implemented:** Oregon has implemented statewide campaigns with consistent messages and identifiable materials and will continue as needed.
- **Oregon Registry Campaign** – Exerted efforts will be instituted over the next two years to increase number of providers participating in the Oregon Registry. Focused technical assistance from CCR&R specialists and targeted marketing strategies from OCCD will lead this effort.

- **Quality Care Initiative** – A strategic investments workgroup is meeting to establish a private/public pool of money that can be used to provide incentives for individual providers to increase professionalism and for programs to increase quality. Criteria are being established for both.

- **Quality Indicators Program** – A structural indicators tool and report is being rolled out and required of all licensed child care centers and being administered through and by the CCD licensing staff. These reports will be available to the public so that parents can see how centers in their community compare across the indicators.

**Continuation:** Develop an information campaign regarding the Oregon Registry, definitions of the Core Knowledge Categories in the Core Body of Knowledge and the links between acquisition of knowledge and quality professional practices. This will be a coordinated effort between OCCD and the CCR&R Network.

### 7. FUNDING

**A. Scholarships for professional development, courses, degrees**

- Oregon Community Foundation, through OCCD, provides scholarships for family child care and center based care providers working toward professional goals such as: Oregon Registry steps and credentials, CDA credentials, program accreditation (NAFCC, NAA/NSACA, NAEYC), credit coursework, and degree completion. Scholarships pay for tuition, assessments and accreditation fees, application fees, etc.

- Oregon Community Foundation, through the Community College Consortium, provides scholarships for ECE degree seeking students for tuition and other related costs.

**Continuation:** Continue working with Oregon Community Foundation to provide professional development scholarships linked to the Oregon Registry Steps and the Oregon Registry program.

**Continuation:** Maintain standards regarding acceptable professional development activities and acceptable training sessions and courses within scholarship programs

- Scholarship expanded to include more professional development opportunities and venues related to end goals in Oregon registry steps

**Completed:** Work with partners to make the best use of available scholarship dollars and prevent duplication of effort

- Coordinate scholarship with local initiatives and Community College scholarships through the established Statewide Scholarship Advisory Committee.

**B. Compensation/retention initiatives:**

- Education and Quality Investments Partnership, Strategic Investments workgroup, is designing a strategy to establish a private/public pool of money that can be used to provide incentives for individual providers to increase professionalism and for programs to increase quality. Criteria are being established for both.

- Training Quality Committee has a subcommittee that works on work force supply and retention issues
C. Program quality awards
   • Implementing Tiered reimbursement
     o Department of Human Services, Children Adults and Families maintains a tiered reimbursement system to subsidy providers
     o The DHS tiered reimbursement system (Enhanced Rate Program) is incorporated within the Oregon Registry Steps.
     o Program Quality workgroup is establishing criteria to provide incentives for quality improvements.

   ≤ Continuation: Continue to work with DHS to promote the Enhanced Rate Program and incorporate the Enhanced Rate Program within the structure of the Oregon Registry Steps.
     • Enhanced Rate Program is integrated within the Oregon Registry Steps.
     • Continue to improve marketing efforts.

   ≤ Revised: Following the end of the Oregon Cares evaluation, work with OCCF and partners to develop a consistent best practice model and plan for implementation of a statewide Oregon Cares.
     • This is being revised and will be shifted to the work of the Education and Quality Improvement Partnerships workgroup to establish an incentives program.

   ≤ Continuation: Work with OCCF and CCD to assure the Core Body of Knowledge, Oregon Registry Steps, Oregon Registry, and Oregon Registry Trainer Program are reflected in any standards, process, and regulation promulgated for Oregon CARES or CARES-like programs.
ATTACHMENT 5.2.6

Required Orientations for DHS Family, Friend and Neighbor (FFN) Child Care Providers

Beginning July 1, 2010 all license-exempt child care providers listed with DHS will be required to attend an Orientation about the DHS Child Care program within 90 days of being approved for payment.

All orientations will be provided through the Child Care Resource & Referral (CCR&R) system. Local CCR&R’s have been offering voluntary orientations since January 2007.

After June 30, 2010, only new providers will be required to take the Orientation. This includes all license-exempt provider types (FAM, QFM, NQC, and QEC). For license-exempt Centers (NQC and QEC) at least one staff person must attend.

DHS listed, license-exempt providers who are not in approved status and have not received payment for a year or more after June 30, 2010, must attend an Orientation within 90 days of being re-approved.

At least one Orientation is required to be offered in each CCR&R service delivery area every quarter and must be provided at minimal or no cost to the child care provider. An on-line training alternative is also being developed.

The Orientation contains, but is not limited to, information about the following:

a. DHS Listings, vouchers and payments;
b. Child care provider rights and responsibilities;
c. Enhanced rate training options;
d. Food program resources available through the USDA;
e. Other resources available to child care providers.

DHS met with partners and stakeholders, including providers, to refine the Orientation, determine procedures for non-compliance and determine next steps.

The Child Care Provider Listing form (DHS 7494) was revised to include information about the Orientation requirement for license-exempt providers.

System notices are sent by Direct Pay Unit (DPU) to new providers when they submit a listing form to apply to be a DHS listed provider. The DPU will track the Orientation completion date on the provider’s master screen.

Once procedures were finalized, an Information Memorandum was sent to DHS field staff and forwarded to the Oregon Child Care Resource and Referral Network (OCCRRN) for distribution to the local CCR&Rs.