

OMB Control No: 0970-0114

Expiration date: XXXX

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

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

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



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

for

**State/Territory Oregon**

**FFY 2019–2021**

This Plan describes the Child Care and Development Fund program to be administered by the State or Territory for the period from 10/1/2018 to 9/30/2021, as provided for in the applicable statutes and regulations. The Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

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

Table of Contents

**Introduction and How to Approach Plan Development** .....

**1 Define CCDF Leadership and Coordination With Relevant Systems** .....

1.1 CCDF Leadership .....

1.2 CCDF Policy Decision Authority .....

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

1.4 Coordination With Partners To Expand Accessibility and Continuity of Care

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

1.6 Public-Private Partnerships .....

1.7 Coordination With Local or Regional Child Care Resource and Referral Systems .....

1.8 Disaster Preparedness and Response Plan.....

**2 Promote Family Engagement Through Outreach and Consumer Education**

2.1 Outreach to Families With Limited English Proficiency and Persons With Disabilities .....

2.2 Parental Complaint Process.....

2.3 Consumer Education Website .....

2.4 National Website and Hotline .....

2.5 Additional Consumer and Provider Education .....

2.6 Procedures for Providing Information on Developmental Screenings.....

2.7 Consumer Statement for Parents Receiving CCDF Funds .....

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

3.1 Eligible Children and Families.....

3.2 Increasing Access for Vulnerable Children and Families .....

3.3 Protection for Working Families..... **Error! Bookmark not defined.**

3.4 Family Contribution to Payments..... **Error! Bookmark not defined.**

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

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

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

4.3 Setting Payment Rates..... **Error! Bookmark not defined.**

4.4 Summary of Facts Used To Determine That Payment Rates Are Sufficient To Ensure Equal Access .....

4.5 Payment Practices and the Timeliness of Payments..... **Error! Bookmark not defined.**

4.6 Supply-Building Strategies To Meet the Needs of Certain Populations**Error! Bookmark not defined.**

**5 Establish Standards and Monitoring Processes To Ensure the Health and Safety of Child Care Settings** .....

5.1 Licensing Requirements..... **Error! Bookmark not defined.**

5.2 Health and Safety Standards and Requirements for CCDF Providers**Error! Bookmark not defined.**

5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers**Error! Bookmark not defined.**

5.4 Criminal Background Checks .....

**6 Recruit and Retain a Qualified and Effective Child Care Workforce**..... **Error! Bookmark not defined.**

6.1 Professional Development Framework .....

6.2 Training and Professional Development Requirements..... **Error! Bookmark not defined.**

6.3 Early Learning and Developmental Guidelines..... **Error! Bookmark not defined.**

- 7 Support Continuous Quality Improvement.....**Error! Bookmark not defined.
  - 7.1 Quality Activities Needs Assessment for Child Care Services..... **Error! Bookmark not defined.**
  - 7.2 Use of Quality Funds..... **Error! Bookmark not defined.**
  - 7.3 Supporting Training and Professional Development of the Child Care Workforce With  
CCDF Quality Funds ..... **Error! Bookmark not defined.**
  - 7.4 Quality Rating and Improvement System..... **Error! Bookmark not defined.**
  - 7.5 Improving the Supply and Quality of Child Care Programs and Services for Infants and  
Toddlers ..... **Error! Bookmark not defined.**
  - 7.6 Child Care Resource and Referral ..... **Error! Bookmark not defined.**
  - 7.7 Facilitating Compliance With State Standards ..... **Error! Bookmark not defined.**
  - 7.8 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and  
Services ..... **Error! Bookmark not defined.**
  - 7.9 Accreditation Support ..... **Error! Bookmark not defined.**
  - 7.10 Program Standards ..... **Error! Bookmark not defined.**
  - 7.11 Other Quality Improvement Activities ..... **Error! Bookmark not defined.**
  
- 8 Ensure Grantee Program Integrity and Accountability.....**Error! Bookmark not defined.
  - 8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity**Error! Bookmark not defined.**

## *Introduction and How to Approach Plan Development*

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

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

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

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

### *CCDF Plan Submission*

States and territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions on the ACF-118 site could be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities. (See <http://www.section508.gov/> for more information.)

## DRAFT OREGON CCDF STATE PLAN

---

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

# 1 Define CCDF Leadership and Coordination With Relevant Systems

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

## 1.1 CCDF Leadership

The Governor of a state or territory must designate an agency (which may be an appropriate collaborative agency) or establish a joint interagency office to represent the state or territory as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto (658D; 658E(c)(1)).

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

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

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

Name of Lead Agency: Oregon Department of Education, Early Learning Division

Street Address: 700 Summer St. NE, Suite 350

City: Salem

State: Oregon

ZIP Code: 97301

Web Address for Lead Agency: <https://oregonearlylearning.com>

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

Lead Agency Official First Name: Miriam

Lead Agency Official Last Name: Calderon

Title: Early Learning System Director

Phone Number: 503-947-0080

Email Address: [miriam.calderon@ode.state.or.us](mailto:miriam.calderon@ode.state.or.us)

### 1.1.2 Who is the CCDF Administrator?

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

one designated contact with equal or shared responsibility for administering the CCDF program, please identify the Co-Administrator or the person with administrative responsibilities and include his or her contact information.

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Dawn

CCDF Administrator Last Name: Woods

Title of the CCDF Administrator: Child Care Director

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

Street Address: 700 Summer St NE, Suite 350

City: Salem

State: OR

ZIP Code: 97301

Phone Number: 503-947-1418

Email Address: dawn.a.woods@ode.state.or.us

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

CCDF Co-Administrator First Name: Kelli

CCDF Co-Administrator Last Name: Walker

Title of the CCDF Co-Administrator: Child Care Policy Manager

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

Street Address: 700 Summer St NE, Suite 350

City: Salem

State: OR

ZIP Code: 97301

Phone Number: 503-930-9776

Email Address: kelli.d.walker@ode.state.or.us

Description of the role of the Co-Administrator: **State Plan Development, CCDF Implementation, Subsidy Contract Manager**

## 1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or public or private local agencies as long as it retains overall responsibility for the administration of the program (658D(b)). Administrative and implementation responsibilities undertaken by agencies other than the Lead Agency must be governed by written agreements that specify the mutual roles and responsibilities of the Lead Agency and other agencies in meeting the program requirements.

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

- All program rules and policies are set or established at the state or territory level.
- Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.
  1. Eligibility rules and policies (e.g., income limits) are set by the:
    - State or territory
    - Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
    - Other. Describe: .
  2. Sliding-fee scale is set by the:
    - State or territory
    - Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
    - Other. Describe: .
  3. Payment rates are set by the:
    - State or territory
    - Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
    - Other. Describe: .
  4. Other. List other program rules and policies and describe (e.g., quality rating and improvement systems [QRIS], payment practices):

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

a) Who conducts eligibility determinations?

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

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

CCDF Lead Agency

TANF agency

Eligibility works may assist parents in locating child care and refer parents to a child care referral specialist at 211 services.

Other state or territory agency

Local government agencies, such as county welfare or social services departments

Child care resource and referral agencies

Community-based organizations

Other.

c) Who issues payments?

CCDF Lead Agency

TANF agency

Other state or territory agency.

Local government agencies, such as county welfare or social services departments.

Child care resource and referral agencies.

Community-based organizations.

Other.

1.2.3 What processes will the Lead Agency use to monitor administrative and implementation responsibilities performed by agencies other than the Lead Agency as indicated above, such as through written agreements or monitoring and auditing processes (98.11(a)(3))? Describe those processes and any indicators or measures used to assess performance. **The Lead Agency monitors administration and implementation through a written interagency agreement with the Department of Human Services. Performance is assessed by measuring completion of key activities to reach goals and deliverables. The Secretary of State performs independent audits on Child Care and Development Fund expenditures, testing eligibility determination, and other federally required audit procedures.**

1.2.4 Lead Agencies must assure that, to the extent practicable and appropriate, any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop must be made available on request to other public agencies, including public agencies in other States, for their use in administering child care or related programs (98.15(a)(11)). Assure by describing how the Lead Agency makes child care information systems available to public agencies in other states to the extent practicable and appropriate. **Language in the contract for the entity responsible for developing and maintaining the information system for child care facilities includes the following language:**

**Contractor shall not charge a development, licensing or user fee to any state, federal, or local governmental entity when distributing copies of, and transferring or sublicensing rights to, the Work Product to such entity. Contractor may recover costs of transferring or making such Work Product available from the receiving entity. For purposes of Section 8.5, Contractor's**

**exercise of its right to transfer or sublicense according to this Section 8.8 will be considered an activity performed by Contractor under this Contract.**

**Source code for any or all material part of the Deposited Programs is generally made publicly available by Contractor, with or without additional cost, to other users of comparable software;**

- 1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally-identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)). Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally-identifiable information. **The Oregon Department of Education Agency Policy 581-101 outlines agency and employee responsibility for use and disclosure of confidential information.**  
<https://www.ode.state.or.us/services/hr/pdfs/581-101.pdf>

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

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

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

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

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

- a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments.

**The regional Early Learning Hubs are the state's entity for bringing together stakeholders including local governments, to implement early learning goals. Several hubs are part of local government (county commissions) and others have local government representatives on their governance councils. The Hubs actively consult on identifying community needs and prioritizing resources and working with partners to achieve positive outcomes for children.**

- b) Describe how the Lead Agency consulted with the State Advisory Council. **The Early Learning Council is a 19 member board appointed by the Governor, made up of a citizen from each congressional district and at-large membership in compliance with the federal Head Start Act. The Council includes the Directors of the Oregon Health Authority and Department of Human Services Self Sufficiency programs. These agencies are responsible for implementing programs related to early care and education such as Maternal and Child Home Visitation, Medicaid, developmental screening, public health, child welfare, Temporary Assistance for Needy Families, and refugee and immigrant services.**

**The Early Learning Council is the state advisory body, makes Early Learning System policy decisions and has rule-making authority for the Early Learning Division. The Childhood Care and Education Committee of the Early Learning Council advises the council on policy issues, challenges and priorities related to affordable, quality child care and early education programs in Oregon. The Childhood Care and Education Committee reviews all Lead Agency rules leading to promulgation, and provide input on policy decisions.**

**The Early Learning Council is engaged in consultation during the state plan development and throughout the plan period. Presentations and policy discussions on relevant topics inform the final plan.**

- c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. **The Early Learning Division and the Department of Human Services are subject to Oregon Statute 182.162. The statute defines and guides the government to government relationship that exists between Oregon's nine recognized tribes and the State of Oregon. The education cluster focuses on areas of partnership that expand along the education spectrum from early childhood to college and the health services cluster includes human services and child care subsidy. The Early Learning Division and the Department of Human Services take an active participation role in both government to government quarterly meetings.**

**The Lead Agency collaborates regularly with all CCDF Tribal Administrators. No formal consultation (as outlined in statute) was identified during the development of the State Plan. Presentations on collaboration activities and efforts to jointly meet CCDBG and CCDF rules were presented at both Government to Government clusters in March 2018.**

**The Early Learning Hubs collaborate with each of the federally recognized tribes in their service area and get input from tribal communities and Native American populations on local early learning services.**

- d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan. **A number of entities provide ongoing consultation on the CCDF State Plan. The Early Learning Partner Forum is an ad hoc group whose role is to provide input and advise the Early Learning Division on child care policy related to the CCDF state plan. The Early Learning Partner Forum provided general consultation on the state plan through engagement over the plan period. This included child care licensing rules, SPARK – Oregon's Quality Rating and Improvement System, subsidy policy, emergency preparedness, and professional development. Membership includes representation from**

**child care resource and referral, child care unions, philanthropic organizations, Oregon Association for the Education of Young Children, Oregon Association of Early Learning Professionals, Oregon Center for Career Development, Oregon Afterschool for Kids, Head Start, Early Head Start, Child and Adult Care Food Program, Oregon Health Authority, Oregon Library System, higher education, child care unions and child care providers.**

- 1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)). *Reminder:* Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:
- a) Date(s) of notice of a public hearing. **May 25, 2018** *Reminder:* Must be at least 20 calendar days prior to the date of the public hearing.
  - b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include specific website links if used to provide notice. **Notifications are published on the Early Learning Division website which is accessible for people with disabilities and emailed to state contacts for public meeting notices. Add link here after hearing**
  - c) Date(s) of the public hearing(s). **June 13, 2018.** *Reminder:* Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan.
  - d) Hearing site(s) or method(s), including how geographic regions of the state or territory were addressed. **The hearing was held in Salem at the Early Learning Division and was available via livestream for accessibility and to accommodate the entire geographic area of the state.**
  - e) How the content of the Plan was made available to the public in advance of the public hearing(s). **The Plan was posted on the Early Learning Division website on April 20, 2018. Notification was electronically broadcasted to early care and education stakeholders.**
  - f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? **The public has the ability to comment on the Plan via website and through multiple engagement activities. All information is reviewed by policy staff and recommendations for accepting or considering changes are moved to the management team for decision. As a result of public input, many corrections and minor changes are made to the State Plan. Information provided by the public related to major policy considerations is reviewed by the Child Care Policy Team as part of the internal policy development process. A majority of the information and feedback from the public is related to desired changes to current state policies. The comments will be used to inform future policy decisions.**
- 1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)).

- a) Provide the website link to where the plan, any plan amendments, and/or waivers are available. <https://oregonearlylearning.com/administration/state-plans/#versions>
- b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe the strategies below, including any relevant website links as examples.
- Working with advisory committees. Describe: **The Early Learning Partner Forum members are notified via email of Plan amendments.**
  - Working with child care resource and referral agencies. Describe:
  - Providing translation in other languages. Describe:
  - Sharing through social media (e.g., Twitter, Facebook, Instagram, email). Describe: **The Lead Agency provides news and information on its Facebook page.**
  - Providing notification to stakeholders (e.g., provider groups, parent groups). Describe: **The Lead Agency has a comprehensive listserv of stakeholders who are provided with notifications of all public hearing and information on the state plan and amendments. This list includes provider unions, child care resource and referral programs, child care programs, Early Learning Hubs, parenting hubs, and individuals.**
  - Other. Describe:

#### 1.4 Coordination With Partners To Expand Accessibility and Continuity of Care

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

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

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

Include in the descriptions the goals of this coordination, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school; enhancing and aligning the quality of services; linking comprehensive services to children in child care settings; or developing the supply of quality care for vulnerable populations. Check who you will coordinate with and describe all that apply.

- (REQUIRED) Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns. Describe the coordination goals and process: **Representative of general purpose local government are represented on**

the Early Learning Council and also represented on the Early Learning Hub governing committees. Early Learning Hub provide system facilitation to better achieve three early learning goals:

- Convene Early Learning, K-12, social/human services, health, parents, tribal governments, and community partners to work effectively together.
  - Analyze and utilize data to target investments and facilitate community campaigns, plans, and conversations.
  - Blend and braid funding to creatively utilize resources to support regions' early childhood goals and strategies.
- (REQUIRED) State Advisory Council on Early Childhood Education and Care (or similar coordinating body) (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe the coordination goals and process: **The Early Learning Council is appointed by the Governor to guide efforts to streamline state programs and provide policy direction to meet statewide early learning goals. The council vets investments in strategically leveraged partnership to cultivate an aligned and coordinated early childhood system.**
- Does the Lead Agency have official representation and a decision-making role in the State Advisory Council (or similar coordinating body)?
- No
  - Yes
- (REQUIRED) Indian tribe(s) and/or tribal organization(s), at the option of individual tribes. Describe the coordination goals and process, including which tribe(s) was consulted: **The Department of Human Services works with all nine federally recognized tribes through the Health Services Cluster Government to Government session as well as Tribal Prevention quarterly meeting with Indian Child Welfare staff. Child care policy staff members work with regional Department of Human Services case workers and tribal CCDF representatives to share information on policy changes and coordinate linking comprehensive services.**

In addition, Department of Human Service staff members facilitate meetings between eligibility program staff and the tribes to coordinate access to child care subsidy, discuss training for tribal child care providers, and to discuss how the CCDBG Act of 2014 is changing child care policy and practices.

The Lead Agency and Tribal CCDF Administrators share several coordination goals. Among them are:

- Tribal members have access to state CCDF subsidy and state funds are used before Tribal CCDF whenever possible.
- Coordination of state and tribal emergency preparedness and recovery efforts
- Access to state systems for CCDF compliant background checks
- Increasing the supply of infant and toddler care
- Training and professional development system opportunities for all licensed and license exempt Tribal CCDF Providers.

N/A—There are no Indian tribes and/or tribal organizations in the State.

- (REQUIRED) State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool). Describe the coordination goals and process: **The Oregon Council on Developmental Disabilities, Inclusive Child Care Program provides one-on-one consultations to families of children with disabilities for the ERDC subsidy program. Child Care Resource and Referral programs in some areas of the state also provide consultations to families and child care providers to support the delivery of the program statewide. Work continues to expand accessibility and services. The coordination goals are to provide training and support to parents and child care providers for successful inclusive child care placements.**
  
- (REQUIRED) State/territory office/director for Head Start state collaboration. Describe the coordination goals and process: **The Head Start Collaboration Director is a member of the Early Learning Council and actively involved in statewide policy consideration for all child care services and alignment in the state. Extended day, comprehensive services and continuity of care are an ongoing part of the child care policy work of the division and the Early Learning Council. Other state initiatives, such as the Quality Rating and Improvement System and universal developmental screenings are contributing to quality in all child care settings by supporting quality early learning environments and practices, encouraging parent partnerships, and improving child screening and referral efforts. Additional goals are as follows:**

  - **Oregon Department of Education-Early Intervention/Early Childhood Special Education: coordination and collaboration between Head Start and EI/ECSE to support service delivery for children in Head Start.**
  - **Office of Child Care-licensing: coordination and improved communication between Head Start and the Office of Child Care re: HS standards and licensing regulations; work to streamline licensing system for HS sites.**
  - **Oregon Center for Career Development –Portland State University: coordination of the state's professional development Step Registry system and Head Start staff qualifications federal requirements; development of streamlined training tracking and reporting systems for Head Start staff in licensed sites.**
  - **Early Learning Hubs: coordination and collaboration between Head Start programs and Oregon's Early Learning Hub system.**
  - **Oregon Head Start Association: communication between Oregon Head Start Association and the Early Learning Division re: state initiatives, funding, and system development.**
  - **Oregon Department of Education Homeless Education: coordination and communication between Head Start and school district homeless education liaisons.**
  
- (REQUIRED) State agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals and process: **The State's licensing system and the Department of Human Services coordinate with state and county public health departments to provide information and assist licensed and license exempt child care facilities to meet immunization requirements. The child care licensing unit coordinates with public health on child care rules asking for guidance and feedback.**

Licensing staff meet quarterly with representatives from environmental health to share best practices on health, safety and sanitation and help guide licensing process.

Representatives from public health serve on the Emergency Preparedness and Response workgroup and are instrumental in local preparedness efforts with child care providers.

- (REQUIRED) State agency responsible for employment services/workforce development. Describe the coordination goals and process: **The Department of Human Services is the state agency responsible for the TANF JOBS program as well as the ERDC, the child care subsidy program. ERDC is an essential component for parents to successfully leaving TANF for the workforce. Individuals leaving TANF with a child care need are automatically enrolled in ERDC. On a local level, the Workforce Development Boards prioritize an integrated service delivery system and Department of Human Services coordinates availability of CCDF child care funds for adults and dislocated workers transitioning to work from TANF, unemployment and training programs.**

- (REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK). Describe the coordination goals and process: **The Early Learning Division is part of the Oregon Department of Education and has formalized a collaborative partnership that focuses on prenatal through third grade alignment (P-3). The partnership has articulated a shared vision for P-3 in Oregon which focuses on building capacity and strengthening supports for local P-3 projects throughout the state. The partnership team has developed a shared work plan that includes activities such as the development of a P-3 resource website and creating opportunities for shared professional development for providers of early learning services and K-3 teachers.**

**Oregon's Pre-kindergarten program and Preschool Promise, Oregon's mixed delivery preschool program, operate out of the Early Learning Division. Coordination goals for Preschool Promise are closely aligned with the local goals of the Early Learning Hubs, and funding for Preschool Promise is offered through nine Hub regions. Both Oregon Pre-kindergarten and Preschool Promise promote school readiness as a primary goal and the investment expands high-quality early learning opportunities for the lowest income and highest need children.**

**The state coordinates with Head Start grantees to provide wrap around child care services for full-day programs through a contracted slot program. Head Start programs providing full-day services for working families have had contracts in place for over ten years. Future contracts will be subject to funding availability and a competitive procurement process.**

- (REQUIRED) State/territory agency responsible for child care licensing. Describe the coordination goals and process: **The Early Learning Division is responsible for child care licensing. The division's executive team includes the Child Care Director and division wide**

**strategic planning, policy decisions and implementation on coordination of efforts support health and safety in early learning settings.**

- (REQUIRED) State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination goals and process: **The state coordinates with the Department of Education Child Nutrition programs as well as contractors engaged in administering the Child and Adult Care Food Program. Coordination goals focus on sharing information to maximize efforts to provide technical assistance to child care providers, coordinate communication for providers about changes to the licensing, CCDF and CACFP.**
- (REQUIRED) McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons. Describe the coordination goals and process: **The Oregon Department of Education’s State Coordinator for Homeless Education Program and the Early Learning Division co-convene a group with child care policy staff from the Department of Human Services to assess services to homeless families and develop improvement plans to enhance educational outcomes for children whose families are experiencing homelessness.**
- (REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program. Describe the coordination goals and process: **The Department of Human Services is the TANF agency. Management and line staff from the child care program at the Department of Human Services coordinate services for families transitioning from TANF for successful transition into child care.**
- (REQUIRED) Agency responsible for Medicaid and the state Children’s Health Insurance Program. Describe the coordination goals and process: **The Department of Human Services and the Oregon Health Authority are responsible for Medicaid and the state Children’s Health Insurance Program. The Oregon Health Authority is represented on the Early Learning Council as well as the Early Learning Partner Forum, an ad hoc group whose role is to provide input and advise the Early Learning Division on child care policy related to the CCDF state plan. There is also a standing joint Early Learning Council/Oregon Health Policy Board responsible for deepening coordination and integration of early learning and health policy. The goal of this coordination is to better enhance and align comprehensive services to children and families. The Early Learning Division is working with statewide Coordinated Care Organizations to identify vulnerable children and families and connect them to high quality child care and other early learning programs.**
- (REQUIRED) State/territory agency responsible for mental health. Describe the coordination goals and process: **The Oregon Health Authority is responsible for mental health. The Lead Agency coordinates with infant/child mental health staff to provide resources and technical assistance support to the child care resource and referral system. Oregon has an infant mental health endorsement to recognize and document the development of infant and family professionals across the continuum of infant toddler service providers.**

- (REQUIRED) Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Describe the coordination goals and process: **The Early Learning Division invests in funding a comprehensive child care resource and referral system including 211Info and an early childhood education training and professional development system. The Quality Improvement and Professional Development Unit in the division administer multiple contracts throughout the state with a primary goal to increase the quality of child care settings through training, professional development and coaching. To meet the needs of families seeking child care, 211info provides child care referrals and links families to comprehensive services available in their communities.**
  
- (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals and process: **The Early Learning Division/Office of Child Care has provided CCDF Discretionary funds as a match for a Charles Stewart Mott Foundation grant since 2005. Oregon ASK is a collaboration of public and private organizations and community members whose coordination goals seek to address common issues and concerns across all out-of-school time services – child care, recreation, education and youth development. The combined funds support the statewide afterschool network, Oregon ASK, which 1) convenes a quarterly stakeholder meeting for school-age program operators, 2) provides Spark and other quality improvement training to both management and front-line staff, 3) actively participates in the statewide STEM Council (science, technology, engineering, math), 4) represents and advocates for the before and after-school workforce at statewide meetings, and 5) provides educational materials to statewide and national policymakers.**
  
- (REQUIRED) Agency responsible for emergency management and response. Describe the coordination goals and process: **The State Office of Emergency Management working closely with the Public Health Division of the Oregon Health Authority, is the entity responsible for coordination of emergency preparedness and response in Oregon. The Early Learning Division coordinates with the Office of Emergency Management to improve the quality of child care services by providing guidance on the statewide early learning emergency preparedness and response plan and to coordinate efforts with local emergency management personnel to better prepare early learning programs in the event of man-made or natural disaster.**

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

- State/territory/local agencies with Early Head Start – Child Care Partnership grants. Describe: **Department of Human Services works with Head Start grantees to contract with child care providers participating in the Early Head Start Child Care partnerships to provide high quality and stable child care to infants and toddlers.**
  
- State/territory institutions for higher education, including community colleges. Describe:

- Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services. Describe:
- State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe: **The Oregon Health Authority implements the Maternal and Child Home Visiting Program and a representative serves on the Early Learning Council. The goal of the coordination is to link families to comprehensive services.**
- Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment. Describe: **Oregon Health Authority, Early Intervention, Early Childhood Special Education and the Inclusive Child Care Program coordinate with the child care resource and referral agencies to provide information and supports for developmental screening, Individuals with Disabilities Act services, and training and support for parent and providers.**
- State/territory agency responsible for child welfare. Describe: **Department of Human Services Child Welfare is responsible for child welfare services. Coordination includes referrals to CCDF subsidy programs for certain categories of families involved in protective services.**
- State/territory liaison for military child care programs. Describe:
- Provider groups or associations. Describe:
- Parent groups or organizations. Describe:
- Other. Describe:

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

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

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

1.5.1 Does the Lead Agency choose to combine funding for CCDF services for any required early childhood program (98.14(a)(3))?

No.

Yes. If yes, describe at a minimum:

- a) How you define “combine”: **Combine is defined as a Head Start or Early Head Start program accessing CCDF funds in addition to other federal funds to provide full-day, full-year child care services and wrap around services.**
- b) Which funds you will combine: **Oregon combines federal Head Start and/or Early Head Start funds with CCDF mandatory or discretionary funds.**
- c) Your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations.

**The goals of the combined funds are to:**

- **Offer full-time child care services for working families;**
  - **Improve the supply of full time high quality child care services for eligible Head Start families;**
  - **Allow families access to back-up child care services when Head Start programs are not operating;**
  - **Provide child care funding in order for Head Start federal funds to support the enhanced services needed for children and families.**
- d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level? **The Department of Human Services contracts with a limited number of Head Start and Early Head Start grantees by providing funding at a full time center child care rate for children enrolled in full day, full year programs.**
  - e) How are the funds tracked and method of oversight? **Policy and operations analysts from the Department of Human Services administer contracts with Head Start and Early Head Start, provider tracking and oversight of contract requirements to ensure outcomes are met.**

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

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

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

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

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

- If checked, identify the source of funds:
- If known, identify the estimated amount of public funds that the Lead Agency will receive: \$

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

If checked, are those funds:

- donated directly to the State?
- donated to a separate entity(ies) designated to receive private donated funds?

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

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

- State expenditures for preK programs are used to meet the CCDF matching funds requirement. If checked, provide the estimated percentage of the matching fund requirement that will be met with preK expenditures (not to exceed 30 percent): **30%**
- If the percentage is more than 10 percent of the matching fund requirement, describe how the State will coordinate its preK and child care services: **The Lead Agency licenses state funded preK programs. All programs and staff are connected to Oregon's career**

**lattice system through the Oregon Registry that documents career pathway achievements for all early learning professionals, and serves as a registry for tracking early educator professional development activities in the core knowledge categories.**

- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: **Approximately \$10.9 million**

Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents: **The Department of Human Services holds contracts with preK programs to provide wrap around care for families who need child care outside of the normal preK hours. All preK programs work closely with enrolled families and the Department of Human Services to provide child care subsidy when appropriate to meet the needs of each working family.**

- State expenditures for preK programs are used to meet the CCDF maintenance-of-effort requirements. If checked,

The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.55(h)(1) and 98.15(6).

No

Yes

Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents: **The Department of Human Services holds contracts with preK programs to provide wrap around care for families who need child care outside of the normal preK hours. All preK programs work closely with enrolled families and the Department of Human Services to provide child care subsidy when appropriate to meet the needs of each working family.**

Estimated percentage of the MOE Fund requirement that will be met with preK expenditures (not to exceed 20 percent): **20%**

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

**Oregon's Preschool Promise is a mixed delivery preschool model that expands preK services to families both within and outside of the Head Start system. The model expands the availability of quality child care to families while receiving preK services.**

- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the MOE Fund requirement: **Approximately \$11.4 million**

## 1.6 Public-Private Partnerships

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

- 1.6.1 Identify and describe the entities with which and the levels at which the state/territory is partnering (level—state/territory, county/local, and/or programs), the goals of the partnerships, the ways that partnerships are expected to leverage existing service-delivery systems, the method of partnering, and examples of activities that have resulted from these partnerships (98.16(d)(2)).

**Oregon has developed a model for partnering with public and private entities, tribes, and faith-based organizations to leverage service delivery systems for early care and education services. Oregon has 17 Early Learning Hubs, each with its own governing body, and sponsored by regional partners including counties, cities, school districts, education service districts.**

**The Early Learning Hubs leverage philanthropic and business leaders and non-profit partners locally to expand services to children and families such as professional development for early educators, developmental screening, and kindergarten transition.**

**The Early Learning Division and Department of Education have formalized a collaborative partnership that focuses on prenatal through third grade alignment (P-3) with several external organizations including the Children’s Institute, Oregon Community Foundation, the Ford Family Foundation, and Portland State University’s Center on Early Childhood and Family Support Research. This public/private partnership has articulated a shared vision for P-3 in Oregon which focuses on building capacity and strengthening supports for local P-3 projects throughout the state, and has developed a shared work plan that includes activities such as the development of a P-3 resource website and creating opportunities for shared professional development for providers of early learning services and K-3 teachers.**

**The Oregon Community Foundation supports a number of early care and education efforts statewide. Among those activities are scholarship funds for training and college education for the early learning workforce and works in tandem with the Early Learning Division to increase the availability of diverse early learning trainers statewide.**

**The Ford Family Foundation funds the Southern Oregon Early Learning Professional Development Consortium as a pilot project in Coos, Curry, Douglas, Jackson, Josephine, Klamath, and Lake Counties. This project supports cohorts of early educators in obtaining higher education credentials, certificates and degrees through a collaborative partnership among the region’s four community colleges, three child care resource and referral**

organizations, and one university. The child care resource and referral programs provide relationship-based professional development as Navigators and the colleges offer classes that are convenient, affordable, culturally and linguistically responsive, and accessible for the Early Learning Workforce active in their profession.

For school-age care, the CCDF investment leverages a broad array of partnerships to support school-age care professionals and children under 13 receiving child care subsidies. The funds provided to Oregon ASK match Mott grant funds to support Oregon ASK as the designated State Afterschool Network. Oregon ASK is also the Oregon affiliate of the National Afterschool Association supporting professionalism in the afterschool workforce. The designations provide funding opportunities and leverage for special projects and initiatives. Examples include funds from the Gates Foundation and the National Conference of State Legislatures and National Governors Association to survey statewide afterschool programs and create the Supporting Student Success report; STEM Next funding to develop STEM training as part of a 39 state collaboration; numerous partnerships with other national STEM efforts to train educators in robotics, science, and computer coding. Oregon ASK also partners with over 50 individuals and organizations through a partner committee designed to convene all entities involved with creating successful opportunities for school aged children in out-of-school activities.

The local child care resource and referral programs partner with a variety of funding entities to leverage services for providers and low income parents. Several Focused Family Child Care Networks funded by the state through the Early Learning Hubs are designed to increase quality environments in family child care home settings.

Child Care Resource Network in southern Oregon administers a cohort of Spanish speaking providers to offer Preschool Promise, the state mixed delivery preschool program. Jackson Care Connect partners with Child Care Resource Network to offer a program to child care providers focused on healthy eating, physical activity and decreasing screen time.

Child Care Resource and Referral of Multnomah, the most populous county in Oregon, works closely with the Early Learning Hub with the Kindergarten Partnership Innovation funds to make connections between local child care providers and their corresponding elementary schools through connections to play and learn groups and child development classes for families and providers together.

The Portland Children's Levy (grant to Child Care Resource and Referral of Multnomah) increases accessibility to quality child care for parents by awarding additional subsidy for low income working parents and by increasing the quality of child care through business technical assistance and early childhood consultation.

Through a partnership with Worksource, the statewide workforce development program, and Mt. Hood Community College, Child Care Resource and Referral of Multnomah works to recruit early educators who are English language learners to complete a nine month community college certificate program that includes language acquisition, preparation for attainment of a Child Development Associate credential.

NeighborImpact Child Care Resources in central Oregon works closely with Central Oregon Community College to connect early educators with classes, ensure classes are available and accessible for non-traditional students and support students' success.

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

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

- If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency, provide parents in the State with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.
- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).
- Collect data and provide information on the coordination of services and supports, including services under Section 619 and Part C of the Individuals with Disabilities Education Act;
- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State;
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

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

*Note:* Use section 7.6 to address how quality set-aside funds, if applicable, are used to support a statewide CCR&R system.

### 1.7.1 Does the Lead Agency fund a system of local or regional CCR&R organizations?

- No. The state/territory does not fund a CCR&R system and has no plans to establish one.
- Yes. The state/territory funds a CCR&R system. If yes, describe the following:

a) What services are provided through the CCR&R system? **The child care resource and referral system provides child care referrals to parents, consumer education information and consultation for parents seeking child care. The programs in the system provide training and technical assistance for existing and potential child care providers and include training, coaching, mentoring, and consulting and advising on professional development. Contractors deliver training required to meet state and federal regulations as well as support ongoing professional development to increase**

**the training and education of child care providers. Child care resource and Referral programs also provide support to child care programs to meet licensing and Spark standards.**

- b) How the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated. The child care resource and referral system in **Oregon is a state-wide network of 14 agencies and includes local and state governmental entities and community based organizations. 211info is part of the child care resource and referral system and employs a multi-tiered communications and outreach strategy to ensure consumers are informed about child care and related services. The Early Learning Division contracts for and coordinates the work of the child care resource and referral system. There is a designated central coordination contractor that supports local child care resource and referral programs and provides infrastructure for data requirements.**

**Child care resource and referral agencies are participating members in their region’s early childhood partnerships and work collaboratively on strengthening the childhood care and education systems in their communities. Their contracts specify that they coordinate with the Early Learning Hub(s) in their local geographic service area to provide child care resource and referral activities that address community needs as identified by the Early Learning Hub and to participate in planning and providing professional development. Child care resource and referral agencies work closely with employers, community planners and Early Learning Hubs to address the child care needs of their individual communities.**

## **1.8 Disaster Preparedness and Response Plan**

Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they will address the needs of children—including the need for safe child care, before, during, and after a state of emergency declared by the Governor or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122)—through a Statewide Disaster Plan that, for a State, is developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to section 642B(b)(1)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i))) or similar coordinating body (98.16(aa)).

- 1.8.1 Describe how the Statewide Child Care Disaster Plan was developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care or similar coordinating body: **The Early Learning Division convened the Oregon Early Learning Emergency Preparedness and Response Workgroup to develop a collaborative partner plan. The workgroup developed a plan over a series of meetings. The workgroup included emergency management personnel representing counties, tribes, the Department of Human Services, and the Oregon Health Authority Public Health Division. Also participating: a**

**member of the Early Learning Council, representatives from family and center child care facilities, child care resource and referral staff members, Oregon Early Learning Hub staff, the Governor’s State Resilience Officer, Tribal CCDF Administrators, and a number of licensing and subsidy staff from the Early Learning Division and the Department of Human Services.**

- 1.8.2 Describe how the Statewide Disaster Plan includes the Lead Agency’s guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster and temporary operating standards for child care after a disaster: **Both the Department of Human Services and the Department of Education are under the State of Oregon’s Continuity of Operations Planning System. The plans cover continuation of child care subsidy payments, strategies for licensing and monitoring, and conducting background checks. Temporary operating standards for child care after a disaster are subject to the Governor signing a proclamation of a State of Emergency.**
- 1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services: **Oregon is working with the Oregon Office of Emergency Management and local emergency management personnel to establish protocols for post-disaster recovery of child care services. In addition, the Lead Agency is identifying potential regulatory waivers to allow licensed facilities to temporarily relocate, or provide temporary child care services with appropriate health and safety requirements in place.**
- 1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place—evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions: **All licensed facilities and exempt facilities receiving CCDF funds are required by rule to have all federally required procedures in place. Evacuation and other types of emergency procedures are practiced regularly. Logs of the emergency drills are required for all licensed facilities.**
- 1.8.5 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place for child care staff and volunteers—emergency preparedness training and practice drills as required in 98.41(a)(1)(vii): **All licensed and CCDF license exempt providers are required to complete the Introduction to Child Care Health and Safety training. The training covers the required emergency preparedness elements. Practice drills are required by rule and licensing specialists check the logs for completeness during monitoring visits.**
- 1.8.6 Provide the link to the website where the statewide child care disaster plan is available: **Available on June 1, 2018.**

## 2 Promote Family Engagement Through Outreach and Consumer Education

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

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

In this section, Lead Agencies will delineate the consumer and provider education information related to child care, as well as other services, including developmental screenings, that is made available to parents, providers, and the general public and the ways that it is made available. This section also covers the parental complaint process and the consumer education website that has been developed by the Lead Agency and the manner in which it links to the national website and hotline. Finally, this section addresses the consumer statement that is provided to parents supported with CCDF funds.

### 2.1 Outreach to Families With Limited English Proficiency and Persons With Disabilities

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

- 2.1.1 Describe how the Lead Agency or partners provide outreach and services to eligible families for whom English is not their first language: **Communication needs vary by geographic regions of the state and careful considerations are given to linguistic and cultural responsiveness. Given the significant rural areas in the state, contracted entities tailor their outreach methods to meet the unique needs of communities. Outreach includes mobile technology, website access, mailed materials, webinars, telephone referrals, Facebook, texting, and social media to connect directly with providers and parents. Oregon prioritizes having parent and provider information in five languages: English, Spanish, Chinese, Vietnamese, and Russian, with a goal to disseminate in the languages simultaneously. All child care resource and referral programs and the Department of Human Services distribute materials in alternate languages and have access to a language line. The Lead Agency and 211info provide consumer education**

information on the full diversity of child care services to parents and the public in multiple languages.

Consumer education materials used for the Employment Related Day Care subsidy program are translated from English into Spanish, Russian, Vietnamese and other essential languages as needed based on county demographics. The Department of Human Services website also has translated web pages that are accessible to non- or limited-English speaking Spanish, Russian and Vietnamese clients. All local DHS offices have access to the Language Line. Accommodations are made for individuals with disabilities.

All child care resource and referral agencies distribute materials in alternate languages, have access to the Language Line through the Lead Agency account and provide consumer education information on the full diversity of child care services to parents and the public.

ERDC Orientations and Child Care Provider Overviews are offered in Spanish, Russian and Vietnamese. Accommodations for individuals with disabilities are available for all trainings.

- 2.1.2 Describe how the Lead Agency or partners provide outreach and services to eligible families with a person(s) with a disability: **The Lead Agency and the Department of Human Services provide outreach and services that are ADA compliant. The Early Learning Division website has been assessed for ADA compliance. Subsidy eligibility services are accessed at fully compliant state offices or by telephone and web applications.**

## 2.2 Parental Complaint Process

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

- 2.2.1 Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process: **The agency hotline is staffed by agency personnel during working hours and available to the public to report complaints related to child care facilities or individuals associated with the facility. The hotline is available 24/7 and the public may leave messages outside of normal business hours, or request to remain anonymous.**
- 2.2.2 Describe the Lead Agency's process for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring: **Whenever the agency receives a complaint, normal process is to investigate it within three business days. All complaints are investigated since they may be lodged anonymously. Licensing staff are assigned a complaint visit, which they conduct unannounced at the child care facility. The licensing staff review records, interview staff and review all partner agency reports before assigning a visit finding of valid, invalid or unable to substantiate. After the finding is assigned,**

**agency management will decide whether additional monitoring or legal actions are appropriate. The agency will cross report complaint and finding results to the Department of Human Services for CCDF providers.**

- 2.2.3 Describe the Lead Agency's process for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring: **When the agency receives a complaint, normal process is to investigate it within three business days. All complaints are investigated whether or not the provider receives CCDF. Licensing staff are assigned a complaint visit, which they conduct unannounced at the child care facility. The licensing staff review records, interview staff and review all partner agency reports before assigning a visit finding of valid, invalid or unable to substantiate. After the finding is assigned, agency management will decide whether additional monitoring or legal actions are appropriate.**
- 2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints: **All complaints are logged into the agency's data management system under the licensing record of the child care facility. Agency staff assign complaint visits to licensing staff within the system, licensing staff report their findings within the system. All subsequent monitoring visits or legal actions are also assigned within the system.**
- 2.2.5 Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3: **All complaints in which the finding result is valid are reported to the public via the agency website or by telephone for a period of ten years. All findings that are unable to substantiate are reported on the web and by phone for a period of two years. No invalid complaints are reported to the public.**

### **2.3 Consumer Education Website**

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

To certify, respond to questions 2.3.1 through 2.3.10 by describing how the Lead Agency meets these requirements and provide the link in 2.3.11. Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved are considered substantial changes and CCDF Plan Amendments will be required.

- 2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible: **The Lead Agency recently conducted a website audit for accessibility.**
- 2.3.2 Describe how the website ensures the widest possible access to services for families that speak languages other than English (98.33(a)): **Google translate provides basic web page translation.**
- 2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities: **The agencies websites are ADA compliant and new content goes through accessibility evaluation.**
- 2.3.4 Lead Agency processes related to child care.

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

- a) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6: **<https://oregonearlylearning.com/providers-educators/become-a-provider/licensed-childcare/>**
- a) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2: **Available by September 30, 2018.**
- b) Provide the link to the policies and procedures related to criminal background checks for staff members of child care providers and the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in sections 5.4.1 and 5.4.6: **<https://oregonearlylearning.com/providers-educators/providers-educatorschr/>**

#### 2.3.5 List of providers

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

- a) Provide the website link to the searchable list of child care providers: **<https://oregonearlylearning.com/parents-families/find-child-care-programs/>** In addition, the Early Learning Division has a website dedicated to providing safety information on child care programs. **<https://oregonearlylearning.com/parents-families/childcare-safetyportal>**
- b) Which providers are included in the searchable list of child care providers:
  - Licensed CCDF providers
  - Licensed non-CCDF providers
  - License-exempt center-based CCDF providers
  - License-exempt family child care (FCC) CCDF providers
  - License-exempt non-CCDF providers
  - Relative CCDF child care providers



sample report and summary. Monitoring inspection summaries indicate any complaint resulting in valid non-compliance or observed non-compliance. **September 30, 2018**

- d) How monitoring and inspection reports and/or their plain-language summaries prominently display any health and safety violations, including any fatalities or serious injuries. **The Public Facility Inspection Information reports show non-compliances, rules violated and field observations regarding the violations including injury and deaths. In addition, parents can search specific logs of child fatalities, injuries and emergency suspensions.**
- e) The process for correcting inaccuracies in reports. **Administrative inaccuracies that are discovered are corrected by the agency upon discovery and verified the information in the report is in error. The corrected report is sent to the provider in a supersedes letter, and the provider may seek to challenge the changes through the agency's findings review process.**
- f) The process for providers to appeal the findings in the reports, including the time requirements. **The agency has a findings review process in which the provider is given opportunity to contest any complaint findings or observed non-compliances that they believe are in error. The request must be made within 30 days of the provider being notified by the agency in writing of the finding or observed noncompliance and has two steps, including an appeal to the agency's legal administrator if the provider does not agree with the outcome of the first level review.**
- g) How reports are posted in a timely manner. Specifically, provide the Lead Agency's definition of "timely" and describe how it ensures that reports are posted within its timeframe. **Inspection reports are currently updated weekly on the website. A new Early Learning Information System will go live prior to September 30, 2018, where reports will be posted within 48 hours. Child care program emergency suspensions are posted immediately.**
- h) How many years of reports that the state/territory posts on its website, if any, beyond the required minimum of 3 years, where available (98.33(a)(4)(iv)). **10 years**
- i) The policy for removing reports after a certain amount of time has passed (e.g., after 7 years). **The Early Learning removes reports after 10 years.**
- j) Any additional providers on which the Lead Agency chooses to include reports. Note - Licensed providers and CCDF providers must have monitoring and inspection reports posted on their consumer education website.
  - License-exempt non-CCDF providers
  - Relative child care providers
  - Other. Describe:

2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted on the consumer education website. The information on serious injuries and deaths should be organized by category of care and licensing status, however, Lead Agencies are not required to breakdown the instances of substantiated child abuse by category of care and licensing status.

Certify by providing:

- a) The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care (98.16 (ff)) and describe how the Lead Agency obtains the aggregate data from the entity. **Licensed child care providers are required to report serious injuries and deaths to the Early Learning Division Office of Child Care.**
- b) The definition of “substantiated child abuse” used by the Lead Agency for this requirement. **The Lead Agency uses the Department of Human Services definition of “founded child abuse”: The definition of “founded” means there is reasonable cause to believe that child abuse or neglect occurred.**
- c) The definition of “serious injury” used by the Lead Agency for this requirement. **Serious injury means any of the following:**
- **Injury requiring surgery;**
  - **Injury requiring admission to a hospital;**
  - **Choking or unexpected breathing problems;**
  - **Unconsciousness;**
  - **Concussion;**
  - **Poisoning;**
  - **Medication overdose;**
  - **Broken bone;**
  - **Severe head or neck injury;**
  - **Chemical contact in eyes, mouth, skin, inhalation or ingestion;**
  - **Severe burn;**
  - **Allergic reaction requiring administration of Epi-Pen;**
  - **Severe bleeding;**
  - **Shock or confused state;**
  - **Near-drowning.**
- d) The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted.

<https://oregonearlylearning.com/parents-families/childcare-safetyportal#fatalities>

- 2.3.9 The consumer education website should include contact information on referrals to local child care resource and referral organizations. How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information: The Early Learning Division’s has a tab on the main website for Parents and Families. Find Child Care link is prominent on the Parent and Families page. The link goes directly to child care resource and referral. <https://oregonearlylearning.com/parents-families/find-child-care-programs/>
- 2.3.10 The consumer education website should include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website. Describe and include a website link to this information: There is a “contact” link on the main web page. <https://oregonearlylearning.com/contact>
- 2.3.11 Provide the website link to the Lead Agency’s consumer education website. **By September 30, 2018.**

## 2.4 National Website and Hotline

The CCDBG Act of 2014 required the U.S. Department of Health and Human Services to establish a national website at ChildCare.gov, which includes a ZIP Code-based search of available child care providers, provider-specific information about the quality of care and health and safety compliance, referrals to local CCR&R organizations, and information about child care subsidy programs and other financial supports available to families (658L(b)). Lead Agencies must also provide a description of how they will respond to complaints submitted through the national website and hotline (98.16(hh)).

- 2.4.1 Describe how the Lead Agency responds to complaints submitted through the national website and hotline regarding both licensed and license-exempt child care providers. **The Lead Agency responds to complaints through the national website hotline with the same process as any complaint. Complaints are assigned to a licensing specialist. An unannounced visit is conducted within three days. The licensing staff review records, interview staff and review all partner agency reports before assigning a visit finding of valid, invalid or unable to substantiate. After the finding is assigned, agency management will decide whether additional monitoring or legal actions are appropriate. The agency will cross report complaint and finding results to the Department of Human Services for CCDF providers.**
- 2.4.2 Identify the designee responsible for receiving and responding to complaints submitted through the national website and hotline. **All complaints go to the Early Learning Division Office of Child Care.**

## 2.5 Additional Consumer and Provider Education

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

In questions 2.5.1 through 2.5.4, certify by describing:

- 2.5.1 How the Lead Agency shares information with eligible parents, the general public, and where applicable, child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible, such as state preK, as well as the availability of financial assistance to obtain child care services. At a minimum, describe what is provided (e.g., such methods as written materials, the website, and direct communications) and how information is tailored for these audiences. **The Lead Agency and the Department of Human Services use multiple methods to share information about child care services and other programs.**

**The Department of Human Services website provides comprehensive information on the child care subsidy program and other financial support services such as TANF, medical and food**

**assistance with links to other resources outside the agency. Written materials are provided at local Department of Human Services offices. The Early Learning Division website provides a wide range of information on early learning services available throughout the state.**

**211info employs web-based referral and information including information on child care financial assistance and all other available health and social service related resources. Information is available by phone or text in order to accommodate different audiences.**

- 2.5.2 The partnerships formed to make information about the availability of child care services available to families. Partnerships are in place to make information about available child care services to families. **Oregon uses a cross partner, regional approach for providing information to parents, providers and the general public on child care. 211info employs a multi-tiered communications and outreach strategy to ensure that consumers are informed about culturally responsive child care and related services. Contractors who provide early care and education services for the Early Learning Division and a number of other partners provide information to families. This includes, but is not limited to, local child care resource and referral programs, Early Learning Hubs, Oregon Health Authority, The Research Institute (Spark administrator), and the Oregon Center for Career Development in Childhood Care and Education at Portland State University.**
- 2.5.3 How the Lead Agency provides the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers. In the description, include at a minimum what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners who assist in providing this information.
- Temporary Assistance for Needy Families program: **211info provides comprehensive resource information via website search engine and by telephone. The Department of Human Services provides information and application to families through direct contact and website.**
  - Head Start and Early Head Start programs: **Local child care resource and referral programs and 211info provide contact information via website search engine and by telephone on Head Start and Early Head Start Programs.**
  - Low Income Home Energy Assistance Program (LIHEAP): **211info provides comprehensive resource information via website search engine and by telephone.**
  - Supplemental Nutrition Assistance Programs (SNAP)Program: **211info provides comprehensive resource information via website search engine and by telephone.**
  - Women, Infants, and Children Program (WIC)program: **211info provides comprehensive resource information via website search engine and by telephone.**
  - Child and Adult Care Food Program(CACFP): **The child care resource and referral programs provide information on the Child and Adult Care Food Program to family based child care providers.**
  - Medicaid and Children’s Health Insurance Program (CHIP): **211info provides comprehensive resource information via website search engine and by telephone.**

- Programs carried out under Section 619 and Part C of the Individuals with Disabilities Education Act (IDEA) : **211info provides comprehensive resource information via website search engine and by telephone.**

2.5.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children’s development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners in providing this information. **The Early Learning Division has a strong partnership with the Child Well Being Team of the Oregon Health Authority who has strategic initiatives to educate parents, the general public, providers and other stakeholders on child development. The Early Learning Division also relies on the child care resource and referral system and the Early Learning Hubs to make information about best practices in child development available. The Early Learning Division coordinates with the Maternal and Child Health section of the Oregon Health Authority and the child care resource and referral programs to make information and research on healthy eating and physical activity available to parents and providers. The Early Learning Division contracts and/or partners with the following entities to make information about research and best practice in child development available:**

- Child care resource and referral system
- Early Learning Hubs
- Oregon Health Authority
- The Research Institute, which administers Oregon’s Spark
- Portland State University which administers Oregon’s professional development system through Oregon’s Center for Career Development
- Vroom contract sites
- Department of Human Services which administers Oregon’s primary CCDF subsidy program

The Early Learning Division website provides resources directly to parents on kindergarten readiness and brain building in early learning. <https://oregonearlylearning.com/kindergarten-ready>

The Early Learning Division promotes a statewide network of 24 sites to share Vroom with the families they serve through existing programming and partnerships, including home visiting networks, parenting classes, therapy sessions, and more. Vroom is a national early-learning initiative that turns everyday activities for parents and caregivers of children ages 0-5 into brain-building opportunities, building literacy, math, and cognitive abilities. Vroom consists of a collection of multi-lingual learning tools, such as a free Smartphone app, that include more than 1,000 such brain-building activities. In addition to these network sites, the Early Learning Division has shared Vroom via a series of educational conferences, the states’ child care licensing staff, and partnerships with large statewide entities, including the Oregon Health Authority and WIC.

**Information is available to parents on the Center for Disease Control and Prevention's Act Early campaign. Act Early helps parents track their child's development and provides them with milestones to look for on and what to do if their child isn't meeting those milestones.**

- 2.5.5 Describe how information on the Lead Agency's policies regarding the social-emotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include what information is provided, how the information is provided, and how information is tailored to a variety of audiences and include any partners in providing this information.

**Oregon's Early Learning Hub system, modelled on the theory of collective impact, brings together early learning providers, K-12 education, healthcare providers, human and social services, local businesses, and parents and families allow the development of a system to best meet the needs of children and families in each community. The Hubs make information on social emotional/behavioral mental health and intervention supports available to parents through direct referrals to collaborative partners who provide services including early childhood mental health consultants, developmental screening, Head Start, home visiting, and parent education and training.**

**Oregon offers four standardized trainings through the Child Care Resource and Referral program focused on social and emotional development available to all child care providers. The trainings are:**

- **Building Blocks for Social Emotional Development**
- **Discovering Potential: Social and Emotional Development of School-age Children**
- **Implementing Developmental Screening Using the Ages and Stages Questionnaire—Third Edition**
- **Teaching Research Assistance to Child Care Providers Serving Children with Special Needs**

**All programs of the child care resource and referral system in the state are affiliated with the Early Learning Hubs in their regions with access to partners and county services that offer intervention supports to parents and information to child care providers. Multnomah County, the largest populated county in the state, partners with Child Care Resource and Referral Multnomah of to provide direct consultation services on early childhood mental health to child care programs.**

- 2.5.6 Describe the Lead Agency's policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds (98.16(ee)), including how those policies are shared with families, providers, and the general public.

**The Early Learning Division is committed to substantially reducing and preventing suspension, expulsion and other exclusionary practices in early learning settings so that all children have access to, and success in, high quality early learning settings that support kindergarten readiness. The policy statement articulates recommendations for meeting the training and resource needs to enhance parent and provider knowledge and skill in supporting children's social-emotional development. Information on training and resources are broadly distributed**

through partners and websites. The State requires providers caring for children receiving child care assistance to have a policy that is communicated to parents on expulsion and suspension.

## 2.6 Procedures for Providing Information on Developmental Screenings

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

### 2.6.1 Certify by describing:

- a) How the Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF parents, the general public, and where applicable, child care providers (98.15(b)(3)). **The Early Learning Division and the Department of Human Services partner closely with the Oregon Health Authority to provide outreach and information on developmental screening.**
- b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program—carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.)—and developmental screening services available under Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.). **In Oregon, the Oregon Health Plan covers Early and Periodic Screening, Diagnosis, and Treatment. The Early Learning Hubs in Partnership with the Oregon Health Authority provide outreach to parents and child care providers on accessing the Oregon Health Plan. The Department of Human Services makes parents aware of the Oregon Health Plan and screening services during the eligibility process.**
- c) How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work. **The Department of Human Services eligibility workers are directed to provide information to families on Oregon Health Authority, Coordinated Care Organizations who provide developmental screening outreach and referral. Written materials on developmental screening are available at field offices. The Department of Human Services application for services form has questions about family members with a disability and children with special needs. If a parent is having a difficult time finding child care for a child, the eligibility worker is directed to follow up with additional questions and make a referral to the Inclusive Child Care Program. The Inclusive Child Care Program also provides information and referral on development screening.**

[https://public.health.oregon.gov/HealthyPeopleFamilies/Babies/HealthScreening/ABCD/Pages/abcd\\_toolkit.aspx](https://public.health.oregon.gov/HealthyPeopleFamilies/Babies/HealthScreening/ABCD/Pages/abcd_toolkit.aspx)

- d) How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays.

**All children in Oregon are eligible to receive developmental screening. Outreach to families and children including CCDF families, are widespread and include the following activities:**

- **The Early Learning Hubs are charged through outcomes metrics to increase the number of children who receive developmental screening prior to age three.**
- **The Department of Human Services eligibility workers provide information to families on developmental screening.**
- **Oregon has an online resource option available for parents and providers on Ages and Stages Questionnaires (<http://www.asqoregon.com/parentresources.php>).**
- **The Oregon Health Authority distributes Ages and Stages Questionnaires starter kits for programs and individuals who don't have online access.**
- **Oregon Health Authority contracts with pediatricians in all counties to deliver screening services to children (Oregon Health Plan screening).**
- **Child care providers participating in the QRIS are trained to conduct the screening or assist parents in conducting the screening and it is a part of program standards for star rated programs to conduct screening.**

- e) How child care providers receive this information through training and professional development. **Child care resource and referral agencies are partners in providing information to child care providers and parents and provide Ages and Stages Questionnaires training to local providers through the partnership with the Oregon Health Authority and the Oregon Center for Career Development. This training is available in English and Spanish.**

- f) Provide the citation for this policy and procedure related to providing information on developmental screenings.

[https://earlylearningcouncil.files.wordpress.com/2015/04/elc\\_screening\\_tools\\_report\\_final.pdf](https://earlylearningcouncil.files.wordpress.com/2015/04/elc_screening_tools_report_final.pdf)

## **2.7 Consumer Statement for Parents Receiving CCDF Funds**

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

electronically, Lead Agencies should consider how to ensure that the statement is accessible to parents and that parents have a way to contact someone to address questions they have.

2.7.1 Certify by describing:

- a) How the Lead Agency provides parents receiving CCDF funds with a consumer statement. **Information on types of child care are posted on the Office of Child Care and the Department of Human Services website. The Department of Human Services mail a notification to participants detailing the types of child care available and the respective training requirements to assist in their determination to select quality child care settings.**
- b) What is included in the statement, including when the consumer statement is provided to families. **Parents receive notification upon connection to a DHS listed provider detailing the type of provider they've selected, provider training requirements met and Spark rating (if applicable).**
- c) Provide a link to a sample consumer statement or a description if a link is not available. **The consumer letter identifies the name of the provider listed and approved to receive child care payments on behalf of the parent/guardian. The letter indicates the provider has completed a listing form, and passed a criminal background check. The letter identifies the type of child care chosen and the required training completed.**

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

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

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

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

#### 3.1 Eligible Children and Families

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

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

- a) The CCDF program serves children from **birth** (weeks/months/years) to **12** years (through age 12). *Note:* Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).
- a) Does the Lead Agency allow CCDF-funded child care for children ages 13 and older but below age 19 who are physically and/or mentally incapable of self-care (658E(c)(3)(B); 658P(3))?
  - No
  - Yes, and the upper age is 17 (may not equal or exceed age 19). If yes, provide the Lead Agency definition of physical or mental incapacity: **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.**
- b) Does the Lead Agency allow CCDF-funded child care for children ages 13 and older but below age 19 who are under court supervision (658P(3); 658E(c)(3)(B))?

No

Yes, and the upper age is 17 (may not equal or exceed age 19).

c) How does the Lead Agency define the following eligibility terms?

**“residing with”:** Child 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.

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

### 3.1.2 Eligibility criteria based on reason for care

a) How does the Lead Agency define “working or attending a job training and educational program” for the purposes of CCDF eligibility at the time of determination? Provide the definitions below for:

**“Working”:** At least one caretaker must receive income from employment, includes self-employment, or through paid work experience, paid practicum assignments and Federal work study as part of an education program. There are no required minimum work hours. However, if the amount of subsidy payment is less than the parents’ copayment, there is no child care need, therefore, no eligibility. Child care need also means that the care is necessary to maintain employment. Working also includes job search for those who become unemployed during the ERDC certification period.

**“Job training”:** Caretakers who are newly employed or a current employee and participating in paid mandatory training as part of employment are considered “working” and would meet the requirement for eligibility.

a) **“Education”:** Caretakers determined eligible for ERDC child care assistance based on employment can receive child care assistance for education that leads to a certificate, degree, or job-related knowledge and skills. The hours approved for education cannot exceed the approved work hours or a combined total of 50 authorized hours per week, or 215 per month.

Parents participating in the Teen Parent contracted child care program are eligible for child care subsidy if the teen parent is attending high school or participating in an approved high school completion program sponsored by a local school district, community college, or certified private school, and the parent requires child care in order to attend and complete a program leading to GED or high school diploma. They qualify based on education alone and there is no work requirement. Teen parents are also eligible for up to 6 months of post-graduation child care if they are already receiving the agency’s subsidized child care and require transitional services for one of the following reasons:

- Employment search;
- Participation in a vocational education program or post-secondary education which requires a high school diploma or equivalent; job training program, cooperative work experience opportunity or a Bureau of Labor and Industry approved pre-apprenticeship program.

“Attending job training or education” (e.g. number of hours, travel time): **Attending job training has the same limitation of hours as employment as long as the training is paid time. Full time training is 50 hours a week, or 215 hours per month. Additional hours can be granted for up to a total of 75 hours a week, 323 hours per month if the paid training and travel time exceeds full time.**

**Working parents receive up to a maximum of 20 hours a week for class time plus an additional 25% (five hours) for travel time. Authorized class hours cannot exceed the number of hours authorized for employment. Travel time is given by adding 25% to the total number of authorized class and work hours combined.**

- b) Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training participation alone (without additional minimum work requirements)?
- No. If no, describe the additional work requirements:
  - Yes. If yes, define the job-search time limit, keeping in mind a minimum of 3 months is required to be provided when a parent experiences a non-temporary loss or cessation of eligible activity: **Teen Parent child care is allowed for education only and does not have a minimum work requirement.**
- c) Does the Lead Agency consider engaging in a job search or seeking employment an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination (must provide a minimum of 3 months)?
- No.
  - Yes. If yes, describe the policy or procedure.
- d) Does the Lead Agency provide child care to children in protective services?
- No.
  - Yes. If yes:
    - i. Please provide the Lead Agency’s definition of “protective services”: **Child Protective Services means a specialized social service program that the Department of Human Services provides on behalf of children who may be unsafe after a report of child abuse or neglect.**

**For the purposes of eligibility any child may be determined eligible for child care assistance when the family meets all eligibility requirements. Children who are currently working with Child Protective Service and have a safety plan in place to keep the child at home, with a relative or a known adult, will not be subject to the child care reservation list when activated.**

*Note:* Federal requirements allow other vulnerable children identified by the Lead Agency not formally in child protection to be included in the Lead Agency’s definition of protective services for CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care

parents are *not* working or are *not* in education/training activities, but this provision should be included in the protective services definition above.

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

### 3.1.3 Eligibility criteria based on family income

- a) How does the Lead Agency define “income” for the purposes of eligibility at the point of determination? **Countable income includes all income received by the immediate family members living in the household except transfer income or earned income of children and foster care/guardianship payments. Gross income received through self-employment is allowed a 50% deduction or full cost deduction (when verified).**
- b) Provide the CCDF income eligibility limits in the table below. Complete columns (a) and (b) based on maximum eligibility at initial entry into CCDF. Complete columns (c) and (d) *only if* the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. Fill in the chart based on the most populous area of the state (the area serving the highest number of CCDF children).
- c) If the income eligibility limits are not statewide, describe how many jurisdictions set their own income eligibility limits and provide the income limit ranges across the jurisdictions (e.g. range from [lowest limit] to [highest limit])( 98.16(i)(3)). **Not applicable**

	(a)	(b)	(c)	(d)
<b>Family Size</b>	<b>100% of SMI (\$/Month)</b>	<b>85% of SMI (\$/Month) [Multiply (a) by 0.85]</b>	<b>(IF APPLICABLE) (\$/Month) Maximum “Entry” Income Level if Lower Than 85% of Current SMI</b>	<b>(IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI</b>
1	3143	2672	N/A	N/A
2	4109	3493	2538	61.7
3	5076	4315	3204	63.1
4	6043	5137	3870	64.0
5	7010	5959	4536	64.7

	(a)	(b)	(c)	(d)
Family Size	100% of SMI (\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum "Entry" Income Level if Lower Than 85% of Current SMI	(IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI

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

d) SMI source and year  
[https://liheapch.acf.hhs.gov/Tribes/Tables/povertytables/FY2017/orsmi\\_tribal.htm](https://liheapch.acf.hhs.gov/Tribes/Tables/povertytables/FY2017/orsmi_tribal.htm)

**Federal Fiscal year 2017**

e) What was the date that these eligibility limits in column (c) became effective? **03/01/2018**  
 f) Provide the citation or link, if available, for the income eligibility limits.  
<http://www.oregon.gov/DHS/ASSISTANCE/CHILD-CARE/Pages/Parents.aspx>

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

a) Describe how the family member certifies that family assets do not exceed \$1,000,000 (e.g., a checkoff on the CCDF application). **Families attest at certification and recertification that they do not have assets exceeding \$1,000,000.**

b) Does the Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?

No.

Yes. If yes, please identify the policy or procedure:

3.1.5 Describe any additional eligibility conditions or priority rules applied by the Lead Agency during eligibility determination or redetermination (98.20(b)). **Priority processing allows homeless families who apply for ERDC to start receiving benefits immediately. The caretaker will initially self-report income and work hours. Once the case is open the client is given 45 days to supply any required income verification. When the immunization requirement is not met families are given 12 months to comply or supply verification of a religious or medical exemption.**

3.1.6 Lead Agencies are required to take into consideration children’s development and promote continuity of care when authorizing child care services (98.21(f); 98.16(h)(6)). Examples include partnering with Head Start, prekindergarten, or other high-quality programs to create a package

of arrangements that accommodates parent's work schedules; providing more intensive case management for families with children with multiple risk factors; and including in the eligibility determination process a question about whether a child has an Individualized Education Program or Individual Family Service Plan. Describe the Lead Agency's policies and procedures that take into consideration children's development and learning and that promote continuity of care when authorizing child care services. **Continuity of care is promoted when authorizing CCDF child care services as follows: An eligibility certification period of no less than 12 months is in place for families. An exit limit exists to allow a graduated phase-out for families whose income exceeds the agency threshold to initially qualify for CCDF child care assistance. The child care assistance eligibility process includes gathering information from applicants if a child has special needs, including whether a child has an Individualized Education Program. When a disruption in family's employment occurs they are supported by maintaining eligibility for child care services for a minimum of three months. The Department of Human Services contracts with eight Head Start programs providing child care slots in high-quality care. Agency families with risk factors who receive a Temporary Assistance to Needy Families grant will be served with case management services.**

#### 3.1.7 Graduated phase-out of assistance.

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

Lead Agencies that establish initial family income eligibility below 85 percent of SMI must provide a graduated phase-out by implementing a two-tiered eligibility threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

- i. 85 percent of SMI for a family of the same size
- ii. An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold that:

(A) Takes into account the typical household budget of a low-income family

(B) Provides justification that the second eligibility threshold is:

(1) Sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability

(2) Reasonably allows a family to continue accessing child care services without unnecessary disruption.

At redetermination, a child shall be considered eligible if his or her parents are working or attending a job training or educational program even if their income exceeds the Lead Agency's income limit to initially qualify for assistance as long as their income does not exceed the second tier of eligibility (98.21(a); 98.21(b)(1)).

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

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

N/A—The Lead Agency sets its initial eligibility level at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.

The Lead Agency sets the second eligibility threshold at 85 percent of SMI.

- Describe the policies and procedures. **The initial eligibility income limit for families is under 185% FPL. Once a family is determined eligible, the income limit during the 12 month certification period and at recertification the (exit income limit) is under 85% SMI or 250% FPL whichever is higher. Increases in income that occur during an ongoing ERDC case do not need to be reported unless the income is at or above the exit income limit. ERDC cases that remain eligible above 85% SMI but under 250% FPL are paid through Oregon general funds. 250% FPL exit income was set by Oregon Legislature.**
- Provide the citation for this policy or procedure.

<http://www.oregon.gov/DHS/ASSISTANCE/CHILD-CARE/Pages/Parents.aspx>  
**OAR 461-155-0150**

The Lead Agency sets the second eligibility threshold at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold.

- Provide the second eligibility level for a family of three.
- Describe how the second eligibility threshold:
  - i. Takes into account the typical household budget of a low-income family:
  - ii. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:
  - iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption:
  - iv. Provide the citation for this policy or procedure:

b) Does the Lead Agency gradually adjust copays for families eligible under the graduated phase-out period?

No

Yes

- i. If yes, describe how the Lead Agency gradually adjusts copays for families under a graduated phase-out. **The copays are adjusted during every recertification of benefits until they have surpassed the higher exit limit. Copays are determined based on the family size and income.**
- ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? (*Note: Additional reporting requirements are also discussed in section 3.3.3 of the plan.*)
  - No.
  - Yes. Describe:

3.1.8 Fluctuation in earnings.

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

Describe the Lead Agency’s policy related to the fluctuation in earnings requirement, including how temporary increases that result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) do not affect eligibility or family copayments. **When determining ERDC eligibility, initially or at recertification, income can be averaged over the 12 month period if the initial month income is lower or higher than what is expected for ongoing months. Income can also be averaged when income intended to cover a 12 month period is received over a shorter period. The family’s copayment is determined at initial certification. The copayment will not increase during the 12 month certification period due to wage increases or job changes. Policy citation OAR 461-150-0090, 461-150-0060**

3.1.9 Lead Agencies are required to have procedures for documenting and verifying that children receiving CCDF funds meet eligibility criteria at the time of eligibility determination and redetermination (98.68(c)). Check the information that the Lead Agency documents and verifies and describe, at a minimum, what information is required and how often. Check all that apply.

- Applicant identity. Describe: **Generally, this is checked one time by the subsidy agency for new applicants not in the system if the identity appears questionable. Verifying identity is confirmed through photo identification, wage stubs, birth certificate or other documentation. Applicant identity is used for TANF, SNAP, ERDC and Special Populations Child Cares subsidies.**
- Applicant’s relationship to the child. Describe: **The Department of Human Services and the Early Learning Division’s Special Populations subsidy programs check applicant’s relationship to the child only if they are a new applicant, they are not in the agency system and it appears questionable. Verification is confirmed through birth certificate, letter of custody, baptismal certificate, military service papers, immigration papers, school records, social security card or records. Also used for TANF and SNAP.**

- Child's information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe: **New applicants; immigration status; child must be a citizen or meet residency requirements. If questionable, subsidy agency will review birth certificate, lawful permanent residency card, certificate of citizenship or other documentation. No further verification is needed unless questionable or a change in citizen status is reported. For children enrolled in programs that are subject to Head Start Performance standards and supported by both Head Start and CCDF funds, parents are required to submit verification of Head Start enrollment in lieu of other documentation. For children in contracted programs, a Head Start Eligibility Checklist could be used as verification.**
- Work. Describe: **Work and/or job training is verified by wage stubs, employer letter, W-2 forms, or online sources at certification. Federal work study is verified by wage stubs and financial aid award letter at certification and recertification. Additional verification may be requested if the client requests an adjustment in benefits during their certification or a new member joins the filing group. This applies to ERDC and Special Populations subsidy programs**
- Job training or educational program. Describe: **Student status is verified by, school registration, current class schedule, and federal financial aid letter. Federal financial aid letter or <https://fafsa.ed.gov/FAFSA/app/schoolSearch> to verify the institution is approved to receive federal financial aid. This is verified at certification if subsidy for school hours is requested. This applies to ERDC and Special Populations subsidy programs.**
- Family income. Describe: **Wage stubs, award letters, employer letters, tax documentation (self-employed) and online sources are used to verify family income. This is verified at certification and recertification and applies to TANF, SNAP and ERDC subsidy programs**
- Household composition. Describe: **The Department of Human Services checks household composition at certification and recertification only if it appears questionable through photo identification or identification card, voter registration card, birth certificate, wage stubs, letter of custody, adoption papers, or other documentation at certification and recertification.**
- Applicant residence. Describe: **The Department of Human Services requires applicants to live in Oregon and must intend to stay in Oregon. An Oregon residency address is required on the application for benefits at certification and recertification. This applies to TANF and the ERDC subsidy program. The Special Populations subsidy programs require applicants to reside in Oregon at the time of eligibility determination and remain in Oregon for benefits to continue.**
- Other. Describe:

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

- Time limit for making eligibility determinations. Describe length of time: **The subsidy agency has 45 days from the date subsidy is requested by an applicant to obtain verification and determine eligibility. The 45 day time period can be extended if the client needs additional time due to circumstances beyond their control.**
- Track and monitor the eligibility determination process
- Other. Describe
- None

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

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

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

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

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

- a) Identify the TANF agency that established these criteria or definitions: **Oregon Department of Human Services**
- b) Provide the following definitions established by the TANF agency:
  - “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, developmental needs 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 requires informal child care providers to meet health and safety standards, including background checks. Care that does not meet the criteria in 'appropriate child care' would be considered unsuitable.**
  - “Affordable child care arrangements”: **Those where the expense to the parent(s) is less than ten percent of family income.**

- c) How are parents who receive TANF benefits informed about the exception to the individual penalties associated with the TANF work requirements?
- In writing
  - Verbally
  - Other. Describe:
- d) Provide the citation for the TANF policy or procedure:

### 3.2 Increasing Access for Vulnerable Children and Families

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

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

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

- a) How does the Lead Agency define “children with special needs” and include a description of how services are prioritized: **A child or youth under age 18 who may require a level of care above the norm for his or her age, due to disabilities, emotional or behavioral disorders, or special health needs. Child care services are prioritized with higher reimbursement rates. The Early Head Start Child Care Partnership grants serve children with disabilities and the state awards subsidy contracts to child care programs meeting the requirements. Children with special needs under these contracts can bypass the reservation list.**
- b) How does the Lead Agency define of “families with very low incomes” and include a description of how services are prioritized: **Children in families with incomes under 185% of the Federal Poverty Level. When the ERDC reservation list is implemented, families who meet specific requirements are able to bypass the list. Those able to bypass the reservation list include families transitioning off TANF, families eligible in the current or preceding three months for the Temporary Assistance to Domestic Violence Survivors grant, children involved with Child Protective Services who have child care as part of their safety plan, families accessing contracted child care slots and families who are reapplying for ERDC after a break in eligibility of less than two calendar months.**
- c) Describe how services are prioritized for children experiencing homelessness, as defined by the CCDF: **Children experiencing homelessness are allowed to enroll in the subsidy program while required documentation is located.**
- d) Describe how services are prioritized, if applicable, for families receiving TANF program funds, those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF (98.16(i)(4)): **Families receiving TANF transition to ERDC without completing a new application to simplify the process and receive a waived copay in their transition month. When the waiting list is activated families recently transitioning**

**off of TANF (have received TANF benefits within the last three calendar months), families eligible for TANF Domestic Violence Survivor program benefits in the current or preceding three months and families reapplying after a short break in eligibility (less than two calendar months) are allowed to bypass the ERDC waiting list when in effect.**

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

a) Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained. **Children experiencing homelessness are given priority processing which allows families to apply for ERDC to start receiving benefits immediately. The caretaker will initially self-report income and work hours. Once the case is open the client is given 45 days to supply any required income verification. When the immunization requirement is not met families are given 12 months to comply or supply verification of a medical or non-medical exemption.**

b) Describe the procedures to conduct outreach for children experiencing homelessness (as defined by the CCDF) and their families. **Information about priority processing and the definition of homeless is included on the multi-program benefit application and there are contracts in place with local child care resource and referral agencies referring families to DHS subsidy programs including child care. Invitations to attend an ERDC partner training on updated policies is extended to organizations providing services to families experiencing homelessness.**

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

3.2.3 Lead Agencies must establish a grace period that allows homeless children and children in foster care to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements (as described in section 5). The length of such a grace period shall be established in consultation with the state, territorial, or tribal health agency (658E(c)(2)(I)(i)(I); 98.41(a)(1)(i)(C)).

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

- a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:
- **Children experiencing homelessness (as defined by CCDF). ERDC is opened immediately for children in families experiencing homelessness. The caretaker must self-report work status and gross family income. After the case is open the family is given 45 days to supply any needed verification, this time period can be extended. Families who mark "no" to immunization are given 12 months to comply with immunization**

**requirements or supply verification of a medical or non-medical exemption.** Provide the citation for this policy and procedure. **OAR 461-170-0150 and OAR 461-175-0300**

- **Children who are in foster care. ERDC is opened immediately for children in foster care. The caretaker must self-report work status and gross family income. After the case is open the family is given 45 days to supply any needed verification, this time period can be extended. Families who mark "no" to immunization are given 12 months to comply with immunization requirements or supply verification of a medical or non-medical exemption.** Provide the citation for this policy and procedure. **OAR 461-170-0150 and OAR 461-175-0300**

- b) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements (98.41(a)(1)(i)(C)(4)). **Families who receive a grace period to comply with immunizations are referred to county public health in order to develop a plan to complete immunizations.**
- c) Does the Lead Agency establish grace periods for other children who are not experiencing homelessness or in foster care?
  - No.
  - Yes. Describe:

### 3.3 Protection for Working Families

#### 3.3.1 12-Month eligibility.

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

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

- a) Describe the Lead Agency's policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements, including when a family experiences a

temporary change in activity. **Families determined eligible for ERDC are given a 12 month certification period. Changes in income do not need to be reported unless income goes above the program exit income limit or the income change is a reduction and will reduce the family copayment. Child care hours can be increased during the certification period, but not decreased. This will allow for continuity of care. Caretakers on medical leave, including maternity leave receive a reduced copayment based on income during the leave period. Caretakers who experience a job loss or medical situations will be given an extended period of up to three months past the certification end date to find new employment or return to work.**

- b) How does the Lead Agency define “temporary change?” **A non-permanent loss of employment meaning the client is laid off with an expected return to work date. The subsidy agency will terminate assistance prior to the 12th month if the parent has a permanent loss of employment. A permanent loss means the caretaker does not plan to return to this employer, or a return to work date was not given to the employee. Clients are given up to three full months with waived copay to locate new employment. When new employment is not reported to the subsidy agency by the end of the client's work search period, the case is closed. A work search notification letter with employment resources, a reminder to report new employment and the case closure date is automatically mailed to the client when a permanent job loss is reported. A second letter is automatically mailed to the client in the closure months.**
- c) Provide the citation for this policy and/or procedure. **OAR’s 461-160-0040, 461-170-0011, 461-170-0150 and 461-180-0005**

### 3.3.2 Option to discontinue assistance during the 12-month eligibility period.

Lead Agencies have the option, but are not required, to discontinue assistance during the 12-month eligibility period due to a parent’s *non-temporary* loss of work or cessation of attendance at a job training or educational program, otherwise known as a parent’s eligible activity (i.e., if the parent experiences a temporary change in his or her status as working or participating in a training or educational program, as described in section 3.3.1 of the plan).

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

- a) Does the Lead Agency choose to discontinue assistance during the 12-month eligibility period due to a parent’s non-temporary loss or cessation of eligible activity and offer a minimum 3-month period to allow parents to engage in a job search and to resume participation in an eligible activity?

- No, the state/territory does not allow this option to discontinue assistance during the 12-month eligibility period due to a parent's *non-temporary* loss of work or cessation of attendance at a job training or educational program.
- Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:
  - iii. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change: **The subsidy agency will terminate assistance prior to the 12th month if the parent has a permanent loss of employment. A permanent loss mean the caretaker does not plan to return to this employer, and a return to work date was not given to the employee. Clients are given up to three full months with waiving the copay to locate new employment. When new employment is not reported to the subsidy agency by the end of the client's work search period the case is closed. A work search notification letter with employment resources, a reminder to report new employment and the case closure date is automatically mailed to the client when a permanent job loss is reported. A second letter is automatically mailed to the client in the closure month.**
  - iv. Describe what specific actions/changes trigger the job-search period. **Client reports a loss of employment without an expected return to work date.**
  - v. How long is the job-search period (must be at least 3 months)? **A minimum of three months. Those reporting an expected return to work date that is later than the three month period are granted a longer work search time frame up to the third month after their certification end date.**
  - vi. Provide the citation for this policy or procedure. OAR's 461-160-0040, 461-170-0011, 461-170-0150 and 461-180-0005.

b) The Lead Agency may discontinue assistance prior to the next 12-month redetermination in the following limited circumstances. Check and describe any circumstances in which the Lead Agency chooses to discontinue assistance prior to the next 12-month redetermination. Check all that apply.

- Not applicable.
- Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.
  - i. Define the number of unexplained absences identified as excessive:
  - ii. Provide the citation for this policy or procedure:
- A change in residency outside of the state, territory, or tribal service area. Provide the citation for this policy or procedure: **OAR 461-120-0010**

- Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility. Describe the violations that lead to discontinued assistance and provide the citation for this policy or procedure. **Child care cases can be closed prior to the end of the 12-month eligibility period if it was found that an applicant provided untrue, incomplete or inaccurate information at the point when their eligibility was determined. OAR 461-105-0020.**

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

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

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

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

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

- No
- Yes

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

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

- Additional changes that may impact a family's eligibility during the 12-month period. Describe: **Income increases over the exit limit, someone moves in or out of the home, someone is no longer working, new employment during work search period, a discharged military member is returning from active duty in a war zone.**
- Changes that impact the Lead Agency's ability to contact the family. Describe: **Change in address.**
- Changes that impact the Lead Agency's ability to pay child care providers. Describe: **Changing or adding a provider; a child moving into or out of the home.**

Any additional reporting requirements that the Lead Agency chooses, as its option to require from parents during the 12-month eligibility period, shall not require an office visit.

In addition, the Lead Agency must offer a range of notification options to accommodate families.

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

- Phone
- Email
- Online forms
- Extended submission hours
- Other. Describe:

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

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

- i. Describe any other changes that the Lead Agency allows families to report. **Changes in income do not need to be reported unless income goes above the program exit income limit or the income change is a reduction and will reduce the family copayment. Child care hours can be increased during the certification period, but not decreased. This will allow for continuity of care. Caretakers on medical leave, including maternity leave receive a reduced copayment based on income during the leave period. Caretakers who experience a job loss or medical situations will be given an extended period of up to three months past the certification end date to find new employment or return to work.**
- ii. Provide the citation for this policy or procedure. **OAR's 461-170-0150, 461-170-0011, 461-160-0040**

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

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

Examples include developing strategies to inform families and their providers of an upcoming redetermination and that information required of the family, pre-populating subsidy renewal forms, having parents confirm that the information is accurate, and/or asking only for the information necessary to make an eligibility redetermination. In addition, states and territories

can offer a variety of family-friendly methods for submitting documentation for eligibility redetermination.

a) Describe the Lead Agency’s procedures and policies to ensure that parents (especially parents receiving TANF program funds) do not have their employment, education, or job training unduly disrupted to comply with the state/territory’s or designated local entity’s requirements for the redetermination of eligibility. List relevant policy citations. **Families are given 45-day notice prior to their benefit end date. A recertification application is automatically sent with the 45 day notice. This gives families advance notice their re-determination due date. A renewal application can be faxed, mailed, hand delivered to a Department of Human Services office. Interviews are conducted via phone; verification of income is done electronically when available, if not available verification can be mailed or faxed. Alignment with other programs when possible. An application for Employment Related Day Care (ERDC) is not required for families transitioning from TANF to ERDC. The caretaker's case manager can setup the ERDC case as soon as employment, wages and work hours are verified. OAR 461-115-0230, 461-115-0050, 461-115-0190, 461-175-0280, 461-175-0222**

b) How are families allowed to submit documentation for redetermination? Check all that apply.

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

### 3.4 Family Contribution to Payments

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

*Note:* To help families transition off of child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. However, section 3.4 applies *only* to families in their initial/entry eligibility period. See section 3.1.4 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

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

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

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Lowest "Entry" Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?	The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?	Highest "Entry" Income Level Before a Family Is No Longer Eligible	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?	The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?
1	N/A	N/A	N/A	N/A	N/A	N/A
2	27	27	100	2537.99	618	24.3
3	27	27	100	3203.99	784	24.4
4	27	27	100	3769.99	903	23.99
5	27	27	100	4535.99	1122	24.7

- b) What is the effective date of the sliding-fee scale(s)? **03/01/2018**
- c) Provide the link to the sliding-fee scale: [https://aix-xweb1p.state.or.us/caf\\_xweb/ERDC/](https://aix-xweb1p.state.or.us/caf_xweb/ERDC/)
- d) If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)). **N/A**

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

- The fee is a dollar amount and:
  - The fee is per child, with the same fee for each child.
  - The fee is per child and is discounted for two or more children.
  - The fee is per child up to a maximum per family.
  - No additional fee is charged after certain number of children.
  - The fee is per family.
  - The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe:
  - Other. Describe:
- The fee is a percent of income and:
  - The fee is per child, with the same percentage applied for each child.
  - The fee is per child, and a discounted percentage is applied for two or more children.
  - The fee is per child up to a maximum per family.
  - No additional percentage is charged after certain number of children.
  - The fee is per family.
  - The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe:

Other. Describe:

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

No.

Yes, check and describe those additional factors below.

Number of hours the child is in care. Describe:

- Lower co-payments for a higher quality of care, as defined by the state/territory. Describe: **Families receive a lower copay when they are using a Spark star rated provider as follows: the \$27 copay is reduced to \$0, copays of \$28 to \$200 are reduced by \$20 a month, copays of \$201 or more are reduced by 10%.**

Other. Describe:

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.45(k)) or for families who are receiving or needing to receive protective services, as determined for purposes of CCDF eligibility, or who meet other criteria established by the Lead Agency (98.45(k)(4)). Does the Lead Agency waive family contributions/co-payments for any of the following? Check all that apply.

No, the Lead Agency does not waive family contributions/co-payments.

Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the poverty level for families of the same size. The poverty level used by the Lead Agency for a family size of 3 is \$.

Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility. Describe the policy and provide the policy citation. .

Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency. Describe the policy and provide the policy citation.

**There are a number of situations where the copayment is waived.**

- Families with \$27 copayment using a Spark rated provider**
- Authorized work search during lapse of employment**
- Head Start Contracted Slots**
- TANF families are not assessed a copayment**

3.4.5 Does the Lead Agency allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

No.

Yes. If yes:

a) Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families? **Oregon does not restrict the**

**right of families to choose child care facilities charging higher than the subsidy rate. The state does not dictate the rates of private businesses.**

- b) Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families. **Oregon does not collect this data.**
- c) Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees. **Current family child care rates are set at the 50<sup>th</sup> percentile for preschool, 90<sup>th</sup> percentile for school-aged children and the 52<sup>nd</sup> percentile for infants and toddlers. Current child care center rates are at the 50<sup>th</sup> percentile for preschool, 90<sup>th</sup> percentile for school-aged children and the 43<sup>rd</sup> percentile for infants and toddlers.**

3.4.6 How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds? Check all that apply.

- Limit the maximum co-payment per family. Describe: **The copayment is determined by calculating a percentage of the family's income at initial certification and recertification only. During the 12-month certification period the copay will not increase even if the clients wage increases.**
- Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and describe.
- Minimize the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5. Describe: **An increased exit limit for subsidy families, assists in closing the gap between the copayment and the total cost of care. This assists in reducing the cliff effect for most subsidy families. The copayment determine at initial eligibility will not increase during the 12-month certification period when the clients wages increase.**
- Other. Describe:

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

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care or care provided in the child's own home. In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care.

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

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling his or her child with a provider that has a grant or contract for providing child care services (658E(c)(2)(A); 98.30(a)). Even if a parent chooses to enroll his or her child with a provider who has a grant or contract, the parent will select the provider, to the extent practicable. If a parent chooses to use a certificate, the Lead Agency shall provide information to the parent on the range of provider options, including care by sectarian providers and relatives. Lead Agencies must require providers chosen by families to meet health and safety standards and has the option to require higher standards of quality. Lead agencies are reminded that any policies and procedures should not restrict parental access to any type of care or provider (e.g. center care, home care, in-home care, for-profit provider, non-profit provider or faith-based provider, etc.) (98.15 (a)(5)).

4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)). **Parents are advised at the time of application about options in selecting a child care provider. This information is offered through verbal and electronic communication from the Department of Human Services and through 211 Info for child care provider referrals.**

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

- Certificate that provides information about the choice of providers
- Certificate that provides information about the quality of providers
- Certificate not linked to a specific provider, so parents can choose any provider
- Consumer education materials on choosing child care
- Referral to child care resource and referral agencies
- Co-located resource and referral in eligibility offices
- Verbal communication at the time of the application
- Community outreach, workshops, or other in-person activities
- Other. Describe:

4.1.3 Child care services available through grants or contracts.

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

No. If no, skip to 4.1.4.

Yes. If yes, describe:

- i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider: **Parents are advised at the time of application about options in selecting a child care provider. This information is offered through verbal and electronic communication from the Department of Human Services and from 211Info child care referrals.**
- ii. The type(s) of child care services available through grants or contracts:
  - **Full-day, full-year child care services with select Spark star-rated Head Start programs with existing contracts.**
  - **Full-day, full-year child care services with select Spark star-rated Early Head Start programs with existing contracts.**
  - **Full-day, full-year child care services with licensed, Spark star-rated child care facilities participating in the Early Head Start Child Care Partnership grant are eligible for contracts. Head Start grantees are not eligible for these contracts.**
  - **Full-day child care services for select teen parent programs as part of the high school completion efforts.**
- iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers):
  - **QRIS Spark-rated Head Start and Early Head Start programs who offer full day, full year child care services.**
  - **Licensed child care programs participating in the Early Head Start Child Care Partnership grant as a non-Head Start Grantee child care partner and meet criteria for contracted slots, are eligible for contracts.**
  - **Teen Parent programs that are part of the statewide public education system.**
- iv. The process for accessing grants or contracts: **For contracts with the Department of Human Services, parent/caretakers who work 25 hours per week or more, have at least one child between the ages of birth to six, meet ERDC eligibility, and have work hours similar to the contracted provider's business hours can be reviewed for a contracted slot. For accessing contracted child care in programs funded by the Early Learning Division,**

**parents must meet specialty program requirements and income eligibility. Teen parents must be participating in the Teen Parent program in the high school.**

- v. How rates for contracted slots are set through grants and contracts: **Contracted payment rates for all contracts are based on the type of care offered and the geographic region of the state (Areas A, B and C).**
  
- vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality: **Oregon entered into contracts with a variety of entities over the years to meet specific child care needs in order to increase the supply of child care to vulnerable populations and to ensure higher quality environments. Future contracts are subject to funding availability and to a competitive procurement process. To maintain current contract status the state requires:**
  - **For Head Start and Early Head Start full-day full-year programs, the program must be QRIS Spark star rated.**
  - **Teen parent programs must be licensed and associated directly with a teen parent public high school completion program.**
  - **To be eligible for a new contract under the Early Head Start Child Care Partnership the facility must be a non-Head Start Grantee, licensed family or center child care program, QRIS Spark star rated and actively participating in the partnership.**
  
- vii. If contracts are offered statewide and/or locally: **Contracts are offered statewide.**

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

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

4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF

funds (658E(c)(2)(B); 98.16(t)). **State licensing regulation includes parental access as a requirement. OARs 414-350-0050(5), 414-300-0030(8), 414-205-0035(13). Department of Human Services subsidy providers must allow the custodial parent of a child in his or her care to have immediate access to the child(ren) at all times per OAR 416-165-0180(7).**

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

- No.
  - Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.
    - Restricted based on minimum the number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements. Describe:
    - Restricted based on the provider meeting a minimum age requirement. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2). Describe: **Provider must be at least 18 years of age.**
    - Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours). Describe:
    - Restricted to care by relatives. Describe:
    - Restricted to care for children with special needs or a medical condition. Describe:
    - Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF. Describe:
    - Other. Describe:

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

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

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

- Provide an overview of the Lead Agency's proposed approach (e.g., cost estimation model, cost study/survey, etc.), including a description of data sources.

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

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

MRS

Alternative methodology. Describe:

Both. Describe:

4.2.2 Prior to developing and conducting the MRS or alternative methodology, the Lead Agency is required to consult with the (1) State Advisory Council or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities and (2) organizations representing caregivers, teachers, and directors prior to developing and conducting the MRS or alternative methodology.

Describe how the Lead Agency consulted with the:

- a) State Advisory Council or other state-designated cross-agency body: **The chairperson of the Child Care and Education Committee of the Early Learning Council is a convener of the Oregon Research Partnership and represented the Early Learning Council in consultation on methodology of the Market Price Study.**
- b) Local child care program administrators: **Child care program administrators were included on the Market Price Study advisory committee.**
- c) Local child care resource and referral agencies: **Child care resource and referral programs are instrumental in developing the protocol for data collection and collecting data for the Market Price Study.**

- d) Organizations representing caregivers, teachers, and directors: **The child care provider union for licensed family child care - the American Federation of State, Municipal and County Employees - were consulted on data collection methodology.**
  - e) Other. Describe: **Members of the Oregon Child Care Research Partnership group, represented by researchers and staff from multiple agencies, and other early learning stakeholders, were consulted on methodology.**
- 4.2.3 Describe how the market rate survey is statistically valid and reliable. To be considered valid and reliable, the MRS must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variations, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data, such as child care resource and referral data, if they are representative of the market. If an alternative methodology, such as cost modeling, is used, demonstrate that the methodology used reliable methods. **The 2018 Oregon Child Care Market Price Study was determined to be valid and reliable based on the completeness of the data, geographic representativeness, response rate and currency of the data. Price data was complete for 86 percent of facilities in the database. The 14 percent not represented included facilities that typically do not charge parents (i.e. Head Start), have complex rates, or choose to discuss rates directly with parents. Price data was collected from all 36 Oregon counties.**
- 4.2.4 Describe how the market rate survey or alternative methodology reflects variations in the price or cost of child care services by:
- a) Geographic area (e.g., statewide or local markets). Describe: **The geographic price analysis identified three geographic market area boundaries that are generally similar to those identified in the previous market rate studies. There are indications that Certified Center and Certified Family providers are beginning to create a small fourth subsection specifically located in western Multnomah County.**
  - b) Type of provider. Describe: **Current rates are collected for all types of licensed child care providers.**
  - c) Age of child. Describe: **Rates were collected for Infants (0-2), toddlers (2-3), preschool (3-6), school-aged school year (6-12 or 17 with verification of special needs), school aged summer only programs.**
  - d) Describe any other key variations examined by the market rate survey or alternative methodology, such as quality level. **N/A**
- 4.2.5 After conducting the market rate survey or alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or alternative methodology. The detailed report must also include the estimated cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. The Lead Agency must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Lead Agency website. The Lead Agency must

describe in the detailed report how the Lead Agency took into consideration the views and comments of the public.

Describe how the Lead Agency made the results of the market rate survey or alternative methodology report widely available to the public (98.45(f)(1)). **Post online; electronic versions emailed to key stakeholders and partners. Hard copies are available on request.**

- a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). **April 11, 2018**
- b) Date the report containing results was made widely available—no later than 30 days after the completion of the report. **April 20, 2018**
- c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted. **An electronic version of the completed Market Price Study is emailed to key stakeholders and partners. Hard copies are available on request. Link to report: <http://www.oregon.gov/DHS/ASSISTANCE/CHILD-CARE/Pages/Publications-Data.aspx>**
- d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report. **The Market Price Study Advisory Committee provided feedback on the report. An electronic version of the completed publication was emailed to stakeholders of the Early Learning Partner Forum with a presentation on April 5, 2018. The draft publication was posted to the Oregon State University, Family Policy Center, Data and Publications website in March 2018. Stakeholder views and comments on readability, comprehension and methodology were provided to the study authors for consideration in the final publication.**

### 4.3 Setting Payment Rates

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

- 4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS) for the following categories below. If the Lead Agency conducted an MRS (only or in combination with an alternative methodology), also report the percentiles based on the most recent MRS. The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. Please use the most populous geographic region (area serving highest number of CCDF children).

- a) Infant (6 months), full-time licensed center care in the most populous geographic region  
Rate \$1255.00 per monthly unit of time (e.g., hourly, daily, weekly, monthly)  
Percentile of most recent MRS: 43rd
- b) Infant (6 months), full-time licensed FCC home in the most populous geographic region  
Rate \$1030.00 per monthly unit of time (e.g., hourly, daily, weekly, monthly)

- Percentile of most recent MRS: 52nd
- c) Toddler (18 months), full-time licensed center care in the most populous geographic region  
Rate \$1255.00 per monthly unit of time (e.g., hourly, daily, weekly, monthly)  
Percentile of most recent MRS: 43rd
- d) Toddler (18 months), full-time licensed FCC care in the most populous geographic region  
Rate \$1030.00 per monthly unit of time (e.g., hourly, daily, weekly, monthly)  
Percentile of most recent MRS: 52nd
- e) Preschooler (4 years), full-time licensed center care in the most populous geographic region  
Rate \$965.00 per monthly unit of time (e.g., hourly, daily, weekly, monthly)  
Percentile of most recent MRS: 50th
- f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region  
Rate \$875.00 per monthly unit of time (e.g., hourly, daily, weekly, monthly)  
Percentile of most recent MRS: 50th
- g) School-age child (6 years), full-time licensed center care in most populous geographic region  
Rate \$850.00 per monthly unit of time (e.g., hourly, daily, weekly, monthly, etc.)  
Percentile of most recent MRS: 90th
- h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region  
Rate \$655.00 per monthly unit of time (e.g., hourly, daily, weekly, monthly)  
Percentile of most recent MRS: 61st
- i) Describe how part-time and full-time care were defined and calculated. **Part-time care for a licensed care provider is defined as 63 to 135 hours of care provided in a single month. Full-time care for a licensed child care provider is defined as at least 136 hours of care provided in a single month.**
- j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). **January 1, 2018**
- k) Provide the citation or link, if available, to the payment rates.  
<http://www.oregon.gov/dhs/assistance/CHILD-CARE/Pages/rates.aspx>
- l) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).
- 4.3.2 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).
- Check and describe the types of tiered reimbursement or differential rates, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, at a

minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS and/or an alternative methodology, and the amount of the rate. Check all that apply.

- Differential rate for *non-traditional hours*. Describe: [REDACTED]
- Differential rate for *children with special needs*, as defined by the state/territory. Describe: **Children with special needs may be evaluated for the high needs supplemental payments through the Inclusive Child Care Program. This can be up to an additional \$5.00 per hour.**
- Differential rate for *infants and toddlers*. Describe: [REDACTED]
- Differential rate for *school-age programs*. Describe: [REDACTED]
- Differential rate for *higher quality*, as defined by the state/territory. Describe: **An additional incentive payment was implemented in April 2016 for high quality providers, rated at a three, four, or five- star on the Oregon Quality Rating and Improvement System, who care for children of families receiving a subsidy. Incentive payment is for full time child care.**
- Other differential rates or tiered rates. Describe: [REDACTED]
- Tiered or differential rates are not implemented.

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

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

- a) Describe how a choice of the full range of providers pursuant to 98.30(e)(1) is made available; the extent to which child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices **Based on the 2018 Oregon Child Care Market Price Study the monthly payment rates for licensed providers are currently set between a range of the 25th percentile to above the 90th percentile. Barriers include Oregon not receiving funding to increase center rates through the collective bargaining process to set rates for licensed child care homes. Child care centers are not unionized and were not represented in the bargaining session to set rate increases during 2017 and 2018.**
- b) Describe how payment rates are adequate and have been established based on the most recent MRS or alternative methodology: **Payment rates are not adequate.**
- c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF. **Base payment rates are adequate to cover requirements for about half of the child care slots available in the state. Of the 36 rates (four age categories x three licensed provider types x three rate areas) six monthly rates are set at or above the 75th percentile, 11 are set between the 60th and 74th percentiles, 9 are set between the 50th and 59th percentile and the other 10 rates fell below the 50th percentile of the 2018 Market Price Study.**
- d) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. **Incentive payments for Spark rated providers were incorporated into the current payment**

structure in 2016 to reflect the higher cost of quality. The incentive increases with each star rating.

- e) How co-payments based on a sliding fee scale reported in 3.4.1 are affordable (response provided in 3.4.6) **The copayment is determined by calculating a percentage of the family's income at initial certification and recertification only. During the 12 month certification period the copay will not increase even if the clients wage increases.**
- f) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers: **Oregon's maximum payment rates currently equal the 75<sup>th</sup> percentile of market prices observed in the 2014 Oregon Child Care Market Price Study. Based on the new 2018 Oregon Child Care Market Price Study the rates have dropped to lower percentiles meaning families have less access to the full range of providers. The Oregon Legislature did not support rate increases for Certified Center's as they were not included in the collective bargaining process for licensed home-based providers since centers are not unionized.**
- g) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.
- Geographic area. Describe: **Oregon has three different rate areas based on clustering of payment rates into rate area A (larger metropolitan and areas surrounding large state universities), rate area B (smaller metropolitan areas) and rate area C (rural).**
  - Type of provider. Describe: **Rates are collected for licensed child care providers including small home based (Registered Family), large home based (Certified Family) and centers (Certified Centers).**
  - Age of child. Describe: **For licensed care age categories include infant (0-24), toddler (2-3), preschool (3-6) and school-aged (6-13 or under 18 with additional requirements)**
  - Quality level. Describe: **Add-on incentive payments for QRIS rated providers was supported by the Oregon Legislature and were incorporated into the current payment structure in 2016.**
  - Other.
- h) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access:
- Payment rates are set at the 75th percentile or higher of the most recent survey. Describe:
  - Feedback from parents, including parent surveys or parental complaints. Describe:
  - Other. Describe: **Spark incentive payments allow additional access when the providers' rate falls below the base DHS payment rates.**

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

Lead Agencies are required to demonstrate that they have established payment practices applicable to all CCDF child care providers that include ensuring the timeliness of payments by

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

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

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

4.5.1 Certify by describing the payment practices that the Lead Agency has implemented for all CCDF child care providers,

- a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):
  - Paying prospectively prior to the delivery of services. If implemented describe the policy or procedure.
  - Paying within no more than 21 calendar days of the receipt of a complete invoice for services. If implemented describe the policy or procedure. **Payments are made within three to five business days of receipt of billing for services for ERDC. Special Populations contractors are paid within than 21 days of billing.**
- b) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by:
  - Paying based on a child's enrollment rather than attendance. If implemented describe the policy or procedure.
  - Providing full payment if a child attends at least 85 percent of the authorized time. If implemented describe the policy or procedure.
  - Providing full payment if a child is absent for 5 or fewer days in a month. If implemented describe the policy or procedure. **Providers may bill for absent days. The Department of Human Services can pay for up to five days when a child is absent from care and the**

**child was scheduled to be in care, and it is the provider's policy to bill for absent days and the absent time is indicated on the child's attendance log. Department of Human Services will not pay for more than five consecutive days of scheduled care for which the child is absent.**

- Use an alternative approach for which the Lead Agency provides a justification in its Plan. If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach. [REDACTED]
- c) Reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies, which must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)). [REDACTED]

Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time). Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time). **The part-time monthly rate applies if the provider has an established part-time monthly rate and the children are in care between 63 and 135 hours per month and the provider is designated as the primary provider for the family case. For these providers, the hourly rate applies when children are in care less than 63 hours per month. The full-time monthly rate applies when children are in care 136 hours or more per month and when the provider is designated as the primary provider for the family case. Contracted slots are paid at the full-time monthly rate.**
- Paying for reasonable mandatory registration fees that the provider charges to private-paying parents. Describe the policy or procedure. [REDACTED]
- d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe: [REDACTED]
- e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur. Describe: [REDACTED]
- f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe: **Providers are given 90 days before a billing form is considered expired and no longer valid for payment for ERDC. When a provider has a good cause for not submitting a billing form the Department of Human Services Direct Pay Unit will cancel and reissue the billing for payment. The Direct Pay Unit works with providers, parents and the Department of Human Services staff to resolve payment inaccuracies or disputes as quickly as possible. If a determination cannot be reached the Direct Pay Unit and providers can contact the Department of Human Services Child Care Policy Unit as another avenue to review the situation. When a family child care provider disagrees with the outcome of a payment dispute a grievance can be filed with the union representing the provider.**

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

- No, the practices do not vary across areas.
- Yes, the practices vary across areas. Describe:

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

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

4.6.1 For each of the following types of providers, identify any shortages in the supply of quality child care providers, the data sources used to identify shortages, and the method of tracking progress to support equal access and parental choice.

- a) Children in underserved areas: **There is always a shortage of child care in rural areas of the state. Parent and referral data from Oregon’s child care resource and referral system and the 2017 Oregon Child Care Market Price Study are used to analyze supply needs. The Early Learning Hubs have been tasked with using data to identify child care deserts in their communities where efforts will focus on increasing the number of Spark rated providers.**
- b) Infants and toddlers: **There is a shortage of child care slots for infants and toddlers across the state. Parent and referral data from Oregon’s child care resource and referral system and the 2017 Oregon Child Care Market Price Study are used to analyze supply needs.**
- c) Children with disabilities (include the Lead Agency definition in the description): **There is a shortage of child care providers trained and able to care for children with disabilities. Parent and referral data from Oregon’s child care resource and referral system and the 2017 Oregon Child Care Market Price Study are used to analyze supply needs.**
- d) Children who received care during non-traditional hours: **There is a shortage of child care providers willing to care for children during non-traditional hours. Parent and referral data from Oregon’s child care resource and referral system and the 2017 Oregon Child Care Market Price Study are used to analyze supply needs.**
- e) Other. Please describe any other shortages in the supply of high-quality providers.

4.6.2 Based on the analysis in 4.6.1, describe what method(s) is used to increase supply and to improve quality for the following.

- a) Infants and toddlers. Check all that apply.
  - Grants and contracts (as discussed in 4.1.3)
  - Family child care networks
  - Start-up funding
  - Technical assistance support
  - Recruitment of providers
  - Tiered payment rates (as discussed in 4.3.2)
  - Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging

- Other. Describe:
- b) Children with disabilities. Check all that apply.
- Grants and contracts (as discussed in 4.1.3)
  - Family child care networks
  - Start-up funding
  - Technical assistance support
  - Recruitment of providers
  - Tiered payment rates (as discussed in 4.3.2)
  - Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
  - Other. Describe:
- c) Children who receive care during non-traditional hours. Check all that apply.
- Grants and contracts (as discussed in 4.1.3)
  - Family child care networks
  - Start-up funding
  - Technical assistance support
  - Recruitment of providers
  - Tiered payment rates (as discussed in 4.3.2)
  - Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
  - Other. Describe:
- d) Other. Check and describe:
- Grants and contracts (as discussed in 4.1.3). Describe:
  - Family child care networks. Describe:
  - Start-up funding. Describe:
  - Technical assistance support. Describe:
  - Recruitment of providers. Describe:
  - Tiered payment rates (as discussed in 4.3.2)
  - Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging. Describe:
  - Other. Describe:

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

- a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment? **For subsidy purposes the Lead Agency has been directed by the state legislature to consider any family at or below 250% of the Federal Poverty Limit as low-income. In planning for statewide services, the Early Learning Division provides statistical information on the percent of free and reduced lunch in each school catchment area to the Early Learning Hubs as a baseline for program development. Each Early Learning Hub is**

**required to consider available data to identify high pockets of poverty and unemployment when designing and supporting early learning services. State investments prioritize funding to areas with significant concentrations of poverty.**

- b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs. **The Early Learning Division requires contractors to prioritize resources towards children and providers serving children furthest from opportunity, including children experiencing poverty and geographic diversity. In addition, there are specific initiatives targeting providers who serve children in areas of significant concentrations of poverty. The Family Focused Child Care Networks are designed to target providers in areas with low supply of high quality programs and families experiencing poverty. Spark rated programs receive additional subsidy incentive payments to help create access to high quality programs for families experiencing poverty. Spark revisions will include prioritizing supports towards providers serving children experiencing poverty (and other indicators). Additionally, the lead agency has multiple initiatives providing early educators who are serving geographically specific areas with professional development opportunities as a strategy to increase quality of care, such as multilingual college and training paths.**



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

Lead Agencies are required to certify that there are in effect licensing requirements applicable to child care services in the state/territory. States and territories may allow licensing exemptions, but they must describe how such exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care. Lead Agencies also must certify that there are in effect health and safety requirements applicable to providers serving CCDF children. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures to ensure that providers are complying with the health and safety requirements.

This section covers licensing requirements, health and safety requirements and training, and monitoring and enforcement procedures to ensure that child care providers comply with licensing and health and safety requirements (98.16(n)) as well as exemptions (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)). Criminal background check requirements are included in this section (98.16(o)).

### 5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of CCDF providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.409(a)(2)(iv)).

- 5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory and note if providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E(c)(2)(F); 98.40(a)(2)).

**Oregon has three categories of licensed child care. “Certified Child Care Center” means: a facility that is certified to care for 13 or more children, or a facility that is certified to care for 12 or fewer children and located in a building constructed as other than a single family dwelling. “Certified Family Child Care Home” means: a child care facility located in a building constructed as a single family dwelling that has certification to care for a maximum of 16 children at any one time. “Registered Family Child Care Home” means the residence of the provider, who has a current family child care registration at that address and who provides care in the family living quarters.**

**License exempt homes (caring for three or fewer children or children from one family) and relatives are exempt from licensing. Also exempt from licensing are facilities operated by a school district, a**

political subdivision of Oregon, or a government agency. There are safeguards and program requirements in place to ensure children's safety.

All exempt child care providers, household members and other subject individuals must complete and pass a criminal background check prior to becoming eligible for payment. In-home providers and exempt centers must complete a training that covers child care facility health and safety standards.

OAR 461-165-0180 outlines the eligibility requirements for child care providers to receive subsidy payment from Department of Human Services. This includes health and safety standards such as background checks, standards for the home/facility, supervision of children and protection from infectious diseases, compliance with state and federal laws related to child safety systems and seat belts in vehicles, bicycle safety, and crib standards under 16 CFR 1219 and 1220, placing infants to sleep on their backs, etc.

Providers are also required to report changes for everyone subject to a background check such as arrests, convictions and involvement with Child Protective Services. They must also report any new persons in the home or facility and change of address. This may result in a new background check. Providers must meet all health and safety requirements. Department of Human Services may request evidence of compliance.

Each provider must:

- a. Allow the department to inspect the site of care while child care is provided.
- b. Keep daily attendance records showing the arrival and departure times for each child in care and billing records for each child receiving child care benefits from the department. The provider must keep written records of any attendance. These written records must be retained for a minimum of 12 months and provided to the department upon request.
- c. Be the individual or facility listed as providing the child care. The provider may only use someone else to supervise a child on a temporary basis if the person was included on the most current listing form and the provider notifies the Department of Human Services Direct Pay Unit.
- d. Not bill a department client for an amount collected by the department to recover an overpayment or an amount paid by the department to a creditor of the provider because of a lien, garnishment, or other legal process.
- e. Report to the Department of Human Services Direct Pay Unit within five days of occurrence:
  - A. Any arrest or conviction of any subject individual or individual described in section (4) of this rule.
  - B. Any involvement of any subject individual or individual described in section (4) of this rule with Child Protective Services or any other agencies providing child or adult protective services.
  - C. Any change to the provider's name or address including any location where care is provided.
  - D. The addition of any subject individual or individual described in section (4) of this rule.

- E. Any reason the provider no longer meets the requirements under this rule.**
- f. Report suspected child abuse of any child in his or her care to Child Protective Services or a law enforcement agency.**
- g. Supervise each child in care at all times.**
- h. Prevent any individual who behaves in a manner that may harm children from having access to a child in the care of the provider. This includes anyone under the influence (see section (11) of this rule).**
- i. Allow the custodial parent of a child in his or her care to have immediate access to the child at all times.**
- j. Inform a parent of the need to obtain immunizations for a child.**
- k. Take reasonable steps to protect a child in his or her care from the spread of infectious diseases.**
- l. Ensure that the home or facility where care is provided meets all of the following standards:**
  - A. Each floor level used by a child has two usable exits to the outdoors (a sliding door or window that can be used to evacuate a child is considered a usable exit). If a second floor is used for child care, the provider must have a written plan for evacuating occupants in the event of an emergency.**
  - B. The home or facility has safe drinking water.**
  - C. The home or facility has a working smoke detector on each floor level and in any area where a child naps.**
  - D. Each fireplace, space heater, electrical outlet, wood stove, stairway, pool, pond, and any other hazard has a barrier to protect a child. Gates and enclosures have the Juvenile Products Manufacturers Association certification seal to ensure safety.**
  - E. Any firearm, ammunition, and other items that may be dangerous to children, including but not limited to alcohol, inhalants, tobacco and e-cigarette products, matches and lighters, any legally prescribed or over-the-counter medicine, cleaning supplies, paint, plastic bags, and poisonous and toxic materials are kept in a secure place out of a child's reach.**
  - F. The building, grounds, any toy, equipment, and furniture are maintained in a clean, sanitary, and hazard-free condition.**
  - G. The home or facility has a telephone in operating condition.**
  - H. No one may smoke or carry any lighted smoking instrument, including e-cigarettes or vaporizers, in the home or facility or within ten feet of any entrance, exit, window that opens, or any ventilation intake that serves an enclosed area, during child care operational hours or anytime child care children are present. No one may use smokeless tobacco in the home or facility during child care operational hours or anytime child care children are present. No one may smoke or carry any lighted smoking instrument, including e-cigarettes and vaporizers, or use smokeless tobacco in motor vehicles while child care children are passengers.**

- I. **No one may consume alcohol or use controlled substances (except legally prescribed and over-the-counter medications) or marijuana (including medical marijuana) on the premises (see section (11) of this rule) during child care operational hours or anytime child care children are present. No one under the influence of alcohol, controlled substances (except legally prescribed and over-the-counter medications) or marijuana (including medical marijuana) may be on the premises during child care operational hours or anytime child care children are present. No one may consume alcohol or use controlled substances (except legally prescribed and over-the-counter medications) or marijuana (including medical marijuana) in motor vehicles while child care children are passengers.**
- J. **Is not a half-way house, hotel, motel, shelter, or other temporary housing such as a tent, trailer, or motor home. The restriction in this paragraph does not apply to licensed (registered or certified) care approved in a hotel, motel, or shelter.**
- K. **Is not a structure --**
  - **Designed to be transportable; and**
  - **Not attached to the ground, another structure, or to any utilities system on the same premises.**
- L. **Controlled substances (except lawfully prescribed and over-the-counter medications), marijuana (including medical marijuana, marijuana edibles, and other products containing marijuana), marijuana plants, derivatives, and associated paraphernalia may not be on the premises during child care operational hours or anytime child care children are present.**

5.1.2 Which providers in your state/territory are subject to licensing under this CCDF category? Check all that apply and provide a citation to the licensing rule.

- **Center-based child care. Provide a citation: “Certified Child Care Center” means: a facility that is certified to care for 13 or more children, or a facility that is certified to care for 12 or fewer children and located in a building constructed as other than a single family dwelling.**  
[https://secure.sos.state.or.us/oard/displayDivisionRules.action;JSESSIONID\\_OARD=HNpP23xFsSTN\\_E9KLiWoP8Y0Qigllena2wVhmKY0h\\_XytSBIXIRF!349448965?selectedDivision=1908](https://secure.sos.state.or.us/oard/displayDivisionRules.action;JSESSIONID_OARD=HNpP23xFsSTN_E9KLiWoP8Y0Qigllena2wVhmKY0h_XytSBIXIRF!349448965?selectedDivision=1908)
- **Family child care. Provide a citation: “Certified Family Child Care Home” means: a child care facility located in a building constructed as a single family dwelling that has certification to care for a maximum of 16 children at any one time. “Registered Family Child Care Home” means the residence of the provider, who has a current family child care registration at that address and who provides care in the family living quarters.**  
**Certified Family Child Care:**  
<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1909>  
**Registered Family Child Care:**  
<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1906>

In-home care. Provide a citation: **N/A**

5.1.3 Are any providers in your state/territory that fall under this CCDF category exempt from licensing (98.40(2)(i) through (iv))? If so, describe exemptions based on length of day, threshold on the number of children in care, or any other factors applicable to the exemption.

- Center-based child care. If checked, describe the exemptions. **Facilities operated by a school district, a political subdivision of Oregon, or a government agency.**
- Family child care. If checked, describe the exemptions. **License exempt homes (caring for three or fewer children or children from one family) and relatives are exempt from licensing.**
- In-home care. If checked, describe the exemptions. **License exempt homes (caring for three or fewer children or children from one family) and relatives are exempt from licensing.**

5.1.4 Describe how any exemptions identified above do not endanger the health, safety, or development of children in:

- a) Center-based child care if checked in 5.1.3. **Safeguards and program requirements are in place in center-based care, family child care and in-home care to ensure children's safety: All exempt child care providers, household members and other subject individuals must complete and pass a criminal background check prior to becoming eligible for payment. In-home providers and exempt centers must complete a training that covers basic child care facility health and safety standards. Annual health and safety monitoring visits are conducted for all license exempt facilities receiving CCDF subsidy. See 5.5.1 for rules.**
- b) Family child care if checked in 5.1.3e. **Safeguards and program requirements are in place in center-based care, family child care and in-home care to ensure children's safety: All exempt child care providers, household members and other subject individuals must complete and pass a criminal background check prior to becoming eligible for payment. In-home providers and exempt centers must complete a training that covers basic child care facility health and safety standards. Annual health and safety monitoring visits are conducted for all license exempt facilities receiving CCDF subsidy. See 5.5.1 for rules.**
- c) In-home care if checked in 5.1.3. **Safeguards and program requirements are in place in center-based care, family child care and in-home care to ensure children's safety: All exempt child care providers, household members and other subject individuals must complete and pass a criminal background check prior to becoming eligible for payment. In-home providers and exempt centers must complete a training that covers basic child care facility health and safety standards. Annual health and safety monitoring visits are conducted for all license exempt facilities receiving CCDF subsidy. See 5.5.1 for rules.**

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

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

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

#### a) Licensed CCDF center-based care

##### 1. Infant

- How does the State/territory define infant (age range): **"Infant" means a child who is a least six weeks of age but is not yet walking alone.**
- Ratio: **1:4**
- Group size: **8**
- Teacher/caregiver qualifications: Infant lead teacher: **at least 18 years of age with a minimum of documentation of attaining step 8.5 in the Oregon Registry or at least two years of qualifying teacher experience in the care of infants and/or toddlers; or a one year state or nationally recognized credential. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect must be completed during a 90 day orientation period and before having unsupervised access to children.**
- and assistant teacher qualifications: **at least 18 years of age with documentation of attaining step 8 in the Oregon Registry or completion of 15 credits of training at a college or university in ECE or Child Development and at least six months qualifying teaching experience in the care of infants and/or toddlers. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect must be completed during a 90 day orientation period and before having unsupervised access to children.**

##### 2. Toddler

- How does the State/territory define toddler (age range): **"Toddler" means a child who is able to walk alone but is under 36 months of age. "Younger toddler" means a child who is able to walk alone but is under 24 months of age. Younger toddler ratio is 1:4, group size 8. Older toddler means a child who is 24 months of age but under 36 months of age.**
- Ratio: **1:5**
- Group size: **10**
- Teacher/caregiver qualifications: Toddler lead teacher **must be at least 18 years of age with a minimum of documentation of attaining step 8.5 in the Oregon Registry or at least two years of qualifying teacher experience in the care of infants and/or toddlers; or a one year state or nationally recognized credential. All new staff members are**

required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect must be completed during a 90 day orientation period and before having unsupervised access to children.

- and assistant teacher qualifications: **Must be at least 18 years of age with documentation of attaining step 8 in the Oregon Registry or completion of 15 credits of training at a college or university in ECE or Child Development and at least six months qualifying teaching experience in the care of infants and/or toddlers. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant/child CPR and a course on recognizing and reporting child abuse and neglect must be completed during a 90 day orientation period and before having unsupervised access to children.**

### 3. Preschool

- How does the State/territory define preschool (age range): **“Preschool-Age Child” means a child 36 months of age to eligible to be enrolled in the first grade and, during the months of summer vacation from school, eligible to be enrolled in the first grade in the next school year. For purposes of these rules, children attending kindergarten may be considered school-age children.**
- Ratio: **1:10**
- Group size: **20**
- Teacher/caregiver qualifications: **Preschool lead teacher at least 18 years of age with a minimum of documentation of attaining step 8.5 in the Oregon Registry or at least two years of qualifying teacher experience in the care of preschool-age children; or a one year state or nationally recognized credential. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**
- and assistant teacher qualifications: **at least 18 years of age with documentation of attaining step 8 in the Oregon Registry or completion of 15 credits of training at a college or university in ECE or Child Development and at least six months qualifying teaching experience in the care of preschool-age children. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**

### 4. School-age

- How does the State/territory define school-age (age range): **“School-Age Child” means a child eligible to be enrolled in the first grade or above and, during the months of**

summer vacation from school, a child eligible to be enrolled in the first grade or above in the next school year, up to age 13. For purposes of these rules, children attending kindergarten may be considered school-age children.

- Ratio: **1:15**
  - Group size: **30**
  - Teacher/caregiver qualifications: School-Age lead teacher **at least 18 years of age with a minimum of documentation of attaining step 8.5 in the Oregon Registry or at least two years of qualifying teacher experience in the care of school-age; or a one year state or nationally recognized credential** All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.
  - and assistant teacher qualifications **must be at least 18 years of age with documentation of attaining step 8 in the Oregon Registry or completion of 15 credits of training at a college or university in ECE or Child Development and at least six months qualifying teaching experience in the care of school-age children. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**
5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers. **Exempt child care centers are required to maintain the same ratios as licensed centers. There are no teacher qualifications required for license exempt centers. All center staff must complete required training prior to having unsupervised access to children.**
  6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups. **Ratios, group sizes and qualifications must meet the requirements for the youngest age group in the mixed classroom.**
  7. Describe the director qualifications for licensed CCDF center-based care. **Must be at least 21 years of age with one year training or experience in management and supervision of adults; and knowledge of child development for the ages served in the center or documentation of step 9 on the Oregon Registry or equivalent knowledge evidenced by a combination of professional references, education, experience and training. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**

b) Licensed CCDF family child care provider (**Certified Family Child Care Homes**)

1. Infant

- How does the State/territory define infant (age range): **“Infant” means a child who is at least six weeks of age but is not yet walking alone.**
- Ratio: **1:4**
- Group size: **12**
- Teacher/caregiver qualifications: Infant lead teacher: **One year experience as a family child care provider, or experience in center based setting, or 30 quarter college credits in Early Childhood Education; or documentation of step 8 on the Oregon Registry; or a one year state or nationally recognized credential. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**
- and assistant qualifications: **be at least 15 years of age and work under the direct supervision of the provider. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**

## 2. Toddler

- How does the State/territory define toddler (age range): **“Toddler” means a child who is able to walk alone but is under 36 months of age. “Younger Toddler” means a child who is able to walk alone but is under 24 months of age; “Older Toddler” means a child who is at least 24 months of age but under 36 months of age.**
- Ratio: **1:4**
- Group size: **12**
- Teacher/caregiver qualifications: Toddler lead teacher **One year experience as a family child care provider, or experience in center based setting, or 30 quarter college credits in Early Childhood Education; or documentation of step 8 on the Oregon Registry; or a one year state or nationally recognized credential, All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**
- and assistant qualifications: **be at least 15 years of age and work under the direct supervision of the provider. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**

## 3. Preschool

- How does the State/territory define preschool (age range): **“Preschool-Age Child” means a child 36 months of age to eligible to be enrolled in the first grade and,**

during the months of summer vacation from school, eligible to be enrolled in the first grade in the next school year.

- Ratio: **1:10**
- Group size: **12**
- Teacher/caregiver qualifications: **Preschool lead teacher One year experience as a family child care provider, or experience in center based setting, or 30 quarter college credits in Early Childhood Education; or documentation of step 8 on the Oregon Registry; or a one year state or nationally recognized credential. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**
- and assistant qualifications: **be at least 15 years of age and work under the direct supervision of the provider. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**

#### 4. School-age

- How does the State/territory define school-age (age range): **“School-Age Child” means a child eligible to be enrolled in the first grade or above and, during the months of summer vacation from school, a child eligible to be enrolled in the first grade or above in the next school year.**
- Ratio: **1:15**
- Group size: **16**
- Teacher/caregiver qualifications: **School-Age lead teacher One year experience as a family child care provider, or experience in center based setting, or 30 quarter college credits in Early Childhood Education; or documentation of step 8 on the Oregon Registry; or a one year state or nationally recognized credential. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**
- and assistant qualifications: **be at least 15 years of age and work under the direct supervision of the provider. All new staff members are required to receive orientation within the first two weeks of employment. The orientation includes training on contents of child care licensing rules that cover the health and safety requirements referenced in 5.1.6. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period.**

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes. **Exempt family home providers**

**may not care for more than three children, unless the children are from one family. The provider's children do not count.**

c) In-home CCDF providers: N/A

1. Describe the ratios.
2. Describe the group size.
3. Describe the threshold for when licensing is required.
4. Describe the maximum number of children that are allowed in the home at any one time.
5. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size.
6. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day.

#### 5.2.2 Health and safety standards for CCDF providers.

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

To certify, describe how the following health and safety standards for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(l)). Note – This question is different from the health and safety training requirements, which are addressed in question 5.2.3.

1. Prevention and control of infectious diseases (including immunization).
  - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **All licensed and license exempt CCDF provider rules cover prevention and control of infectious disease. All rule sets cover cleaning and sanitation, immunizations, and hand washing.**

- List the citation for these requirements. **All requirements are established in rule:**

<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1904>

<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1906>

<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1909>

<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1908>

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **Rule for child care centers vary from home based care due to use of commercial buildings with different environmental health requirements.**
  - Describe any variations based on the age of the children in care. **N/A**
  - Describe if relatives are exempt from this requirement. **Yes, relatives are exempt from inspections but are required to meet minimum health and safety standards including immunizations requirements.**
2. Prevention of sudden infant death syndrome and the use of safe-sleep practices
- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **Safe sleep practices are in rule for all types of care. This include rules on sleep furniture, bedding, and placing the infant on their backs for sleeping.**
  - List the citation for these requirements. **Same as 5.2.2 - 1**
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  - Describe any variations based on the age of the children in care. **Rules apply to infants only.**
  - Describe if relatives are exempt from this requirement. **Relatives are exempt.**
3. Administration of medication, consistent with standards for parental consent
- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **All types of care require parental consent and labeling with the child's name.**
  - List the citation for these requirements. **Same as 5.2.2 - 1**
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  - Describe any variations based on the age of the children in care.
  - Describe if relatives are exempt from this requirement. **Relatives are exempt.**
4. Prevention of and response to emergencies due to food and allergic reactions
- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **Specific care plans are required for children enrolled who have allergies.**
  - List the citation for these requirements. **Same as 5.2.2 - 1**
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  - Describe any variations based on the age of the children in care.
  - Describe if relatives are exempt from this requirement. **Relatives are exempt**

5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic
  - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **Building and physical premises rules are built in to each type of child care and cover all areas required.**
  - List the citation for these requirements. **Same as 5.2.2 - 1**
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **Rules vary according to whether the facility is a family home or a commercial building.**
  - Describe any variations based on the age of the children in care.
  - Describe if relatives are exempt from this requirement. **Relatives are exempt.**
  
6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment.
  - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **Rules require precautions to prevent head trauma and shaken baby, child maltreatment is covered throughout the health and safety rule for all types of care.**
  - List the citation for these requirements. **Same as 5.2.2 - 1**
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  - Describe any variations based on the age of the children in care.
  - Describe if relatives are exempt from this requirement. **Relatives are exempt.**
  
7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.
  - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **All sets of rules require child care providers to have an emergency preparedness and response plan meeting the requirements of CCDF rule. Practice drills are required.**
  - List the citation for these requirements. **Same as 5.2.2 - 1**
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **Licensed child care centers are required to conduct drills more frequently than family based providers.**
  - Describe any variations based on the age of the children in care.
  - Describe if relatives are exempt from this requirement. **Relatives are exempt.**

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants
  - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **All licensed and exempt CCDF providers are required to appropriately dispose of bio-contaminants and keep hazardous materials away from children under lock.**
  - List the citation for these requirements. **Same as 5.2.2 - 1**
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  - Describe any variations based on the age of the children in care.
  - Describe if relatives are exempt from this requirement. **Relatives are exempt.**
  
9. Precautions in transporting children (if applicable)
  - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **If providers transport children, they must meet rules for child safety systems and supervision for all types of licensed and exempt CCDF care. Rules define and restrict use of certain vehicles manufactured to carry 10 or more passengers.**
  - List the citation for these requirements. **Same as 5.2.2 - 1**
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  - Describe any variations based on the age of the children in care.
  - Describe if relatives are exempt from this requirement. **Relatives are exempt.**
  
10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification
  - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **All licensed and license exempt providers are required to have a pediatric first aid and CPR certification. This applies to all directors and caregiving staff members at centers.**
  - List the citation for these requirements. **Same as 5.2.2 - 1**
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  - Describe any variations based on the age of the children in care.
  - Describe if relatives are exempt from this requirement. **Relatives are exempt.**
  
11. Recognition and reporting of child abuse and neglect
  - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **All caregivers in all settings are required to report any suspected abuse or harm to a child.**
  - List the citation for these requirements. **Same as 5.2.2 - 1**
  - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

- Describe any variations based on the age of the children in care.
- Describe if relatives are exempt from this requirement. **Relatives are exempt.**

a) The Lead Agency may also include optional standards related to the following:

1. Nutrition

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **All types of care are required to meet USDA Child and Adult Care Food Program standards.**
- List the citation for these requirements. **Same as 5.2.2 - 1**
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
- Describe if relatives are exempt from this requirement.

2. Access to physical activity

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **Rules for all types of care require providers to have physical activities available to children.**
- List the citation for these requirements. **Same as 5.2.2 - 1**
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **Certified Centers and Certified Family Homes outline specific requirements for running, climbing and other vigorous physical activities.**
- Describe if relatives are exempt from this requirement. **Relatives are exempt from this requirement.**

3. Caring for children with special needs

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) Rule sets for licensed facilities require that if a child with special needs requires a specific plan, the plan shall be developed in writing with the staff and parents and all staff must be fully aware of the plan.
- List the citation for these requirements. **Same as 5.2.2 - 1**
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **Rules apply to licensed care only.**
- Describe if relatives are exempt from this requirement. **Relatives are exempt.**

4. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)). Describe:

- Provide a brief summary of how the standard(s) is defined (i.e., what is the standard, content covered, practices required, etc.)
- List the citation for these requirements. Same as 5.2.2 - 1

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
- Describe if relatives are exempt from this requirement.

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

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

#### **Pre-Service or Orientation Training Requirements**

- a) Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:
  1. Licensed child care centers: **Licensed Certified Child Care Centers contain in rule minimum standards that meet all of the health and safety training requirements. All new staff members are required to receive orientation within the first two weeks of employment which includes training on contents of licensing rules that cover the health and safety requirements. Introduction to Child Care Health and Safety must be completed within 30 days of hire if not completed pre-service. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period. Total hours for orientation period training that covers all ten required topics is approximately 12 hours**
  2. Licensed FCC homes: **Licensed Certified Child Care Homes contain in rule minimum standards that meet all of the health and safety training requirements. All new staff members are required to receive orientation within the first two weeks of employment which includes training on contents of licensing rules that cover the health and safety requirements. Introduction to Child Care Health and Safety must be completed within 30 days of hire if not completed pre-service. First Aid and Infant Child CPR and a course on recognizing and reporting child abuse and neglect can be completed during a 90 day orientation period. Total hours for orientation period training that covers all ten required topics is approximately 12 hours.**
  3. In-home care: **For licensed Registered Family Child Care Homes, all health and safety training is completed pre-service. The health and safety trainings and orientation total 10 hours and include all ten topics.**

4. Variations for exempt provider settings: **For license exempt CCDF providers, all health and safety training is completed pre-service. The health and safety trainings and orientation total 10 hours and include all ten topics.**
- b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer) **Providers at child care centers have up to 90 days to complete first aid and CPR. All other pre-service or orientation requirements must be completed before staff members have unsupervised access to children.**
- c) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).
  1. Prevention and control of infectious diseases (including immunizations)
    - Provide the citation for this training requirement.  
<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1904>  
<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1906>  
<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1909>  
<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1908>
    - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
      - Yes**
      - No**
  2. Prevention of sudden infant death syndrome and the use of safe-sleep practices
    - Provide the citation for this training requirement. **Same as 5.2.3.c.1**
    - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
      - Yes**
      - No**
  3. Administration of medication, consistent with standards for parental consent
    - Provide the citation for this training requirement. **Same as 5.2.3.c.1**
    - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
      - Yes**
      - No**
  4. Prevention and response to emergencies due to food and allergic reactions
    - Provide the citation for this training requirement. **Same as 5.2.3.c.1**
    - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
      - Yes**

No

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

- Provide the citation for this training requirement. **Same as 5.2.3.c.1**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

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

- Provide the citation for this training requirement. **Same as 5.2.3.c.1**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

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

- Provide the citation for this training requirement. **Same as 5.2.3.c.1**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

- Provide the citation for this training requirement. **Same as 5.2.3.c.1**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

9. Appropriate precautions in transporting children (if applicable)

- Provide the citation for this training requirement. **Same as 5.2.3.c.1**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

10. Pediatric first aid and CPR certification

- Provide the citation for this training requirement. **Same as 5.2.3.c.1**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

- Yes
- No

11. Recognition and reporting of child abuse and neglect

- Provide the citation for this training requirement. **Same as 5.3.2.c.1 The State requires all caregivers in licensed child care facilities to complete a two hour child abuse and neglect recognition and reporting training based on Oregon Law. Beginning September 2016, Regulated Subsidy providers are required to complete a training on recognizing and reporting child abuse and neglect.**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
  - Yes
  - No

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

- Provide the citation for this training requirement. **Same as 5.3.2.c.1**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
  - Yes
  - No

13. Describe other requirements

- Provide the citation for other training requirements.
- Does the state/territory require that this training topic(s) be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
  - Yes
  - No

### Ongoing Training Requirements

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

- a) Licensed child care centers: **The state requires that the director, head teacher and all teachers shall participate yearly in at least 15 clock hours of training or education related to child care, of which at least eight clock hours shall be in child development or early childhood education.**
- b) Licensed FCC homes: **The state requires that the provider and all caregivers who function as substitute providers and assistant II staff in a Certified Family Child Care Home, including volunteers, shall participate yearly in at least 15 clock hours of training related to child care, of which at least eight clock hours shall be in child development or early childhood education. Registered Family Child Care Providers complete 10 hours of training for every two year renewal period.**

c) In-home care: **License exempt in-home care providers are required to complete 6 hours of training every two year re-certification period.**

d) Variations for exempt provider settings: All license exempt CCDF Providers are required to complete 6 hours of training every two year re-certification period.

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

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

- Provide the citation for this training requirement.
- How often does the state/territory require that this training topic be completed?
  - Annually
  - Other. Describe:

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

- Provide the citation for this training requirement.
- How often does the state/territory require that this training topic be completed?
  - Annually
  - Other. Describe:

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

- Provide the citation for this training requirement.
- How often does the state/territory require that this training topic be completed?
  - Annually
  - Other. Describe:

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

- Provide the citation for this training requirement.
- How often does the state/territory require that this training topic be completed?
  - Annually
  - Other. Describe:

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

- Provide the citation for this training requirement.
- How often does the state/territory require that this training topic be completed?
  - Annually
  - Other. Describe:

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

- Provide the citation for this training requirement.
- How often does the state/territory require that this training topic be completed?
  - Annually

- Other. Describe:
7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event
- Provide the citation for this training requirement.
  - How often does the state/territory require that this training topic be completed?
    - Annually
    - Other. Describe:
8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants
- Provide the citation for this training requirement.
  - How often does the state/territory require that this training topic be completed?
    - Annually
    - Other. Describe:
9. Appropriate precautions in transporting children (if applicable)
- Provide the citation for this training requirement.
  - How often does the state/territory require that this training topic be completed?
    - Annually
    - Other. Describe:
10. Pediatric first aid and CPR certification
- Provide the citation for this training requirement.
  - How often does the state/territory require that this training topic be completed?
    - Annually
    - Other. Describe:
11. Recognition and reporting of child abuse and neglect
- Provide the citation for this training requirement.
  - How often does the state/territory require that this training topic be completed?
    - Annually
    - Other. Describe:
12. Child development (98.44(b)(1)(iii))
- Provide the citation for this training requirement. **Same as 5.2.3.c.1**
  - How often does the state/territory require that this training topic be completed?
    - Annually
    - Other. Describe: Training in child development is required for each type of care and number of hours varies by category.
13. Describe other requirements. The state has requirements for program management, and training
- Provide the citation for this training requirement.
  - How often does the state/territory require that this training topic be completed?
    - Annually

Other. Describe:

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

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

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

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements. **OAR 461-165-0180. All requirements are in the DHS Provider Guide.**

#### 5.3.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections—with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards—of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards—health, safety, and fire—at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

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

##### a) Licensed CCDF center-based child care

1. Describe your state/territory’s requirements for *pre-licensure inspections* of licensed child care center providers for compliance with health, safety, and fire standards. **The State conducts pre-license inspections for compliance with health, safety and fire standards in each type of licensed child care facility.**
2. Describe your state/territory’s requirements for annual, unannounced inspections of licensed CCDF child care center providers. **Annual unannounced inspections are conducted for Certified Child Care Centers.**
3. Identify the frequency of unannounced inspections:

- Once a year
- More than once a year. Describe:

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards. **Checklists used for monitoring inspections capture a center's compliance with licensing standards. Unannounced monitoring visits of Spark rated facilities with good compliance history may receive a differential monitoring visit based on key indicator rules. In addition to unannounced annual visits, licensing staff members conduct annual renewal visits. Detailed description of the monitoring visit can be found in the licensing manuals.**
5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers: **Certified Child Care Licensing Manual**

b) Licensed CCDF family child care home

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed family child care providers for compliance with health, safety, and fire standards. **The state conducts pre-license inspections for compliance with health, safety and fire standards in each type of licensed child care facility.**
2. Describe your state/territory's requirements for at least annual, unannounced inspections of licensed CCDF family child care providers. **Annual unannounced inspections are conducted Certified Family Child Care Homes (Certified Child Care Licensing Manual section VIII). Registered Family Child Care Homes receive two unannounced inspections within a two year period in addition to a renewal visit.**
3. Identify the frequency of unannounced inspections:
  - Once a year
  - More than once a year. Describe:
4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards. **Checklists used for monitoring inspections capture a child care facility's compliance with licensing standards. Detailed description of the monitoring visit can be found in the licensing manuals Registered Family Child Care Licensing Manual section IV**
5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers (**Certified Child Care Licensing Manual section VIII, Registered Family Child Care Licensing Manual section IV**).

c) Licensed in-home CCDF child care

**N/A.** In-home CCDF child care (care in the child's own home) is not licensed in the State/Territory. Skip to

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards. [REDACTED]
  2. Describe your state/territory's requirements for at least annual, unannounced inspections of licensed CCDF in-home child care providers. [REDACTED]
  3. Identify the frequency of unannounced inspections:
    - Once a year
    - More than once a year. Describe:
  4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards. [REDACTED]
  5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers [REDACTED]
- d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers. **The Early Learning Division's Office of Child Care**

5.3.3 Lead Agencies must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety (including, but not limited to, those requirements described in 98.41), and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Lead Agencies have the option to exempt relative providers (as described in section (658P(6)(B)) from this requirement. To certify, respond to the questions below to describe the policies and practices for the annual monitoring of:

- a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. **The state conducts an annual announced monitoring visit to ensure compliance with health, safety and fire standards.**

Provide the citation(s) for this policy or procedure. **Regulated Subsidy Licensing Manual section V.**

- b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. **The state conducts an annual announced monitoring visit to ensure compliance with health, safety and fire standards.**

Provide the citation(s) for this policy or procedure. **Regulated Subsidy Licensing Manual section V.**

- c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used. **The state conducts an annual announced monitoring visit to ensure compliance with health, safety and fire standards.**

Provide the citation(s) for this policy or procedure. **Regulated Subsidy Licensing Manual section V**

5.3.4 The Lead Agency must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety, and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). The state/territory may determine if exempt relative providers (as described in section (658P(6)(B)) do not need to meet this requirement. At a minimum, the health and safety requirements to be inspected must address the standards listed in 5.1.4 (98.41(a)). To certify, describe the policies and practices for the annual monitoring of:

- a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. **The state conducts an annual announced monitoring visit to ensure compliance with health, safety and fire standards.**

Provide the citation(s) for this policy or procedure. **Regulated Subsidy Licensing Manual section V.**

- b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. **The state conducts an annual announced monitoring visit to ensure compliance with health, safety and fire standards.**

Provide the citation(s) for this policy or procedure. **Regulated Subsidy Licensing Manual section V.**

- c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used. **The state conducts an annual announced monitoring visit to ensure compliance with health, safety and fire standards.**

- d) Provide the citation(s) for this policy or procedure. **Regulated Subsidy Licensing Manual section V.**

5.3.5 Licensing inspectors.

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

- a) To certify, describe how the Lead Agency ensures that licensing inspectors are qualified to inspect child care facilities and providers and that those inspectors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1)). **All licensing specialists are qualified to inspect child care facilities and receive ongoing training in licensing and health and safety requirements.**

- b) Provide the citation(s) for this policy or procedure. **Desired attributes for the licensing specialist position include background and education in child care settings. Current practice is to recruit and retain staff members that reflect cultural and language diversity of the provider population served. The state has bilingual/bicultural licensing staff members that speak Spanish, Russian, Vietnamese, Chinese, as well as English. All new licensing staff are trained in all aspects of the state's licensing requirements. The position description for licensing staff require that "the individual in this position must possess knowledge of child development, early childhood education and health and safety requirements".**

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

- a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e., number of providers per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis. **A number of factors are considered to determine the facility to licensing specialist ratio. The average weighted caseload is 65-80 facilities per licensing specialists based on the following factors.**

- 1. Sizes of facility – Certified Child Care Centers require more time to monitor due to the high number of staff members, rooms, children in care and rules to review. Registered Family Child Care Homes and Certified Family Child Care Homes are considered to require one half the level of time in comparison to centers and two facilities are considered as one for purposes of weighting.**
- 2. Travel in rural areas – licensing staff members serving in rural areas of the state where extensive travel is required will have lower ratios.**
- 3. Language considerations – staff members who monitor facilities where the provider may speak a home language other than English may also result in a reduced caseload. Wherever possible, the provider (usually a home based facility), is matched with a licensing specialists who speaks their home language**

- b) Provide the policy citation and state/territory ratio of licensing inspectors. **Description of ratio policy located in Registered Family Licensing Manual Appendix P and Certified Child Care Manual Appendix R).**

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

- Yes, relatives are exempt from all inspection requirements. If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care. **Providers self-declare on the provider listing form that they meet all health and safety requirements. Department of Human Services may request evidence of compliance. OAR 461-165-0180 outlines the eligibility requirements for child care providers to receive subsidy payment from Department of Human Services. This includes health and safety standards such as background checks, standards for the home, supervision of children and protection from infectious diseases, compliance with state and federal laws related to child safety systems and seat belts in vehicles, bicycle safety, and crib standards under 16 CFR 1219 and 1220, placing infants to sleep on their backs, etc.**
- Yes, relatives are exempt from some inspection requirements. If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.
- No, relatives are not exempt from inspection requirements.

## 5.4 Criminal Background Checks

5.4.1 In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met. In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met and apply for the time-limited waiver by responding to questions 5.4.1a through 5.4.1h below.

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

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

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

**Milestone Prerequisites for Time-Limited Waivers**

By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 45 CFR 98.43 and 98.16(o):

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

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

If the milestone prerequisites are met, then time-limited waivers may be requested for the components as outlined in the table below.

<b>Background Check Components</b>	<b>If milestone is met, time-limited waiver allowed for:</b>
1) In-state criminal w/fingerprints	Conducting background checks on backlog of current (existing) staff only
2) In-state sex offender registry	

3) In-state state-based child abuse and neglect registry	
4) FBI fingerprint check	
5) NCIC National Sex Offender Registry (NSOR)	Establishing requirements and procedures AND/OR
6) Inter-state state criminal registry	Conducting background checks on all new (prospective) child care staff
7) Inter-state state sex offender registry	AND/OR
8) Inter-state child abuse and neglect registry	Conducting background checks on backlog of current (existing) staff

States and Territories will apply for the initial waiver for a one-year period (starting October 1, 2018 and ending September 30, 2019) as part of the submission of this Plan. If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Additional guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

Overview of Background Check Implementation deadlines

- Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017
- Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018
- One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019
- Waiver renewal deadline (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Use questions 5.4.1a through 5.4.1d below to describe achievement of the milestone components, use questions 5.4.1e through 5.4.1h to provide the status for the remaining checks, and as applicable, use questions 5.4.1a through 5.4.1h to request a time-limited waiver for any allowable background check requirement.

- a) Briefly summarize the requirements, policies and procedures for the search of the state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides. **Background checks are required on all staff and other subject individuals associated with licensed and license exempt CCDF child care facilities. Individuals apply online or by paper application to the Early Learning Division’s Office of Child Care Central Background Registry or by paper to the Department of Human Services Background Check Unit. The Office of Child Care and the Background Check Unit request fingerprints through a statewide vendor, and runs a State and an FBI fingerprint check. Simultaneously, the Office of Child Care or the Background Check Unit run a check of the ORKids data base with child protective services records (child abuse and neglect registry).**

**Individuals are notified when their enrollment in the Central Background Registry or the Background Check Unit is completed or denied.**

- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).  
**Background checks for staff and subject individuals in licensed facilities are conducted by the Early Learning Division.**
  - ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o).  
**Background checks for Regulated Subsidy providers that are license exempt and subject individuals are conducted within the Background Check Unit of the Department of Human Services.**
  - iii. Has the search of the state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?
    - Yes.
    - No. Check here to indicate request for time-limited waiver for this requirement  
□ and enter the expected date of full implementation of this requirement.  
Describe the status of conducting the search of the state criminal registry or repository, with the use of fingerprints for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:
  - iv. List the citation:  
<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1901>
- b) Briefly summarize the requirements, policies and procedures for the search of the state sex offender registry or repository in the state where the staff member resides. **The state sex offender registry is checked as part of the state fingerprint and name based check.**
- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).  
**Background checks for staff and subject individuals in licensed facilities are conducted by the Early Learning Division.**
  - ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o). **Background checks for staff and subject individuals in license exempt CCDF facilities are conducted by the Department of Human Services Background Check Unit.**

- iii. Has the search of the state sex offender registry or repository been conducted for all current (existing) child care staff?
- Yes.
  - No. Check here to indicate request for time-limited waiver for this requirement  and enter the expected date of full implementation of this requirement.  Describe the status of conducting the search of the state sex offender registry or repository for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:
- iv. List the citation:  
<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1901>
- c) Briefly summarize the requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in the state where the staff member resides. **ORKids is the data base for the Child Protective Services unit. A report is run on each applicant for Central Background Registry or the Background Check Unit.**
- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o). **Background checks for staff and subject individuals in licensed facilities are conducted by the Early Learning Division.**
  - ii. Describe how these requirements apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o). **Background checks for staff and subject individuals in license exempt CCDF facilities are conducted by the Department of Human Services Background Check Unit.**
  - iii. Has the search of the state-based child abuse and neglect registry and database been conducted for all current (existing) child care staff?
    - Yes
    - No. Check here to indicate request for time-limited waiver for this requirement  and enter the expected date of full implementation of this requirement.  Describe the status of conducting the search of the state-based child abuse and neglect registry and database for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver

CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

iv. List the citation:

<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1901>

d) Briefly summarize the requirements, policies and procedures for the FBI fingerprint check using Next Generation Identification. **Once an application is made for the Office of Child Care Central Background Registry or the Background Check Unit, all applicants are fingerprinted electronically through a statewide vendor using Next Generation Identification and sent to the Oregon State Police for processing to the FBI.**

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

**Background checks for staff and subject individuals in licensed facilities are conducted by the Early Learning Division.**

ii. Describe how these requirements apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o).

**Background checks for staff and subject individuals in license exempt CCDF facilities are conducted by the Department of Human Services Background Check Unit.**

iii. Has the search of the FBI fingerprint check using Next Generation Identification been conducted for all current (existing) child care staff?

Yes

No. Check here to indicate request for time-limited waiver for this requirement  and enter the expected date of full implementation of this requirement.  Describe the status of conducting the FBI fingerprint check using Next Generation Identification for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

iv. List the citation:

<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1901>

e) Describe the status of the requirements, policies and procedures for the search of the NCIC's National Sex Offender Registry.

Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF

services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the search of the NCIC's NSOR check on all new and existing child care staff.

- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).
- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o).
- iii. List the citation:

- In progress. Check here to indicate request for time-limited waiver for this requirement ■ and enter the expected date of full implementation of this requirement. **09/30/2019** Describe the status of implementation of requirements, policies and procedures for the NCIC's National Sex Offender Registry. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all prospective and existing licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: **Oregon has been working with the Oregon State Police over the last three year to gain access to the NCIC's NSOR and to develop a process for obtaining the information. The Early Learning Division is also working on a legislative concept to specifically add this check to the Oregon State Police Statute.**

- f) Describe the status of the requirements, policies and procedures for the search of the criminal registries or repositories in other states where the child care staff member resided during the preceding 5 years, with the use of fingerprints being optional in those other states.

- Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the inter-state state criminal registry check on all new and existing child care staff.
  - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).
  - ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o).
  - iii. List the citation:
- In progress. Check here to indicate request for time-limited waiver for this requirement ■ and enter the expected date of full implementation of this

requirement. **09/30/2019** Describe the status of implementation of requirements, policies and procedures for the search of the criminal registries or repositories in other states where the child care staff member resided during the preceding 5 years, with the use of fingerprints being optional in those other states. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all providers eligible to provide care for children receiving CCDF; 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: **Oregon has spent time researching the requirement and planning an approach for conducting these checks. Oregon State Police are not able to assist with this component of the rule at this time and that is a key challenge for implementing the requirement. Oregon's two child care background check units are working together for an approach.**

- g) Describe the status of the requirements, policies and procedures for the search of the state sex offender registry or repository in each state where the staff member resided during the previous 5 years.
- Fully implemented for all required child care providers (all licensed, regulated or registered; and all (prospective and existing) child care providers eligible to provide care for children receiving CCDF assistance). This means that the State/Territory has requirements and procedures in effect, and has conducted the inter-state state sex offender registry check on all new and existing child care staff.
    - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).
    - ii. Describe how these requirements, policies and procedures apply to all providers eligible to care for children receiving CCDF, in accordance with 98.43 and 98.16(o).
    - iii. List the citation:
  - In progress. Check here to indicate request for time-limited waiver for this requirement  and enter the expected date of full implementation of this requirement. **09/30/2019** Describe the status of implementation of requirements, policies and procedures for the search of the state sex offender registry or repository in each state where the staff member resided during the previous 5 years. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all providers eligible to provide care for children receiving CCDF; 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: **Oregon background check units are working to compile a resource document on all state and territory processes to complete the out of state checks sex offender registry checks. We will continue to address procurement and process options to implement this requirement.**

h) Describe the status of the requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in each State where the staff member resided during the previous 5 years.

Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the state-based child abuse and neglect registry check on all new and existing child care staff.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o).

iii. List the citation:

In progress. Check here to indicate request for time-limited waiver for this requirement  and enter the expected date of full implementation of this requirement. **09/30/2019** Describe the status of implementation of requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in each State where the staff member resided during the previous 5 years. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: **Oregon has compiled a resource document on all state and territory processes to complete the out of state checks. We will continue to address procurement and process options to implement this requirement.**

5.4.2 A child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective child care staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter. A prospective child care staff member may begin to work on a provisional basis for a child care provider after completing either a Federal Bureau of Investigation (FBI) fingerprint check or a search of the state/territory criminal registry or repository using fingerprints (in the state/territory where the staff member resides. However, the child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

5.4.3 Does the state/territory allow prospective staff members to begin work on a provisional basis (if supervised at all times) after completing the FBI fingerprint check or a fingerprint check of the state criminal registry or repository in the state where the child care staff member resides?

No.

Yes. Describe: Once a staff member has completed the fingerprinting process and the state criminal check is complete, the staff member may begin work. Staff members are not allowed to have unsupervised access to children until FBI check, state criminal and the child abuse and neglect checks are completed.

5.4.4 The state/territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The state/territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the state/territory will provide information about each disqualifying crime to the staff member.

5.4.5 Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)). **The Background Check Unit serves the Department of Human Services and maintains the database that meets the Adam Walsh Act requirements. The Background Check Unit responds directly to other state requests.**

5.4.6 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry. Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or—subject to an individual review (at the state/territory's option)—a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes—child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)).

*Note:* The Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable information (98.43(e)(2)(iii)).

5.4.7 Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(h)?

No.

- **Yes. Describe: In addition to crimes listed, felonies and misdemeanors considered crimes against persons are considered. This includes property, including theft, involving fraud or deception, crimes against the state and public justice, public order including firearms, against public health, decency and animals, and major traffic crimes.**

5.4.8 The state/territory has a process for a child care staff member to appeal the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3). Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2–4)). **Background checks for staff and subject individuals in licensed facilities are conducted by the Early Learning Division. Background checks for Regulated Subsidy Providers that are license exempt are conducted within the Background Check Unit of the Department of Human Services. Both agencies have online application with maximum 48 hour processing for name based records check through Oregon State Police Law Enforcement Data System (LEDS). When national fingerprint check is required, individuals can submit fingerprint card or electronic prints.**

5.4.9 The State/Territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)). Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. Lead Agencies can report that no fees are charged if applicable (98.43(f)). **Currently, the state subsidizes all background checks processing and administrative costs. Fees charged are less than the actual cost.**

5.4.10 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, States have the flexibility to decide which background check requirements relatives, as defined by CCDF, must meet. *Note:* This exception only applies if the individual cares *only* for relative children. Does the state/territory exempt relatives from background checks?

- No, relatives are not exempt from background check requirements.
- Yes, relatives are exempt from *all* background check requirements.
- Yes, relatives are exempt from *some* background check requirements. If the state/territory exempts relatives from some background check requirements, describe which background check requirements do not apply to relative providers. \_\_\_\_\_

## 6 Recruit and Retain a Qualified and Effective Child Care Workforce

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

### 6.1 Professional Development Framework

6.1.1 Describe how the state/territory developed its training and professional development Each State or Territory must describe their professional development framework for training, professional development, and post-secondary education, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework. Describe how the state/territory's framework for training and professional development addresses the following required elements:

- State/territory professional standards and competencies. Describe: **Oregon's Core Knowledge Categories provide the foundation for Oregon's Career Development Systems. These 10 categories are the basis for training required for Oregon Child Care Licensing, Spark (QRIS), and programs that receive DHS subsidies. The core knowledge categories are: Diversity, Families and Community Systems, Health Safety and Nutrition, Human Growth and Development, Learning Environments and Curriculum, Observation and Assessment, Personal Professional Leadership, Program Management, Special Needs, and Understanding Guiding Behavior. These 10 areas offer guidance to professionals for providing quality, and culturally responsive care and education for children.**
- Career pathways. Describe: **The Oregon Registry: Pathways for Professional Recognition in Childhood Care and Education (career lattice) include Step 1 through Step 12. Each step represents training and education in the Core Knowledge Categories. There are three pathways for moving up in the Oregon Registry. 1) Degree,**

**Credential, Certificate (DCC), 2) College Course Credit (CCC), and Community Based Training (CBT).**

- **Advisory structure. Describe: The Professional Development Committee (PDC) is a statewide representative group of cross sector early childhood agencies, organizations and individuals who approach the early learning professional development system from different needs and interests. A large number of the Professional Development Committee members are also customers of the early learning professional development system, they are able to provide a more intimate knowledge of successes, and difficulties of accessing the system. The PDC provides feedback to the early learning PD system as groups bring in proposals for changes, next steps, or discussion for new/additional avenues for access for the entire early learning workforce.**
- **Articulation. Describe: Most of Oregon’s Community Colleges provide credit for prior learning for an Oregon Registry Step 7 or a CDA. The college course credits vary among the community colleges. Typically, an early learning professional could acquire from 8 - 15 credits in early childhood education.**
- **Workforce information. Describe: Oregon tracks multiple data points on the early learning workforce. Examples of data topics include: numbers of early learning educators and their employment title in the field, numbers of professionals at each step on the Oregon Registry by county, numbers and types of early learning trainers in the Oregon Registry Trainer program, number of attendees to each training event, number of individuals that complete the online trainings that Oregon offers (Introduction to Child Care Health and Safety, DHS Provider Requirements, Recognizing Child Abuse and Neglect, the Oregon Early Learning Standards).**
- **Financing. Describe: The Early Learning Division funds organizations to provide professional development services and access to the early learning workforce. These include the statewide child care resource and referral system, and the Oregon Center for Career Development in Childhood Care and Education that operates the Oregon Registry Pathways for Professional Recognition in Childhood Care and Education programs, including Spark (Quality Rating and Improvement System) initiatives supporting work at the program level as well as promoting increased professional development for staff within programs.**

The following phrases are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

- **Continuing education unit trainings and credit-bearing professional development to the extent practicable. Describe: College course credits can be used to achieve a higher step on the Oregon Registry. All caregivers in licensed facilities have some level of ongoing training required by licensing. This is also true for regulated subsidy providers. This ongoing annual training and required content can be used to advance on the Oregon Registry. If individuals achieve an Oregon Registry Step 7 they can**

**present this to their local community college and follow the process for acquiring college course credit.**

- Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework. Describe: **As individuals achieve an Oregon Registry Step 7 or a Child Development Associate Credential, they can present this to their local community college and follow the process for acquiring college course credit. Some Child care resource and referral programs across the state have begun to work with and advocate for community colleges to provide credit for providers for trainings at local Child care resource and referral programs. Child care resource and referral programs work with their local early learning hubs to identify priority hot spots to ensure that resources and services for recruitment and retention are targeted to populations furthest from opportunity.**

**The Southern Oregon Early Learning Professional Development Consortium is a pilot project to establish articulation agreements among four Community Colleges and Southern Oregon University to support Early Educators obtain ECE degree. The collaborative partnership includes three Child care resource and referral programs to provide relationship-based professional development through the Quality Improvement Specialists, who guide the cohorts in work/life/school balance and navigate the college system.**

Other. Describe:

- 6.1.2** Describe how the state/territory developed its training and professional development requirements in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or with another state or state-designated cross-agency body if there is no SAC that addresses the professional development, training, and education of child care providers and staff. **The Early Learning Division and a subcommittee of the Early Learning Council, the Childhood Care and Education Committee, worked together in gathering public feedback on rule revisions. This included rules on training and qualifications for the early learning workforce. Consultation was sought from Senior Licensing Specialists, and Oregon's professional development system, key partners and staff.**

- 6.1.3** Identify how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)). Check and describe all that apply.
- Financial assistance to attain credentials and post-secondary degrees. Describe: **Licensed and license exempt providers through their perspective unions are eligible for financial assistance to receive college credit in an amount up to \$300. Through leveraged funding, the Oregon Center for Career Development offers statewide scholarships for individuals to attend college.**

- Financial incentives linked to educational attainment and retention. Describe: **Child care resource and referral programs provide incentives such as scholarships for trainings, curricula, classroom materials to reduce barriers to increased education and movement in Spark (Oregon’s QRIS) and meet requirements to encourage retention. Education awards are offered to individuals who meet certain in the Oregon Registry Registry Step milestones.**
  
- Financial incentives and compensation improvements. Describe: \_\_\_\_\_
  
- Registered apprenticeship programs. Describe:
  
- Outreach to high school (including career and technical) students. Describe: **Some child care resource and referral programs across the state have begun to work with local high schools to provide training on child care career pathways.**
  
- Policies for paid sick leave. Describe: \_\_\_\_\_
  
- Policies for paid annual leave. Describe: \_\_\_\_\_
  
- Policies for health care benefits. Describe: \_\_\_\_\_
  
- Policies for retirement benefits. Describe: \_\_\_\_\_
  
- Support for providers’ mental health, such as training in reflective practices and stress-reduction techniques and health and mental health consultation services. Describe: **Some child care resource and referral programs across the state employ mental health consultants in collaboration with other agencies, such as local county offices.**
  
- Other. Describe:

## 6.2 Training and Professional Development Requirements

The state/territory must develop training and professional development requirements, including pre-service or orientation training (to be completed within 3 months) and ongoing requirements designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training

and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

**6.2.1** Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development requirements (98.44(b)(2)(ii)). **The Early Learning Standards training is available in English and Spanish. The training is available online with no fee which provides an incentive for providers to take the training as part of the total hours of annual professional development. There is no requirement for a specific social-emotional behavioral training model in the professional development requirements. However, in order to advance in the Oregon Registry following the community-based training pathway, or combination of community-based and college course pathway, an individual must have training hours in understanding and guiding behavior in order to advance past a Step 4. In the degree, credential, certificate pathway, and the college course credit pathway, education hours in understanding and guiding behavior become requirements in higher steps (Step 9 or Step 7). Registered family child care providers are required to complete the following training: A family child care overview provided by the child care resource and referral programs; Introduction to Child Care Health and Safety, first aid, CPR, food handler's certification, recognizing and reporting child abuse and neglect and 15 hours of training every two years. Certified Family Child Care Providers are required to complete: Introduction to Child Care Health and Safety, First aid, CPR, food handler's certification, recognizing and reporting child abuse and neglect and 16 hours of annual training annually. An Assistant 2 must complete: Introduction to Child Care Health and Safety, first aid, CPR, food handler's certification, recognizing and reporting child abuse and neglect (if the facility is licensed for more than 12 children) and 16 hours of annual training.**

**Child Care Centers: Teachers and Aide 2's are required to complete: An orientation, Introduction to Child Care Health and Safety, First aid, CPR, Food handlers (if they work with food), recognizing and reporting child abuse and neglect. In addition, teachers and directors are required to have 18 hours of annual training. Directors and substitute staff are also required to complete the Introduction to Child Care Health and Safety.**

**6.2.2** Describe how the state/territory's training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)). **Oregon's Early Learning Division contracts with programs in the child care resource and referral system to provide training to child care providers in their communities. The child care resource and referral system programs add all their trainings to the online training calendar and advertise in their newsletters. The child care resource and referral system programs routinely conduct outreach activities promoting professional development opportunities to all early learning programs including but not limited to licensed and license exempt child care providers, head start**

employees and providers associated with the Tribes. There are many partnerships between child care resource and referral programs and the Tribes. In Deschutes County, the child care resource and referral program works with the Warm Springs Tribe to offer training and on request, will provide staff training on the reservation at the child care facility. The Child Care Resource Network of Klamath and Lake Counties established a partnership with Klamath Tribes to provide technical assistance for the new tribal child care center and to provide staff training at no fee in order to complete needed training and professional development. The Coos and Curry county child care resource and referral program works with the Coquille Tribe and the Confederated Tribes of Coos, Lower Umpqua and Siuslaw. The Coquille Tribe, and specifically the Coquille Tribal Head Start are included in all training and conference notifications and member have participated in the annual Retreat by the Lake conference. Staff members from the Siletz Tribal Child Care Center – Tenas Ilahee participate in trainings and technical assistance offered by the child care resource and referral program. The Oregon Center for Career Development offers several training of trainers throughout the state so all geographic areas can send representatives to become trainers of curriculum offered statewide. Oregon Center for Career Development provides technical assistance to trainers before, during and after the application process to become a trainer. The Early Learning Division recognizes the importance of trainers who represent the diverse communities represented in Oregon.

- 6.2.3** Describe how the state/territory will recruit and facilitate the participation of providers with limited English proficiency and persons with disabilities (98.16(dd)). **The Early Learning Division provides registered family child licensing rules books in English, Spanish, Russian, Vietnamese and Chinese. The Early Learning Division employs individuals who speak these languages in geographic areas where these languages are prominent. The Early Learning Division works closely with the Immigrant and Refugee Community Organization who access a federal microenterprise development grant to recruit providers and help them establish child care businesses. The providers are from Burma (Myanmar) and Somalia and other countries. Child care resource and referral programs provide workshops and publications in other languages. The Registered Family Child Care Overview is available in multiple languages including Spanish, Russian, Vietnamese and Chinese. Many child care resource and referral programs employ individuals who are actively involved in their language community and develop culturally responsive trainings. Child care resource and referral trainers frequently teach classes in other languages and take extra effort to market the trainings to specific populations. All workshops relate to one or more of Oregon’s core knowledge categories and meet Oregon Training and Education criteria. Fourteen of Oregon’s standardized trainings are offered in at least one language other than English. The Oregon Registry provides major documents and training in Spanish and Russian. Outreach efforts for recruitment in Oregon’s QRIS target providers who are further from opportunity and prioritize services for diverse populations in a culturally responsive manner. Programs adjust curricula, deadlines and processes to serve and**

include all populations. The Early Learning Division also assesses on a quarterly basis the numbers of professional development trainings offered in each language through the statewide training calendar. This allows us to provide technical assistance and information to all early learning organizations.

Child care resource and referral programs support child care providers with disabilities. Professional interpretation and signing for deaf or hearing impaired providers is available to meet the needs of child care providers entering the field as well as for ongoing training. The Early Learning Division pays for interpreting services. Child care resource and referral programs work to provide appropriate methods of communication to ensure full participation, as well as ADA accommodations. The Early Learning Division's Access and Outreach committee developed a guidance document on ADA laws as it pertains to adults attending training. This document is used as a guidance tool statewide with early learning programs and partners that provide training in the system.

**6.2.4** If the Lead Agency provides information or services to providers in other non-English languages, please identify the three primary languages offered or specify that the State has the ability to have translation/interpretation in primary and secondary languages. **The Early Learning Division translates all essential child care provider documents into Spanish, Chinese, Vietnamese and Russian through a translation vendor. Designated staff members who speak the languages fluently proof the materials. Early learning system providers have access to a language line with multiple languages available.**

**6.2.5** Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii-iv)). **The State's training requirements give direction on type of training but not specific training titles (except for Safety Set classes including first aid, CPR, recognizing and reporting child abuse and neglect, and food handler's certification). This allows child care providers to fulfill the requirements while concentrating on a specific age group such as school age, or a topic of need or interest such as guidance and discipline. The child care resource and referral system lists the relevant age group for each training and core knowledge category. The Introduction to Child Care Health and Safety, Recognizing and Reporting Child Abuse and Neglect, and Early Learning Guidelines trainings are free online trainings provided in multiple languages. The child care resource and referral programs are a training resource to early learning programs in all geographic areas in Oregon, including tribal programs and license exempt providers who accept child care subsidy payment, with concentration on access for English language learners or training in other languages. All standardized trainings adopted by the State are developed in multiple languages.**

6.2.6 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving homeless children and families (658E(c)(3)(B)(i)).

- a) Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2). **Oregon has a self-study training opportunity "Serving Families Experiencing Homelessness". The goal of the training is to help early learning professionals identify and serve families experiencing homelessness or other difficult times.**

Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving homeless children and their families (connects to question 3.2.2). **The Early Learning Division works with the McKinney Vento program coordinator at the Oregon Department of Education and the liaisons in each school district. Staff members of the Lead Agency, the Department of Human Services and school district liaisons are encouraged to take the self-study "Serving Families Experiencing Homelessness". The McKinney Vento program coordinator participates in engagement efforts and presents to early learning audiences on request.**

6.2.7 The states and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply.

- Issue policy change notices
- Issue new policy manual
- Staff training
- Orientations
- Onsite training
- Online training
- Regular check-ins to monitor the implementation of CCDF policies
- The type of check-ins, including the frequency. Describe: \_\_\_\_\_
- Other. Describe:

6.2.8 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's business practices, which can include training and/or TA efforts.

- a) Identify the strategies that the state/territory is developing and implementing for training and TA. **Both Oregon's Professional Development System and Spark, Oregon's quality rating and improvement system, support quality business practices in child care programs. Oregon has an intensive training series, Building a Business for Certified Family Child Care**

programs that provides 60 hours in program management. This training series provides intensive training and coaching on policies, handbooks, contracts, staffing, and compliance with local laws, to support their small businesses. In addition, the child care resource and referral system provides training and technical assistance to child care businesses on business practices. Trainings are held in multiple languages across the state, including Spanish, Russian, Vietnamese, Chinese, and English. Trainings are also held in both urban and rural settings and are designed for different levels. The child care resource and referral system is organizing Oregon's first statewide business summit for child care providers. The summit includes several training sessions on relevant and necessary business practices and is open to all child care providers. Providers participating in Spark have access to business related resources through a shared services website hosted by the child care resource and referral system. Quality Improvement Specialists within each child care resource and referral program work to support child care programs in the Administration and Business Practices domain of Spark while working through their portfolio. Cohorts of providers through the state's focused child care networks are also supported with training and consultation to improve business practices.

The Oregon Center for Career Development administers three credentials - the Infant Toddler Professional Credential, the School Age Credential, and the Director Credential. Oregon also participates in the Partnership for Preschool Improvement through a grant award from the Ounce of Prevention. These funds provide consultation and technical assistance and peer learning opportunities with three other states for preschool improvement. Through this partnership, Oregon has launched a Lead, Learn, Excel, cohort for system leaders, professional development providers and instructional Leaders. This builds the capacity of the Quality Improvement Specialists within the child care resource and referral programs to offer more support and coaching. A second cohort will be launched in late 2018.

- b) Check the topics addressed in the state/territory's strategies. Check all that apply.
- Fiscal management
  - Budgeting
  - Recordkeeping
  - Hiring, developing, and retaining qualified staff
  - Risk management
  - Community relationships
  - Marketing and public relations
  - Parent-provider communications, including who delivers the training, education, and/or technical assistance
  - Other. Describe: **Policy and procedure writing, tax preparation, basic computer skills, business philosophy, ethics, professional conduct, equity, child care contract development, legal issues in child care, increasing quality in child care settings.**

### 6.3 Early Learning and Developmental Guidelines

6.3.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. *Note:* States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.

- a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry. **The Oregon Early Learning Council adopted the Head Start Early Learning Outcomes Framework: Ages Birth to Five as Oregon's early learning standards. These guidelines present five broad areas of early learning, referred to as central domains. These domains reflect research-based expectations for learning and development. The framework is designed to show the continuum of learning for infants, toddlers, and preschoolers. It is grounded in comprehensive research on what young children should know and be able to do during their early years in order to be successful entering kindergarten. The Head Start Early Learning Outcomes Framework emphasizes the key skills, behaviors, and knowledge that programs must foster in children ages birth to five to help them be successful in school and life. A core guiding principle for school readiness is that every child has diverse strengths rooted in their family's culture, background, language, and beliefs. Responsive and respectful learning environments welcome children from diverse cultural and linguistic backgrounds. Effective teaching practices and learning experiences build on the unique backgrounds and prior experiences of each child.**
- b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry. **The Head Start Early Learning Outcomes Framework emphasizes the key skills, behaviors, and knowledge that programs must foster in children ages birth to five to help them be successful in school and life. The effective practice guides provides information about domain-specific teaching practices that support children's progression within the Early Learning Outcomes Framework developmental domains. The guides describe teaching practices, show practices in early learning settings (including home-based), and offer a framework for reflection on and improvement of effective teaching practices.**
- c) Check the domain areas included in the state/territory's early learning and developmental guidelines. Check all that apply.

- Cognition, including language arts and mathematics
- Social development
- Emotional development
- Physical development
- Approaches toward learning
- Other. Describe:

d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or other state or state-designated cross-agency body if there is no SAC. **The Oregon Early Learning Council adopted the Head Start Early Learning Outcomes Framework: Ages Birth to Five as Oregon's early learning standards.**

e) Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates. **The Oregon Early Learning Guidelines are presented as training to the early learning workforce in an online format. All changes to the structure and content of this training are captured through the contract with the Oregon Center for Career Development. Oregon only makes changes to the early learning guidelines when the Office of Head Start makes changes. Since Oregon adopted these guidelines after the Office of Head Start revised and updated their standards, Oregon does not anticipate changes in the near future.**

f) Provide the Web link to the state/territory's early learning and developmental guidelines. <https://eclkc.ohs.acf.hhs.gov/interactive-head-start-early-learning-outcomes-framework-ages-birth-five>

Oregon's Training on the Early Learning Standards can be found here: <http://campus.educadium.com/OCCD/>

6.3.2 CCDF funds cannot be used to develop or implement an assessment for children that:

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,
- Will be used as the primary or sole method for assessing program effectiveness,
- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used. **The guiding principles of the framework are fundamental of Head Start programs. The policies and practices that prepare young children for success in school and beyond are contained within the framework. The Oregon Early Learning Standards guides the selection of research-based curriculum and offers an assessment tool to guide the selection of valid, reliable, and useful**

**assessments of children’s progress. A developmental checklist describes skills, behaviors, and knowledge that indicate children are developing and learning. Oregon’s early learning standards are to be used by programs to guide choices in curriculum and learning materials, plan daily activities and experiences, and inform quality interactions and intentional teaching practices.**

- 6.3.3 If quality funds are used to develop, maintain, or implement early learning guidelines, describe the measureable indicators that will be used to evaluate the state/territory’s progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)). **Not Applicable**

## 7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care.

States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a separate annual Quality Progress Report that will include a description of activities to be funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce
- Improving on the development or implementation of early learning and developmental guidelines
- Developing, implementing, or enhancing a tiered quality rating and improvement system for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)
- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)).

This section covers the quality activities needs assessment and quality improvement activities and indicators of progress for each of the activities undertaken in the state or territory.

## **7.1 Quality Activities Needs Assessment for Child Care Services**

7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)). **The Early Learning Division systematically assesses multiple quality activities:**

### **Assessment #1: Early Learning Educators who leave the field:**

- **Why do early learning educators leave the field? (quarterly)**
- **How many leave the field? (annually)**

### **Assessment # 2: Early Learning Educators participating on the Oregon Registry**

- **How great is the growth or decrease? (quarterly)**
- **Where is the growth or decrease? (quarterly)**
- **The number, race, ethnicity and primary languages of early educators on all Oregon Registry steps. (quarterly)**

### **Assessment # 3: Parents requesting child care referrals**

- **What type of child care settings are parents requesting? (quarterly)**

### **Assessment # 4: Spark ratings:**

- **What are the Spark ratings in each county? (quarterly)**

### **Assessment # 5: Child in Spark settings**

- **How many children are in Spark rated programs? (quarterly)**
- **How many children whose parents receive CCDF funds are in Spark rated Programs? (quarterly)**

### **Assessment # 6: Trainings offered by the CCR&R's:**

- **How many trainings are offered in each county? (quarterly)**
- **What core knowledge categories are offered to early learning educators? (quarterly)**
- **In what languages are these trainings offered? (quarterly)**
- **How many participants are attending these trainings? (quarterly)**

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified. **This is a new process and Oregon is gathering baseline information to create targets.**

## **7.2 Use of Quality Funds**

7.2.1 Check the quality improvement activities in which the state/territory is investing.

- Supporting the training and professional development of the child care workforce

If checked, respond to section 7.3 and indicate which funds will be used for this activity.

Check all that apply.

- CCDF funds
- Other funds
- Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity.  
Check all that apply.
  - CCDF funds
  - Other funds
- Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.
  - CCDF funds
  - Other funds
- Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply.
  - CCDF funds
  - Other funds
- Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.
  - CCDF funds
  - Other funds
- Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.
  - CCDF funds
  - Other funds
- Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.
  - CCDF funds
  - Other funds
- Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.
  - CCDF funds
  - Other funds
- Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.
  - CCDF funds



considered Vroom sites with a goal to reach parents about how to maximize everyday opportunities to increase and promote healthy brain development. Over 11,500 individuals have downloaded the Vroom application to electronic devices since the program started. There are a variety of ways to access the Vroom tools and Oregon partners estimate having reached 150,000 Oregon families through hard copy and texting materials.

The Early Learning Division also provides parents with information on Act Early. The Center for Disease Control's "Learn the Signs. Act Early" program encourages parents and providers to learn the signs of healthy development, monitor every child's early development, and take action when there is a concern. The program offers free checklists and other tools (including a free milestone tracker app) to make developmental monitoring practical and easy. This program aims to improve early identification of children with autism and other developmental disabilities so children and families can get the services and support they need.

- Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards. Describe: **Oregon has two groups that are focusing on recruiting, training, and retaining culturally and linguistically diverse trainers to provide training in the home language of the early learning educators.**
- Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development. Describe: **Inclusive Child Care Program preserves access to child care settings for children with varied abilities. It stewards inclusive practices by supporting child care providers in their work with children with specialized needs and their families through consultation, technical assistance and training. The Inclusive Child Care Program serves as a statewide resource for recommended practices, materials and information to all interested parties.**
- Using data to guide program evaluation to ensure continuous improvement. Describe: **The Early Learning Division uses several quality data measures to gauge the growth of quality initiatives offered to early learning educators for professional development.**
- Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe: \_\_\_\_\_
- Caring for and supporting the development of children with disabilities and developmental delays. Describe: **Inclusive Child Care project preserves access to child care settings for children with varied abilities. It stewards inclusive practices by supporting child care providers in their work with children with specialized needs and their families through consultation, technical assistance and training. The Inclusive Child Care Program serves as a statewide resource for recommended practices, materials and information to all interested parties.**

- Supporting the positive development of school-age children. Describe: **The Early Learning Division funds a position to focus on school age coordination, training, and other professional development opportunities.**
  - Other. Describe: **The Early Learning Division has several assets that promote the professional development of the early learning workforce. At Mt. Hood Community College a group of diverse early learning educators have the opportunity to earn a Child Development Credential (CDA), while strengthening their skills in reading, writing and speaking English. The Southern Oregon Early Learning Professional Development Consortium Project (SOELPDC), collaborative partnership, provides ECE relevant classes and educational pathways to obtain higher education credentials, certificates and degrees across three community colleges and one university. Classes align with the Core Knowledge Categories and support advancement on the Oregon Registry and Spark ratings. Classes, materials and instruction are provided in diverse languages to meet the needs of the Early Educators.**
- a) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply.
- Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling
  - Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities
  - Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education
  - Other. Describe:

7.3.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. **Monthly reports are delivered to the Early Learning Division on the Oregon Registry Workforce progress and Oregon’s Quality Rating and Improvement System. Quarterly reports are submitted to the Early Learning Division on more in-depth measures of quality from the Oregon Center For Career Development, Teaching Research Institute, Oregon ASK and the child care resource and referral system programs.**

#### 7.4 Quality Rating and Improvement System

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS.

7.4.1 Does your state/territory have a quality rating and improvement system?

- Yes, the state/territory has a QRIS operating statewide or territory-wide. Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available. **Oregon's QRIS, Spark, is a statewide program administered through several contracting agencies. The support component is administered primarily through the child care resource and referral system. The standards, monitoring, program incentives, and process are administered through The Research Institute at Western Oregon University. The professional development system and workforce incentives are administered through Portland State University's Oregon Center for Career Development <http://triwou.org/projects/qris>**
- Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis. Provide a link, if available.
- If Yes, describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.
- No, but the state/territory is in the QRIS development phase.
- No, the state/territory has no plans for QRIS development.

#### 7.4.2 QRIS participation.

- a) Are providers required to participate in the QRIS?
- Participation is voluntary.
  - Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level). \_\_\_\_\_
  - Participation is required for all providers.
- b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS? Check all that apply.
- Licensed child care centers
  - Licensed family child care homes
  - License-exempt providers
  - Early Head Start programs
  - Head Start programs
  - State prekindergarten or preschool programs
  - Local district-supported prekindergarten programs
  - Programs serving infants and toddlers
  - Programs serving school-age children
  - Faith-based settings
  - Tribally operated programs

- Other. Describe: **Accredited programs: Oregon has worked with nationally accredited programs to create a crosswalk of the accreditation standards with QRIS standards. The crosswalks are meant to honor the work, improvements, and standards that the programs have achieved through other accreditation to help facilitate participation and success on the QRIS.**

7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. *Note:* If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.7.

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

- No.
- Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
  - Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system).
  - Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
  - Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
- Other. Describe:
- None.

7.4.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?

- No.
- Yes. If yes, check any links between the state/territory's quality standards and licensing requirements.
  - Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
  - Embeds licensing into the QRIS.
  - State/territory license is a "rated" license.

- Other. Describe: \_\_\_\_\_
- Not linked.

7.4.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS.

- No.
- Yes. If yes, check all that apply.
  - One time grants, awards, or bonuses
  - Ongoing or periodic quality stipends
  - Higher subsidy payments
  - Training or technical assistance related to QRIS
  - Coaching/mentoring
  - Scholarships, bonuses, or increased compensation for degrees/certificates
  - Materials and supplies
  - Priority access for other grants or programs
  - Tax credits (providers or parents)
  - Payment of fees (e.g., licensing, accreditation)
  - Other: **One time awards for meeting specific milestones on the Oregon Registry (career lattice “Steps”).**
- None

7.4.6 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. **Oregon tracks Spark participation by type of setting, geographic, workforce, race and ethnicity data for children on CCDF, Classroom Assessment (CLASS) scores, family engagement, and child engagement. Oregon has invested in specific, targeted technical assistance to ensuring participation of providers in a variety of settings, including accredited programs, Head Start, Oregon Prekindergarten, and school age programs. Oregon has conducted two validation studies and a process evaluation to inform continuous quality improvement of Spark. Revisions are in process to implement indicated improvements. Specifically, Oregon collects monthly data, statewide and by county, of the three types of licensed programs and Head Starts, including participation at all five Spark tiers. Quarterly, Oregon collects child level data of children receiving care subsidy in Spark programs by race and ethnicity. <http://triwou.org/projects/qris/resources>**

## 7.5 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care.

7.5.1 What activities are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe.

- Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low-income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families. Describe: \_\_\_\_\_
- Establishing or expanding the operation of community- or neighborhood-based family child care networks. Describe: **Oregon has and will continue to invest in focused family child care networks across the state. The network providers receive enhanced training, technical assistance, and support funds geared towards increasing quality and Spark (QRIS) ratings. Each community has identified targeted neighborhood or populations to encourage participation of providers serving children furthest from opportunity in those communities. In addition, child care resource and referral programs support connections to play and learn groups at schools and other community locations as a resource for providers serving infants and toddlers.**
- Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe: **Child care resource and referral programs provide training on best practices for infants and toddlers and support focused cohort trainings specifically on infant and toddler care. Child care resource and referral programs offer business management and financial strategies on infant care. Spark (Oregon's QRIS) specifically requires addressing the needs of infant and toddlers including environment, curricula, and adult child interaction.**

**Training on the Ages and Stages Questionnaire and safe sleep, and Child Development Associate cohorts in partnership with Head Start, support increasing knowledge and awareness of developmentally appropriate practices for infants and toddlers.**

**The Oregon Center for Career Development in Childhood Care and Education administers and maintains several standardized curricula. First Connections: Infant & Toddler Development and Care curriculum has 20 sessions for 61 hours of training related to infant and toddler development. The Oregon Center for Career Development also provides an Infant Toddler credential to recognize professional knowledge, skills, and achievements toward strengthening infant and toddler practice.**

**Oregon has an infant mental health endorsement to recognize and document the development of infant and family professionals across various levels of infant toddler service providers.**

- Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant-toddler specialists. Describe: **Child care resource and referral programs provide one on one consultation with providers**

seeking to care for infants and toddlers. Consultation includes best practices in child development and business management specific to infants and toddlers. Coaching is embedded in the Infant/Toddler Mental Health Credential program. Coaching, training, and consultation on supporting infants and toddlers with special needs is available for parents, providers and Child care resource and referral staff in partnership with the Inclusive Child Care Program.

- Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.). Describe: **Child care resource and referral programs have partnerships to offer training for the child care community on supporting children with disabilities. Child care resource and referral programs also serve as partners on the local advisory councils for Early Intervention. In addition, Child Care Resource and Referrals help providers navigate tools such as the Ages and Stages Questionnaire online, the referral process, and advise on services available to providers and parents.**
- Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments. Describe: **Spark, Oregon's quality rating and improvement system utilizes the Ages and Stages Questionnaire. Spark includes infant and toddlers in all of its standards. Spark also uses the infant and toddler Classroom Assessment (Class) to assess adult-child interaction in relevant settings. Revisions to Spark will include specific continuous quality improvement efforts specific to infants and toddlers.**
- Developing infant and toddler components within the state/territory's child care licensing regulations. Describe: **The Early Learning Division's Office of Child Care licensing regulations contain specific rules to address health and safety for regulated programs caring for infants and toddlers. This includes rules on program of activities, diapering, eating, breastfeeding, sleeping, hand washing, sanitation, ratios, age appropriate environments, materials and equipment. In addition, those working with infants and toddlers are required to have additional age specific training.**
- Developing infant and toddler components within the early learning and developmental guidelines. Describe: **The Oregon Early Learning Standards are the same as the Head Start Early Learning Outcomes Framework: Ages Birth to Five. A two hour online training on the guidelines is offered in English and Spanish.**
- Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development. Describe: **Many child care resource and referral programs partner with local parenting agencies to hold trainings, and "play and learn" groups, specifically to provide parents and providers with information and modeling of age appropriate activities for infants and toddlers. The Early Learning Division and the child care resource and referral system are creating a shared database of infant and toddler resources designed to ensure consistent materials and information are shared with providers and parents. The concept is to have readily accessible resources for use by licensors and the child care resource and**

referral system. The information can then be disseminated through a variety of modalities including child care resource and referral newsletters, parenting hubs, and websites. Provider orientations also include resources that can be shared with parents on infant and toddler care. The 211info Child Care Line provides consumer education on quality indicators, including infant and toddler resources specific to the parent needs during child care referral requests.

- Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being. Describe: \_\_\_\_\_
- Other. Describe: \_\_\_\_\_

7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures. Through performance based contracts and federal monitoring of the Early Head Start-Child Care partnership grants, multiple data points are available to determine how these activities affect the supply and quality of infant and toddler care. Data on the increased number of providers who serve infants and toddlers is reviewed quarterly with child care resource and referrals programs by region. The Early Learning Division measures the number of early learning individuals who complete the safe sleep training from the Early Learning Division.

## 7.6 Child Care Resource and Referral

A Lead Agency may expend funds to establish or expand a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

7.6.1 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. **The following data is reviewed quarterly to inform decision making:**

- **If and why providers left the field**
- **Workforce movement on the Oregon Registry Online step (education level)**
- **Type of care requested by parents**
- **Spark rating movement**
- **Number of programs accepting subsidy**
- **Number, attendance, variety and level of training**
- **Provider, parent and partner satisfaction surveys**

## 7.7 Facilitating Compliance With State Standards

- 7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards? Describe: **Oregon invests CCDF quality funds through a number of mechanism to facilitate child care health and safety requirements.**
- **The child care resource and referral system offers an overview course for family child care homes designed to orient providers to the rules and to provide extensive resource information.**
  - **Oregon's Office of Child Care provides technical assistance and customer service to registered family and certified family child care home providers to assist in navigating the requirements.**
  - **Orientations are required of all caregivers hired in a licensed facility. This includes completion of designated health and safety training and orientation to child care licensing rules.**
  - **The child care resource and referral system and the Center for Career Development offer and track training requirements for all licensed and Regulated Subsidy child care providers.**
  - **Oregon uses the research-based differential monitoring system in licensing in an effort to allocate more resources to programs that may have difficulty meeting standards.**

7.7.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?

No.

Yes. If yes, which types of providers can access this financial assistance?

Licensed CCDF providers

Licensed non-CCDF providers

License-exempt CCDF providers

Other. Describe: \_\_\_\_\_

7.7.3 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. Contractor reports for child care resource and referral services and for training and professional development services provide quarterly measurements on the indicated activities.

## **7.8 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services**

7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children. **Using Spark as a framework, Oregon now has a consistent way to evaluate quality of programs. There are a number of tools for measuring quality and effectiveness including Family Surveys, child screening and assessments, Classroom Assessments (CLASS) of adult-child interaction in settings, and family and child engagement**

measures. Oregon also has a professional development registry with 12 steps of achievement in educational attainment used to measure the workforce.

Oregon's Early Learning Guidelines are cross walked to the K-12 Common Core Standards. The Oregon Kindergarten Entry Assessment will serve as an evaluative measure of the quality and effectiveness of early care and education services over time as aggregate and some child level data can be tied to child care programs.

- 7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. **Oregon measures progress in improving the quality of child care programs via Spark data. Spark reports monthly on the numbers of participating and star rated programs, as well as numbers of children. Spark quarterly reports include results on the numbers of children receiving child care subsidies in star rated programs. Through these reports, Oregon has been able to document increasing number of "quality programs."**

<http://triwou.org/projects/qris/resources>

In addition, Oregon's Professional Development Registry provides monthly reports of early educators' step levels. This report also indicates increased levels of participation and growth of training and experience of Oregon's early learning workforce.

<https://www.pdx.edu/occd/steps-credentials-oro/#Report>

## 7.9 Accreditation Support

- 7.9.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

- Yes, the state/territory has supports operating statewide or territory-wide. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation. \_\_\_\_\_
- Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide. Describe: \_\_\_\_\_
- No, but the state/territory is in the accreditation development phase.
- No, the state/territory has no plans for accreditation development.

- 7.9.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. **Not Applicable**

## 7.10 Program Standards

- 7.10.1 How does the state/territory support state/territory or local efforts to develop or adopt high-quality program standards relating to:

- Health. Describe the supports: **Health and Safety is a domain in Oregon’s Spark.**
- Mental health. Describe the supports:
- Nutrition. Describe the supports: **Licensing rules address the requirement to follow the USDA food guidelines.**
- Physical activity. Describe the supports: **Standards are in the Oregon Spark domains.**
- Physical development. Describe the supports: **Fitness habits are supported and encouraged in the Spark Standards.**

**Oregon has adopted program standards through Spark. With input from stakeholders and specific content experts, the standards have been created which address specific health domains around nutrition, health education, physical activity, and gross motor activities. In addition, the social-emotional component is a priority for Oregon as evidenced through its investment in the adult child interaction standard. Oregon requires an on-site Classroom Assessment (CLASS) of adult child interaction for its top-rated programs. Oregon is also engaging in a revision process, seeking additional input from specific stakeholders to improve Spark and help ensure Oregon is serving children from diverse communities via the equity lens.**

7.10.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. **The Validation Study is measuring how the program standards differentiate programs according to tiers. The results of the study, as well as other factors, will determine the need to restructure the standards. In addition, Oregon has plans to create ongoing feedback on the standards through an equity lens to ensure that the programs benefiting children are culturally relevant. Oregon will convene additional community engagement sessions with diverse populations and seek specific input on its standards.**

### **7.11 Other Quality Improvement Activities**

7.11.1 List and describe any other activities that the state/territory provides to improve the quality of child care services, which may include consumer and provider education activities, and describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. **Oregon has other projects to improve and support the quality of programs. For example, Oregon continues its use of contracted slots programs to serve low-income families in Head Start Programs who need full day, full year care. The contracted slots provide greater consistency and stability for children and their working parents while supporting the programs to provide consistent, high quality care.**

**Oregon invests through contracts with specific special populations including teen parents, parents in residential substance use disorder treatment, and programs serving children with special needs. Not only are there financial subsidies to support the programs in serving these families, but there is targeted quality improvement funds and technical assistance to these programs for quality improvement.**

**Oregon is also piloting support of the Teaching Strategies Gold as quality improvement, providing training and technology for programs to use this child assessment.**

**Oregon passed legislation for “Preschool Promise” that expanded Oregon’s ability to equitably serve children with low incomes in quality early learning settings. Preschool Promise builds on Oregon’s PreK programs by serving preschool age children in a variety of settings (e.g., child care centers, family child care homes) that meet specific quality and personnel requirements while seeking to increase the numbers of highly qualified, culturally responsive early learning settings.**

**Finally and perhaps most important, Oregon has adopted an equity lens for all of its education work. Within quality improvement, Oregon has specific plans to work and lead with diverse populations and authentic stakeholder engagement and input.**

## 8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud.

### 8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

8.1.1 Describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program are informed and trained regarding program requirements and integrity. Check all that apply.

- Issue policy manual
- Issue policy change notices
- Staff training. Describe: **The Department of Human Services training offers training to eligibility and family coach staff through child care policy analysts, Quality Assurance staff, branch office leads as well as through the Department of Human Services Self Sufficiency training Unit. Training may occur on site, on line, or at the Department of Human Services Self Sufficiency Training Unit.**
- Ongoing monitoring and assessment of policy implementation. Describe: **Department of Human Services child care policy analysts are available for staff calls and maintain an email address for staff to contact and discuss policy questions or scenarios. This includes questions regarding policy and follow-up policy change notice clarifications.**
- Other. Describe:

8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices follow generally accepted accounting principles (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds, including the following:

- Verifying and processing billing records to ensure timely payments to providers. Describe: **Billing forms are due within 90 days of issuance. All billings are reviewed for completeness and potential errors. Payments are typically issued within 4 to 5 business days from the date the completed billing is received.**
- Fiscal oversight of grants and contracts. Describe:
  - The Lead Agency 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. Certification language is included in all contracts executed through both the Department of Human**

Services for contracted slots and for all Special Populations programs. Lead Agency Contractors are required to submit quarterly or semi-annual performance reports on specific performance indicators.

- All Contracts that meet Single Audit Act compliance thresholds are required, through contract language, to submit an annual independent audit report. These reports are reviewed to ensure CCDF dollars are clearly identified by CFDA number and there are no major or significant deficiencies regarding the use of those dollars by the sub-recipient.

- Tracking systems to ensure reasonable and allowable costs. Describe: \_\_\_\_\_
- Other. Describe: \_\_\_\_\_

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Activities can include, but are not limited to, the following:

- Conduct a risk assessment of policies and procedures. Describe:
  
- Establish checks and balances to ensure program integrity. Describe: **Approximately 160 billing forms are randomly selected each month for a desk audit by the Department of Human Services. A monthly audit of child care for school age children is conducted for months when school is in session. This audit reviews child care hours billed for school age children to identify improper payments resulting from providers billing for care during the school day. Data Match Unit also works a variety of federally mandated reports in conjunction with other states to achieve their goal of ensuring program integrity. For Special Populations, a monthly reporting sheet is required to be attached to invoices along with all required ACF 801 data. The Contract Administrator compares the monthly invoice to the amount of hours that a child would normally be in care for Teen Parent and during the spring, summer and fall for migrant and seasonal farm workers. Random pulls of invoices and requests for documentation to ensure that proper eligibility and determination has been conducted by the contractor.**

- Use supervisory reviews to ensure accuracy in eligibility determination. Describe:
- Other. Describe:

8.1.4 Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include intentional and unintentional client and/or provider violations, as defined by the Lead Agency. Administrative errors refer to areas identified through the error-rate review process. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

- a) Check which activities that the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.
- Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

- Run system reports that flag errors (include types). Describe: **Approximately 200 billing forms are randomly selected each month for a desk audit by the Department of Human Services. A monthly audit of child care for school age children is conducted for months when school is in session. This audit reviews child care hours billed for school age children to identify improper payments resulting from providers billing for care during the school day. Over number reports are run to identify child care provider who are billing for more children than they are legally allowed. Attendance logs are requested in order to compare the children's attendance, and review for overlapping periods where more than the legal numbers of children are in care at any given time. The DataMatch Unit also works a variety of federally mandated reports in conjunction with other states to achieve their goal of ensuring program integrity.**
  - Review enrollment documents and attendance or billing records.
  - Conduct supervisory staff reviews or quality assurance reviews.
  - Audit provider records.
  - Train staff on policy and/or audits.
  - Other. Describe:
    - **On Target program, Accuracy in Action Newsletter, skills challenges for intake staff, and Employment Related Day Care staff refreshers based on error trends.**
    - **Department of Human Services conducts site visits of randomly selected providers. The visit includes review of attendance and billing records, health and safety requirements and the Department of Human Services procedures.**
    - **Department of Human Services conducts regular Quality Control Reviews of program eligibility and provides staff with feedback and corrective measures. Department of Human Services holds a monthly statewide video conference addressing top error cases to inform staff of errors and necessary corrections while discussing best practices and preventative measures.**
- b) Check which activities the Lead Agency has chosen to conduct to identify administrative errors.
- Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).
  - Run system reports that flag errors (include types). Describe: **Approximately 200 billing forms are randomly selected each month for a desk audit. A monthly audit of child care for school age children is conducted for months when school is in session. This audit reviews child care hours billed for school age children to identify improper payments resulting from providers billing for care during the school day. The Data Match Unit also works a variety of federally mandated reports in conjunction with other states to achieve their goal of ensuring program integrity.**
  - Review enrollment documents and attendance or billing records.
  - Conduct supervisory staff reviews or quality assurance reviews.
  - Audit provider records.
  - Train staff on policy and/or audits.
  - Other. Describe:

- **Department of Human Services conducts site visits of randomly selected providers. The visit includes review of attendance and billing records, health and safety requirements and the Department of Human Services procedures.**
- **Department of Human Services conducts regular Quality Control Reviews of program eligibility and provides staff with feedback and corrective measures. Department of Human Services holds a monthly statewide video conference addressing top error cases to inform staff of errors and necessary corrections while discussing best practices and preventative measures.**

8.1.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors. Check and describe any activities that the Lead Agency uses to investigate and recover improper payments due to program violations or administrative errors, as defined by your state/territory.

- a) Check activities that the Lead Agency uses to investigate and recover improper payments due to intentional program violations or fraud. Activities can include, but are not limited to, the following:
- **Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: Both the Department of Human Services and the Early Learning Division require recovery after a minimum dollar amount of \$200 in improper payments.**
  - **Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency). Oregon Department of Revenue Collections Unit for both Department of Human Services and the Early Learning Division**
  - Recover through repayment plans.
  - Reduce payments in subsequent months.
  - Recover through state/territory tax intercepts.
  - Recover through other means.
  - Establish a unit to investigate and collect improper payments and describe the composition of the unit below.
    - **The Department of Human Services Office of Payment Accuracy and Recovery (OPAR), has four units that work together to identify and collect improper payments: Data Match, Fraud Investigations, Overpayment Writing, and Overpayment Recovery.**
    - **Special Populations is a small program and identification of overpayments and recovery is done through direct contact with program contractors. Overpayments are usually handled through a reduction in payment for subsequent months of service until the overpayment has been recovered.**

Other. Describe:

- b) Describe the results of the Lead Agency activities regarding the investigation and recovery of fraud or intentional program violations. **The Department of Human Services conducts desk audits each month on approximately 160 randomly selected billing forms. Providers attendance logs are checked against the amount billed and client case record information, a monthly audit of child care for school age children is conducted during school months to identify proper payments resulting from providers billing for care during the school day, provider records are matched monthly with TANF, SNAP, Medicaid, and child care subsidy client records to identify eligible providers as well as questionable child care payments, eligibility workers refer potential client and provider payments and fraud to the Office of Payment Accuracy and Recovery. The Data Match Unit also works a variety of federally mandated reports in conjunction with other states to achieve their goal of ensuring program integrity, while reducing erroneous benefits and identifying fraud. The Department of Human Services has a statewide toll-free number for reporting fraud. This number is publicized in notices sent to child care providers and clients.**
- c) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Activities can include, but are not limited to, the following:
- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: **\$200 for both Department of Human Services and the Early Learning Division.**
  - Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).
  - Recover through repayment plans.
  - Reduce payments in subsequent months.
  - Recover through state/territory tax intercepts.
  - Recover through other means.
  - Establish a unit to investigate and collect improper payments. Describe:
    - **The Department of Human Services Office of Payment Accuracy and Recovery has four units that work together to identify and collect improper payments: Data Match, Fraud Investigations, Overpayment Writing, and Overpayment Recovery.**
    - **Special Populations is a small program and identification of over payments and recovery is done through direct contact with program contractors. Over payments are usually handled through a reduction in payment for subsequent months of service until the over payment has been recovered.**
  - Other. Describe: **The Department of Human Services conducts desk audits each month on approximately 160 randomly selected billing forms. Providers attendance logs are checked against the amount billed and client case record information, monthly audit of child care for school age children is conducted during school months to identify proper payments resulting from providers billing for care during the school day, provider records are matched monthly with TANF, SNAP, Medicaid, and child care subsidy client records to identify eligible providers as well as questionable child care payments, eligibility workers refer potential client and provider payments and fraud**

to the Office of Payment Accuracy and Recovery. The Data Match Unit also works a variety of federally mandated reports in conjunction with other states to achieve their goal of ensuring program integrity, while reducing erroneous benefits and identifying fraud. The Department of Human Services has a statewide toll-free number for reporting fraud. This number is publicized in notices sent to child care providers and clients.

- d) Check any activities that the Lead Agency will use to investigate and recover improper payments due to administrative errors.
- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: **\$200 for both Department of Human Services and the Early Learning Division.**
  - Coordinate with and refer to the other state/territory agency(ies) (e.g., state/territory collection agency, law enforcement agency).
  - Recover through repayment plans.
  
  - Reduce payments in subsequent months.
  - Recover through state/territory tax intercepts.
  - Recover through other means.
  - Establish a unit to investigate and collect improper payments and describe the composition of the unit below.
    - **The Department of Human Services Office of Payment Accuracy and Recovery, has four units that work together to identify and collect improper payments: Data Match, Fraud Investigations, Overpayment Writing and Overpayment Recovery.**
    - **Special Populations is a small program and identification of over payments and recovery is done through direct contact with program contractors. Over payments are usually handled through a reduction in payment for subsequent months of service until the over payment has been recovered.**
- Other. Describe:

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

- Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified. **An Intentional Program Violation is established when a provider commits fraud as determined by a state or federal court, by an administrative agency in a contested case, or by a person signing the designated form acknowledging the Intentional Program Violation and waiving the right to an administrative hearing. If the Intentional Program Violation is established in a contested case, the Department initiates the Intentional Program Violation hearing. There is no administrative appeal after a person waives the right to an Intentional Program Violation**

hearing, and the penalty may not be changed by subsequent administrative action except as follows:

1. A person who waives the right to an Intentional Program Violation hearing may seek relief in court or request a contested case hearing on the sole issue of whether the waiver was signed under duress (see OAR 461-025-0310). If there was a determination that the waiver was signed under duress, the initial Intentional Program Violation penalty is voided, and:
    - a. If a court determines that a waiver was signed under duress, the court may determine whether an Intentional Program Violation occurred and the amount of penalty.
    - b. If an administrative law judge determines that a waiver was signed under duress, the Department may initiate an Intentional Program Violation hearing to determine whether an Intentional Program Violation occurred and the amount of the penalty.
  2. Child care providers who have incurred an overpayment established as an Intentional Program Violation claim are ineligible for payment as follows:
    - a. For six months and until the full amount of the overpayment is paid; or
    - b. Permanently, if the Department of Human Services Child Care Program Manager finds that such ineligibility is in the public interest.
- Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified. \_\_\_\_\_
- Prosecute criminally.
- Other. Describe:
- **Methods for recovering overpayments in the Department of Human Services self-sufficiency programs (including child care) are established in OAR 461-195-0551. Practices follow federal regulations, state law and the policies outlined in the Oregon Accounting Manual, Chapter 35 – Accounts Receivable Management. This can be viewed online at [http://www.oregon.gov/DAS/CFO/SARS/pages/oam\\_toc.aspx](http://www.oregon.gov/DAS/CFO/SARS/pages/oam_toc.aspx). Special Populations is a small program and identification of over payments and recovery is done through direct contact with program contractors. Over payments are usually handled through a reduction in payment for subsequent months of service until the over payment has been recovered.**
  - **Special Populations follows the Oregon Accounting Manual, Chapter 35 – Accounts Receivable Management if an over payment cannot be recovered.**