Child Care and Development Fund (CCDF) Plan For Washington FFY 2019-2021

1 Define CCDF Leadership and Coordination with Relevant Systems

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

1.1 CCDF Leadership

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E(c)(1)).Note: An amendment to the CCDF State Plan is required if the Lead Agency changes or if the Lead Agency official changes.

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

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

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a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Department of Children, Youth, and Families (DCYF)

Street Address: 1110 Jefferson St SE

City: Olympia

State: Washington

ZIP Code: 98504

Web Address for Lead Agency: www.dcyf.wa.gov

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Ross

Lead Agency Official Last Name: Hunter

Title: Secretary

Phone Number: (360) 407-7909

Email Address: ross.hunter@dcyf.wa.gov

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.

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a) CCDF Administrator Contact Information:

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CCDF Administrator First Name: Matt

CCDF Administrator Last Name: Judge

Title of the CCDF Administrator: Child Care Administrator

Phone Number: (360) 522-3241

Email Address: matt.judge@dcyf.wa.gov

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

Street Address: Same as for Lead Agency

City: Same as for Lead Agency

State: Same as for Lead Agency

ZIP Code: Same as for Lead Agency

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

CCDF Co-Administrator First Name: NA

CCDF Co-Administrator Last Name: NA

Title of the CCDF Co-Administrator: NA

Description of the role of the Co-Administrator: NA

Phone Number: NA

Email Address: NA

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

Street Address: NA

City: NA

State: NA

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ZIP Code: NA

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.

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V	All program rules and policies are set or established at the state or territory level. If checked, skip to question 1.2.2.
	Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check al 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.
	Cther.
	Describe:

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•	Who conducts eligibility determinations? CCDF Lead Agency Temporary Assistance for Needy Families (TANF) agency
	v is the CCDF program operated? In other words, which entity(ies) implement or these CCDF services? Check all that apply Effective Date: 07/01/2019
	4. Other. List and describe other program rules and policies and describe (e.g., quality rating and improvement systems [QRIS], payment practices):
	☐ Other. Describe:
	If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
	Local entity (e.g., counties, workforce boards, early learning coalitions).
;	3. Payment rates are set by the: State or territory
	Describe:
	Cother.
	entity(ies) can set.
	If checked, identify the entity and describe the type of eligibility policies the local
	Local entity (e.g., counties, workforce boards, early learning coalitions).
•	2. Sliding-fee scale is set by the: State or territory

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	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.
	Describe
b)	Who assists parents in locating child care (consumer education)?
	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
	Cother.
	Describe
c)	Who issues payments?
	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
	Cother.
	Describe

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1.2.3 Describe the processes the Lead Agency uses to monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.2, including written agreements, monitoring and auditing procedures, and indicators or measures to assess performance of those agencies (98.16(b)). Note: The contents of the written agreement may vary based on the role the agency is asked to assume or type of project, but must include at a minimum, tasks to be performed, schedule for completing tasks, budget which itemizes categorical expenditures in accordance with CCDF requirements, and indicators or measures to assess performance (98.11(a)(3)).

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DCYF monitors Child Care Aware's (CCA's) contracted work (described in Section 1.4.1) through monthly activity reports, yearly site compliance monitoring using onsite program and fiscal review for each subcontracted region, monthly leadership meetings and implementation work group meetings, quarterly scholarship advisory meetings, budget to actuals meetings, and an annual independent audit. Performance metrics are aligned with Early Start Act milestone requirements. DCYF also reviews an annual Resource and Referral Trend Report showing supply and referral demand data, analytical reports, and tables.

DCYF monitors University of Washington's contracted Early Achievers provider coaching work through weekly and monthly activity reports, monthly implementation work group meetings, regular assessment reporting (upon the release of quality ratings each cohort period), quarterly coach training reports and budget to actuals reporting. DCYF also receives annual data and evaluation reports which detail the findings and outcomes within coaching, leadership and quality improvement efforts. Performance metrics are aligned with the Early Start Act milestone requirements.

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)).

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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.

DCYF makes child care information systems available to, and reusable by, public agencies in other states by:

- Adhering to industry standards and best practices with regard to the development frameworks and platforms (e.g. supported version(s) of Microsoft .NET, SQL, etc.) it uses;
- Developing and maintaining technical documentation related to all application development;
- Following Agile methodology (e.g. sprint-based releases) as the foundation of the agency's Software Development Life Cycle (SDLC);
- Complying with all State (e.g. OCIO 141.10) and Federal (e.g. FERPA, NIST 800-53) information security requirements;
- Applying DevOps principles; and
- Maintaining source and configuration control using Microsoft Team Foundation Server (TFS).

Agencies in other states seeking to acquire a copy of code or compiled software developed by DCYF submit a written request to the DCYF IT division via the DCYF Service Desk. The request is evaluated for approval by the DCYF Deputy Secretary of Infrastructure and Operations, CIO, and CISO before any code or compiled software is provided.

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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)).

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Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally identifiable information.

DCYF's Policy and Procedure 1.02 governs public records requests in accordance with Washington's Public Records Act, including disclosure of confidential and personallyidentifiable information about children and families receiving CCDF assistance. It requires the DCYF Public Records Officer (PRO) to take action on requests that contain, or may contain, identifying information of minor children or their families. In these cases, the PRO seeks the requester's permission to redact the confidential and personally-identifiable information and redacts if permission is granted. If the requester does not grant permission, the PRO contacts the affected individuals and documents the outcome of each contact. Further, the Public Records Act contains a list of information that is exempt from public disclosure, e.g., attorney-client privileged information, information obtained as a result of background checks of providers, information of child sexual assault victims and crime victims/witnesses, and certain other private information. Finally, under the Collective Bargaining Agreement (CBA) between Washington and Service Employees International Union (SEIU) 925, DCYF is required to redact family child care subsidy providers' Social Security and Provider numbers on any document subject to public records request, and provide notice to SEIU of any public records request for identifying information of these providers.

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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.

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Census at

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)(I)(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.

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

The membership of Washington's 10 Early Learning Regional Coalitions includes representatives from Pierce and King County, and City of Seattle, along with county health departments and Educational Service Districts around the state. DCYF provided these Regional Coalitions the same CCDF review materials as the Early Learning Advisory Council and gave them specific timeframes to review the draft Plan in June 2018. Further, Washington State has a network of nine Educational Services Districts that DCYF consulted in developing the plan.

b) Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body.

The State Advisory Council on Early Childhood Education and Care, referred to as the Early Learning Advisory Council (ELAC), provided extensive input into the plan development during the months February through June 2018, particularly at two of its meetings. It also provided review of a draft in June 2018. ELAC membership includes the

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Office of Superintendent of Public Instruction, Washington Library Association,
Developmental Disabilities Community, School Superintendent, staff to the Washington
State Board of Community and Technical Colleges, Washington Federation of
Independent Schools, Children's Alliance, the Head Start State Collaboration Director,
Tribal representation, a center child care provider, the Washington Student Achievement
Council, a licensed family home provider, the Department of Health, Thrive Washington,
and the Early Support for Infants and Toddlers (ESIT) program.

c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for States to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many States and Tribes have consultation policies and procedures in place.

DCYF convenes an Indian Policy Early Learning (IPEL) committee which includes delegates from Port Gamble S'Klallam Tribe, Tulalip Tribes, Jamestown S'Klallam Tribe, Chehalis Confederated Tribes, Suquamish Tribe, Squaxin Island Tribe, Samish Indian Nation, Cowlitz Indian Tribe, and Nisqually Tribe. Further, since 2016, 24 of Washington's 29 recognized tribes, and a Washington Recognized American Indian Organization (RAIO), have attended IPEL, and all 29 tribes and all RAIOs receive IPEL meeting minutes and invitations. In March 2018 DCYF provided IPEL an initial plan draft for review, and on March 15 and 2018, IPEL reviewed the draft at its guarterly meeting. Washington State's 29 federal recognized tribes include the following: Chehalis Confederated Tribes; Lower Elwha Klallam Tribe; Colville Confederated Tribes; Lummi Nation; Cowlitz Indian Tribe; Makah Tribe; Hoh Tribe; Muckleshoot Tribe; Jamestown S'Klallam Tribe; Nisqually Tribe; Kalispel Tribe; Nooksack Tribe; Port Gamble S'Klallam Tribe; Sauk-Suiattle Tribe; Puyallup Tribe; Shoalwater Bay Tribe; Quileute Tribe; Skokomish Tribe; Quinault Indian Nation; Snoqualmie Tribe; Samish Indian Nation; Spokane Tribe; Squaxin Island Tribe; Tulalip Tribes; Stillaguamish Tribe; Upper Skagit Tribe; Suguamish Tribe; Yakama Nation and Swinomish Tribe. The tribal leaders from all 29 tribes are part of the DCYF listserv and received the draft CCDF plan with the opportunity to review and give input into the plan. The tribes also received notification about when and where to attend the public hearing for CCDF input along with a website to submit input. DCYF also contacted executives of the Tribal Nations notifying them of DCYF's planned development of the plan and provided an opportunity to formally consult with DCYF under the mutually adopted consultation protocol, but no Tribal Nation elected

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to request this formal process.

d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan.

DCYF convened an executive steering committee (ESC) to advise DCYF on adoption of Plan language based on initial internal DCYF Plan drafts, and later, based on feedback from ELAC, IPEL, Regional Coalitions, five informal public meetings, the formal public hearing, and other sources. ESC members reviewed draft Plan language and recommended changes in their areas of expertise, and advised DCYF on the process for gathering public feedback. The ESC membership included the following:

- DCYF Deputy Director
- DCYF Assistant Director, Partnerships and Collaboration
- DCYF Assistant Director, Quality Practice and Professional Growth
- DCYF Assistant Director for the Early Start Act
- Assistant Secretary, Department of Health
- Assistant Secretary, DSHS/Economic Services Administration
- CEO of Child Care Aware (CCA) of Washington
- Executive Director, Washington State Association of Head Start and ECEAP
- President, SEIU 925
- CEO, Schools Out Washington
- Executive Vice President of External Affairs, Thrive Washington
- Senior Policy Advisor, Office of the Governor
- Research Director, Washington Workforce Training & Education Coordinating Board
- ELAC Board Chair
- Director of Early Learning and Teaching, Office of Superintendent of Public Instruction
- Program Administrator, Cowlitz Tribe
- Early Learning Policy, Advocacy and Governmental Affairs Advisor, Puget Sound Educational Service District
- Office Chief, DSHS Children's Administration
- Councilmember, Colville Confederated Tribes

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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:

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a) Date of the public hearing. 06/09/2018

Reminder: Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g. the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).

b) Date of notice of public hearing (date for the notice of public hearing identified in (a). 05/18/2018

Reminder: Must be at least 20 calendar days prior to the date of the public hearing. If more than one public hearing was held, enter one date of notice (e.g. the date of the first notice, the most recent notice or any date of notice that demonstrates this requirement).

c) How was the public notified about the public hearing? Please include specific website links if used to provide notice.

DCYF notified the public about the hearing, and public meetings that preceded it, via documents posted to its website (https://dcyf.wa.gov/about/government-community/legislative-federal-relations/ccdf; https://del.wa.gov/government/child-care-and-development-fund), invitations circulated through Facebook, and email communications. All notification mediums complied with Americans with Disabilities Act requirements, including, e.g., documents compatible with assistive technologies, adjustable color and font sizes, etc.

d) Hearing site or method, including how geographic regions of the state or territory were addressed. DCYF convened four informal public meetings in Seattle, Yakima,

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Bellingham, and Spokane, and an additional meeting by webinar, between April and May 2018, to gather community feedback prior to the public hearing. Each of these meetings were convened on a weekend or evening outside business hours to provide the maximum opportunity for families to participate. The CCDF Administrator co-facilitated the non-webinar meetings with a community member, and participants were provided translation in Spanish, or other languages upon request, and multiple mediums by which to participate. The formal public hearing convened on Saturday June 9, 2018, in Spokane, and again featured translation and co-facilitation.

- e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.) DCYF provided the public plan drafts prior to each of the informal public meetings, and prior to the formal hearing. DCYF posted the plan drafts on its site and referred to this webpage in its notice for the formal hearing.
- f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? DCYF informed the public that the informal public meetings and formal hearing were opportunities to comment on both policy and procedure in DCYF programs and initiatives funded by, or relevant to, the CCDF grant. DCYF provided the public a concise explanatory document quoting feedback received, DCYF action planned in response, and the timeline for action.
- 1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found here: https://www.acf.hhs.gov/occ/resource/pi-2009-01)

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a) Provide the website link to where the Plan, any Plan amendments, and/or waivers are available. Note: A Plan amendment is required if the website address where the Plan is posted is changed.

https://www.dcyf.wa.gov/about/government-community/legislative-federal-relations/ccdf

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.

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Described
Describe: DCYF presented the draft CCDF plan at two ELAC meetings and encouraged ELAC members to forward public meeting and formal hearing information, including links to the copies of the draft plan on the website, to their contacts.
Working with child care resource and referral agencies. Describe:
At ESC meetings, DCYF encouraged participants to forward public meeting and formal hearing information, including links to the copies of the draft plan on the website, to their contacts.
Providing translation in other languages. Describe:
Sharing through social media (e.g., Twitter, Facebook, Instagram, email). Describe:
Providing notification to stakeholders (e.g., provider groups, parent groups). Describe:
Other. Describe:

Working with advisory committees

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)).

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

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

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

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

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

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

The membership of Washington's 10 Early Learning Regional Coalitions (ELRCs) includes representatives from Pierce and King Counties and the Cities of Seattle and Tacoma, along with county health departments, Educational Service Districts, and community partners around the state. The goal DCYF's coordination with the ELRCs is to support a regional structure for the implementation of the Early Learning Plan (ELP), see

http://www.k12.wa.us/EarlyLearning/pubdocs/WashingtonEarlyLearningPlan.pdf.

Processes to achieve this goal include establishing a governance structure to coordinate the early learning system across regions, using data to drive decision making implementing the ELP, providing outreach on early learning assessments,

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home visiting, and Early Achievers, and building public awareness of the importance of investments in early learning.

☑ (REQUIRED) State Advisory Council on Early Childhood Education and Care (or similar coordinating body) (pursuant to 642B(b)(I)(A)(i) of the Head Start Act).

Describe the coordination goals and process:

Washington's Early Learning Advisory Council (ELAC) provides input and recommendations to DCYF on statewide early learning community needs and progress. ELAC representatives from around the state meet at least quarterly to provide input and recommendations to DCYF so strategies and actions are wellinformed and broadly supported by parents, child care providers, health and safety experts, and interested members of the public. ELAC members represent Washington's regionally, culturally, and racially diverse communities, including members from public, nonprofit, and for-profit entities. ELAC and DCYF partnered with the goal to create and implement the state's Early Learning Plan (ELP). The ELP's vision is, "In Washington state, we work together so that all children start life with a solid foundation for success, based on strong families and a world-class early learning system for all children prenatal through grade 3. Accessible, accountable, and developmentally and culturally appropriate, our system partners with families to ensure that every child is healthy, capable, and confident in school and in life." ELAC further advised DCYF on the implementation of the CCDF Reauthorization passed by Congress and the Early Start Act passed by the Washington State Legislature implementing 12 month eligibility and mandatory Early Achievers participation for licensed providers serving non-school age children receiving subsidy.

- Check here if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.
- ✓ (REQUIRED) Indian tribe(s) and/or tribal organization(s), at the option of individual tribes.

Describe the coordination goals and process, including which tribe(s) was consulted:

DCYF coordinates and collaborates with Indian Tribes with the goal of promoting access to continuous, high quality early learning for Indian youth and families as part of DCYF's overarching goal that all children are kindergarten ready, and ready for success later in life, with race not a predictor of success. Coordination and collaboration also focus on supporting Tribal sovereignty. In addition to co-hosting

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periodic culturally responsive conferences and workshops such as the Tribal Early Learning Language Summit and Tribal Home Visiting Summit, DCYF engages in the following collaboration activities with Tribal Nations:

DCYF convenes an Indian Policy Early Learning (IPEL) committee which includes delegates from Port Gamble S'Klallam Tribe, Tulalip Tribes, Jamestown S'Klallam Tribe, Chehalis Confederated Tribes, Suquamish Tribe, Squaxin Island Tribe, Samish Indian Nation, Cowlitz Indian Tribe, and Nisqually Tribe. Further, since 2016, 24 of Washington's 29 recognized tribes, and a Washington Recognized American Indian Organization (RAIO), have attended IPEL, and all 29 tribes and all RAIOs receive IPEL meeting minutes and invitations. IPEL was established in 2013 following recommendations of native tribal leaders. The specific goal of IPEL is to assist the collective needs of the Tribal governments with other RAIOs to assure quality and comprehensive service delivery to all American Indians and Alaska Natives in Washington State. Each Federally Recognized Tribe of Washington State may determine one delegate by tribal resolution and determine any amount of alternates that they desire. Regular meetings of IPEL convene quarterly and are held at a place established by IPEL or the Executive Committee.

DCYF further coordinates with Indian tribes through the Tribal Policy Advisory Committee (TPAC). Established in the fall of 2018, TPAC is comprised of representatives from the federally recognized tribes of Washington State and RAIOs. Tribes and RAIOs select committee representatives who may serve on subcommittees for child welfare, early learning, and juvenile justice. The TPAC and its subcommittees primarily focus on DCYF program and administrative policies that directly affect Indian tribes. Its goals are to identify potential issues for round table and consultation and guide implementation of the DCYF Administrative Policy Chapter 10.03, and the Centennial Accord (TPAC subcommittees can bring recommendations to TPAC should an issue arise regarding the implementation of the Policy and/or the Accord). With the establishment of DCYF, IPEL now operates as a subcommittee to TPAC.

The DCYF Office of Tribal Relations' (OTR) goal is to provide technical support to the TPAC and its subcommittees. DCYF leadership staff (regional or headquarters) put forward agenda items to the OTR for TPAC meetings or subcommittee meetings to seek input from tribes and RAIOs. Example agenda items may include policies and

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procedures (new or amended) that impact tribal members living on or off reservation; changes to the Revised Code of Washington (RCW) or Washington Administrative Code (WAC) that will impact tribal reservation programs or services delivery to Indian children and families; and training on the federal and state Indian Child Welfare Acts.

Finally, staff from OTR focus on the goal of effective, appropriate communication with tribes, They regularly send update communications to all tribes and RAIOs in the state, not just those participating in IPEL or TPAC, and travel to reservations across the state to observe programs and interact with staff and administrators.

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 and
Part B, Section 619 for preschool).

Describe the coordination goals and process:

DCYF is the lead agency for Part C, and its program is called Early Support for Infants and Toddlers (ESIT), which is also represented on ELAC by the program administrator. ESIT works with the Early Achievers team to remove barriers for early learning programs, and to support provider inclusion and full participation of ESIT enrolled children in typical child care settings. ESIT recognizes the challenges for families around transitions and prioritizes transitions from birth to three services to preschool and other early learning programs for policy development and training. ESIT collaborates with DCYF's state-funded preschool and Head Start program to support and strengthen this process.

Further, the 2018 supplemental budget included funding to develop a plan for supporting child care physical and mental health consultation in early learning programs with the goal to promote child health and safety. Child Care Health consultants are health professionals such as nurses, dietitians, and mental health providers who can assist programs in assuring the safety of children with complex medical needs by providing technical assistance on topics like cleaning and sanitation, healthy food, opportunities for physical activity, safe medication administration, supportive social and emotional environment, and meeting the needs of children with

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specific physical and mental health concerns. DCYF has begun research into the current landscape of physical and mental health consultation in early learning programs across the state. DCYF established an advisory group that is developing recommendations for a statewide consultation plan on mental health topics like trauma informed care and expulsion prevention. DCYF further began preliminary development of a statewide physical health consultation framework and consultant recruitment strategy.

☑ (REQUIRED) State/territory office/director for Head Start state collaboration.

Describe the coordination goals and process:

The Head Start Collaboration Office is housed within DCYF. The Administrator (Director) is a member of ELAC and works closely with the Child Care Administrator, coordinating meetings on shared projects, communicating by email, phone, and inperson meetings. Coordination goals include expanding services and enhancing quality for infant and toddler center-based services; alignment of standards across licensing, Early Head Start and Head Start, Early Achievers and ECEAP so that the early learning system has a unified set of regulations that are easy to understand by providers in the field; support for the expansion and access of high quality workforce and career development opportunities for staff; and increasing the participation of Early Head Start and Head Start programs in Early Achievers. In addition, the Head Start Collaboration Office works closely with Early Head Start and Head Start programs that offer services to families receiving Working Connections Child Care subsidies to provide information from, and feedback to, the Child Care Administrator.

☑ (REQUIRED) State agency responsible for public health, including the agency responsible for immunizations.

Describe the coordination goals and process:

DCYF and Department of Health (DOH) leaders meet regularly to collaborate on public health issues impacting young children and families. DOH is represented on ELAC and DOH and DCYF jointly manage the Essentials for Childhood Initiative, a Centers for Disease Control and Prevention (CDC) collective impact effort to promote safe, stable and nurturing environments for children. DOH provided current evidence-based recommendations to DCYF on a variety of health and safety topics included in the revision of the state's child care licensing standards. DCYF and DOH regularly collaborate to ensure that children enrolled in child care are up to date on required

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immunizations. DCYF, DOH and OSPI collaborate on the Governor's Healthiest Next Generation Initiative to promote children's healthy eating and physical activity. DCYF and DOH also collaborated on a Governor's Directive to prevent children's exposure to lead which resulted in a new regulation requiring early learning programs to routinely test water sources for lead.

✓ (REQUIRED) State/territory agency responsible for employment services/workforce development.

Describe the coordination goals and process:

DCYF coordinates with agencies responsible for employment services/workforce development with the goal of improving access to continuous, high quality early learning opportunities so that all children arrive to kindergarten ready to succeed. DCYF also shares these agencies' goals to address intergenerational poverty, strengthening integration between early learning and family economic prosperity programs. Finally, coordination assists the goal of preventing childhood trauma and interaction with the child welfare system by supporting family needs.

Various Washington agencies' and groups' work centers on employment services and workforce development, from DSHS Community Service Division, to the Employment Security Department (ESD), Department of Commerce (Commerce), and the State Board of Community and Technical Colleges. DCYF coordinates with DSHS, ESD, and Commerce through participation in the Sub 3 work group that meets monthly to discuss cross-agency goals, priorities, and activities addressing intergenerational poverty, workforce development, early childhood education. DCYF brings a focus on early childhood education improvement goals through increased access to high quality, continuous early learning opportunities.

DCYF further coordinates with DSHS on WCCC policy development and service delivery for families that participate in the Basic Food Employment and Training (BFET) and Resources to Initiate Successful Employment (RISE). Under WCCC rules, families participating in these workforce development programs are eligible for WCCC through their education activities without an additional work requirement. As a result, BFET and RISE families are increasingly represented in WCCC caseloads.

Lastly, DCYF began participating in the Workforce Training and Education

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Coordinating Board Integrated Service Delivery Subcommittee. DCYF brings its focus and specialty in Early Childhood Education to critical conversations on leveraging the Workforce Innovation and Opportunity Act to improve Washington's workforce development system, achieving better results for both job seekers and employers.

Describe the coordination goals and process:

In Washington, the Office of the Superintendent of Public Schools (OSPI) is responsible for public education, and DCYF administers state-funded preK through its Early Childhood Education and Assistance (ECEAP) program. DCYF therefore coordinates with OSPI with the goal of expanding access to high quality programs for children birth through age five years, with emphasis on preK, toward its goal of 90 percent kindergarten readiness for all Washington children. An example is the ongoing collaboration to expand high quality preK in Washington. ECEAP uses a "mixed delivery" system that includes a variety of different types of providers, including community colleges, nonprofit and community preschool centers, Educational Service Districts, and school districts. Currently more than 60 percent of students are served in school district classrooms, and this percentage is likely to grow as the program is expanded because of the ability of school districts to build and remodel facilities and staff programs. DCYF works closely with OSPI to administer this system.

Representatives of OSPI and DCYF co-chair a work group focused on further ECEAP expansion and will continue to work together to meet a legislatively established goal to provide all eligible lowincome 3 and 4-year old children access to ECEAP by the 2022-23 school year, which will nearly double the number of children served by the program compared to the 2014-15 school year.

As part of full-day kindergarten, school districts must administer the Washington Kindergarten Inventory of Developing Skills (WaKIDS). WaKIDS has three major components: (1) The Family Connection welcomes families into the Washington K-12 system as partners in their child's education by providing an opportunity for families to meet individually with their child's kindergarten teacher at the beginning of the school year; (2) The Wholechild Assessment helps kindergarten teachers learn about the skills and strengths of the children in their classrooms, using Teaching Strategies

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GOLD, so they can meet the needs of each child; and (3) The Early Learning Collaboration aligns practices of early learning professionals and kindergarten teachers to build connections between them and promote smooth, successful transitions to kindergarten for children. Thrive Washington provides a framework for the collaboration, and CCA provides school principals lists of child care providers that have children who will attend the principal's school.

Finally, the added clarity and flexibility in the Every Student Succeeds Act (ESSA) to support prekindergarten families, educators, and children, makes it possible to utilize a larger share of ESSA program funds to advance the statewide early learning initiatives listed above. OSPI and DCYF will collaborate on a process school districts and communities can use to assess the need for additional preschool opportunities, to determine how best to meet the need, and to provide technical assistance to organizations identified as potential sources for additional opportunities.

DCYF's Licensing Division is responsible for child care licensing. The goal of internal DCYF coordination of licensing activities is to promote quality early learning experiences, health, safety, and positive development for children receiving care in licensed settings. Coordination occurs through weekly Leadership Team meetings, Communications division internal notifications of program actions that impact licensors' work, and standing and ad hoc project meetings involving multiple DCYF divisions.

☑ (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 DCYF Healthiest Next Generation Program Manager frequently coordinates with OSPI Child Nutrition Staff on projects that promote healthy eating and physical activity. Recent examples include the development of language for inclusion in licensing regulations to requiring all licensed programs to follow CACFP meal patterns whether or not they are enrolled in CACFP, and an offer by the OSPI Child Nutrition Services staff to train licensors on CACFP rules. Some child care licensors have established relationships with local CACFP Sponsors or Specialists and others have

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not. DCYF recognizes that regular coordination should occur both in the field and administratively and therefore works with OSPI leadership to improve coordination between the two agencies in this area.

☑ (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:

DCYF coordinates with OSPI's McKinney-Vento State Coordinator for Homeless Education through its Partnerships and Collaboration division, by periodically attending and participating in McKinney-Vento Liaison training, and through collaboration on specific projects impacting families experiencing homelessness. Partnerships and Collaboration assists the State Coordinator on, e.g. data requests regarding families experiencing homelessness participating in DCYF administered programs. Goals for the collaboration include expanding access to quality early learning programs for families and children experiencing homelessness so all children, including the most vulnerable, arrive to kindergarten ready to learn, impacting their later academic and professional success, and to assist providers serving children and families experiencing homelessness. DCYF works with the Coordinator and CCA to develop training and technical assistance to providers on identifying and serving children and their families experiencing homelessness.

Describe the coordination goals and process:

DSHS administers Temporary Assistance for Needy Families (TANF) in Washington State, and DCYF coordinates with DSHS on TANF funding as it pertains to CCSP. Goals of this coordination include expanding access to high quality early learning experiences, marked by continuity of care, for low income families, including families receiving TANF, working toward self-sufficiency. DCYF's vision is to have 90 percent of Washington children ready for kindergarten, and coordination with DSHS brings the state closer to that vision through coordination on funding impacting programs that provide families a choice of subsidized child care options that are increasingly accessible, culturally responsive, and data-driven.

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Describe the coordination goals and process:

The Washington State Health Care Authority (HCA) is the agency responsible for Medicaid and Children's Health Insurance Program (CHIP) administration. HCA collaborates with DCYF to leverage and maximize Medicaid reimbursement for medically needy allowable services for early learning programs and services. In addition, a cross agency workgroup led by OSPI called Healthy Students, Promising Futures, includes HCA, DOH, and DCYF to explore potential expansion of health care services and increased Medicaid reimbursement for services performed in a school setting.

☑ (REQUIRED) State/territory agency responsible for mental health Describe the coordination goals and process:

Effective July 1, 2018, HCA is designated as the state behavioral health authority, whileDOH licenses behavioral health service providers, and DSHS has authority over the operation and maintenance of the state hospitals. DCYF hired a new staff member who works to create a system of mental health consultation throughout the state to provide technical assistance, treatment services, and referrals for the birth to five population served in programs administered by DCYF. Currently there is no comprehensive system of mental health coordination in the state, but state agencies are beginning coordination efforts. The integration of behavioral health and physical health in the payment and administration of services as mandated by the Legislature will further encourage cross-pollination of ideas and coordination of services.

☑ (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:

DCYF contracts with CCA, a statewide nonprofit organization dedicated to ensuring that every child in Washington has access to high-quality child care and early learning programs. CCA influences child care and early learning policy while also delivering the means to make a positive difference for all children, including those furthest from opportunity.

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The goal of this partnership is to provide thorough and independent information and support for families seeking quality child care, for child care programs seeking to improve quality, and for effective policymaking.

The vision for this partnership is every family in Washington having access to highquality early learning choices for their children, and every child care program having the resources and support needed to help prepare children for success in life.

☑ (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable).

Describe the coordination goals and process:

DCYF coordinates with School's Out Washington, a statewide afterschool network that provides services and guidance for organizations to ensure all young people have safe places to learn and grow when they are not in school. DCYF and School's Out are dedicated to building community systems to support quality afterschool programs for Washington through training, advocacy and leadership. All programs in the state of Washington that serve children age 5 to 18 years outside of formal school hours are eligible to receive services from School's Out Washington.

With support from DCYF, School's Out Washington hosts an annual two-day conference, The Bridge from School to Afterschool and Back, in October. This conference focuses on helping schools and afterschool programs work together to support children and youth. Each year, nationally recognized speakers, researchers, and advocates present materials on best practices, cutting-edge information, and useful tools. Participants come from around the country to learn from presenters and to network with others in the field.

Finally, through its partnership with School's Out Washington, DCYF works with the expanded learning opportunity intermediary to ensure the Expanded Learning Opportunities Quality Initiative continues to support providers to serve school-age children. School's Out Washington was founded in 1987 as an intermediary focused on fostering culturally responsive, high quality, and intentional out of school time learning activities and environments. DCYF works with the intermediary to provide professional development opportunities for school-age child care providers and to solicit input and direction from school-age child care providers on needs related to

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system building efforts, professional development, and strategies to serve school-age children.

The Washington agency responsible for emergency management under Chapter 38.52 RCW is the Military Department-Emergency Management Division. The Director of the Military Department is responsible to the Governor for carrying out the program for emergency management in Washington. The state level emergency coordination goals and process for DCYF (and all state agencies, commissions, boards, and councils) is explained in detail in the Washington State Comprehensive Emergency Management Plan (CEMP). Under the CEMP, DCYF is a critical mass care partner and is expected to participate in all activities stipulated under the Plan in support of the entire cycle of emergency management - preparedness, response, and recovery. This includes participation by DCYF executive leadership as well as designated planning and response personnel.

Key expectations for DCYF under the CEMP include agency level continuity of operations planning; working collaboratively with other state agencies participating in state level assessments, planning, training, and exercises; reassigning and mobilizing all available agency resources when so directed by the Governor to support a state level response; and most importantly, staffing the mass care desk at the State Emergency Operations Center when required in support of any disaster impacted jurisdiction's or tribe's emergency response.

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
State/territory institutions for higher education, including community colleges

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	her federal, state, local, and/or private agencies providing early childhood d school-age/youth-serving developmental services.
De	scribe

State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant.

Describe

Describe

Since its creation by the state Legislature in 2010, the Home Visiting Services Account (HVSA) has brought together state, federal, and private dollars to support a portfolio of evidence and research based, promising home visiting programs. DCYF oversees the HVSA and Thrive Washington supports service delivery and high quality implementation of programs funded through the HVSA. About 2,200 families, many of whom live in some of the state's most vulnerable communities, are in home visiting programs funded by the state's HVSA. Washington specifically emphasizes reaching the most vulnerable geographic and racial/ethnic groups, focusing on families with children prenatal through age three years. A specific focus includes assessing and cultivating interest in, and capacity for, implementation of high quality home visiting in Tribal communities.

Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment.

Describe

■ State/territory agency responsible for child welfare.

Describe

Child Welfare services formerly provided by DSHS Children's Administration were integrated with early learning programs under DCYF July 1, 2018. One of DCYF's goals is to provide high quality early learning opportunities for children involved in the child welfare system. Broader goals of coordination include increasing availability and accessibility of high quality subsidized childcare; seamless, timely referrals; and a well-trained, trauma informed workforce.

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State/territory liaison for military	child	care	progra	ıms.
Describe				

Provider groups or associations.

Describe

DCYF Coordinates with the Washington Childcare Centers Association (WCCA) which represents child care centers throughout the state. Goals of the collaboration include providing and receiving input and feedback concerning child care and early learning programs, the affordability and availability of quality child care programs throughout the state, and the impact of regulatory and licensing decisions on the sustainability of their businesses and ability to provide high quality programs and outcomes for children. Processes for this collaboration include participation in ELAC and ad hoc meetings with DCYF staff to address issues center providers face.

Parent groups or organizations.

Describe

DCYF coordinates with the Parent Advisory Group (PAG), providing a sounding board for decisions, ideas and questions that shape the future of DCYF programs. DCYF believes parental involvement in decision-making is key to policies and programs that support families' strengths and needs. The PAG is made up of parents and family caregivers of children, from birth through nine years old. PAG meets quarterly to discuss various program issues related to early learning access, quality, and continuity.

Other.
Describe

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

Optional Use of Combined Funds:

States and territories have the option to combine CCDF funds with any program identified as required in 1.4.1. These programs include those operating at the federal, state, and local levels

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

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

https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf).

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

Effective Date: 07/01/2019

No No	(If no, sk	kip to q	uestion	1.5.2)
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Yes. If yes, describe at a minimum:

a) How you define "combine"

Braiding or layering funds from one or more federal or state sources.

b) Which funds you will combine

CCDF, Temporary Assistance to Needy Families (TANF), Basic Food Employment and Training (BFET), and State funds.

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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 goal of these combined funds is to extend and improve the supply of full-day, full-year programs with comprehensive services, and low staff-child ratios, to vulnerable families with children ages birth through twelve years, and to ensure continuity of programs participating in this approach. DCYF expects this approach will result in smoother transitions for these children and will ultimately put them on the path to kindergarten readiness as well as maintain continuity of care and increase supply of full-day, full-year programs.

d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?

DCYF cost allocates funds at the state level based on the program and funding sources available.

e) How are the funds tracked and method of oversight

DCYF tracks the funds through contracts with the providers. Further, all subsidy provider payments are tracked in the state's Social Services Payment System, and DCYF assigns specific payment codes to providers receiving combined funds so that these payments can be tracked and compared to payments to providers not receiving combined funds. DSHS and DCYF review payment system reports, including data on providers receiving combined funds, at least quarterly.

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)?

Note:

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

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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 CCDF child care program (98.55(f)).

Effective Date: 07/01/2019 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: General state funds. -- If known, identify the estimated amount of public funds that the Lead Agency will receive: \$ 50 million 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:

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NA

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

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): 12 percent

-- 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:

Under Washington's Early Start Act of 2015 DCYF prioritizes the integration of child care and Washington's state-funded comprehensive preschool (ECEAP) to create a mixed delivery system that provides the following:

- High quality services to improve child outcomes and prioritize early learning services for children who need them most.
- A safety and quality improvement system that is accessible to all children, families and providers in Washington.
- Integrated and seamless services for families participating in child care and preschool.

To accomplish this, the DCYF standards alignment project sets the foundation for integration of child care and ECEAP, creating a clear progression of quality in early learning programs, with one set of standards connecting licensing, Early Achievers (quality rating and improvement system), and ECEAP. In the continuum of services, ECEAP's comprehensive services are designed to serve children who are furthest from opportunity. The aligned standards provide a progression from licensing through Early Achievers and ECEAP.

Additionally, DCYF continues to expand the Child Care Pathways Project to provide training and support to child care centers and family child care providers interested in offering ECEAP services. During the pilot phase in 2015, DCYF contracted with Child Care Aware of Washington (CCA), who developed and tested training and coaching approaches as well as additional supports necessary to meet ECEAP standards. As a result of the project, more child care providers are participating in implementation of

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integrated ECEAP and child care services.

- -- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: \$ 7.2 million
- -- Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents:

ECEAP offers three models to best meet the needs of children and working families -Part Day, Full School Day, and Extended Day.

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:

ECEAP offers three models to best meet the needs of children and working families -Part Day, Full School Day, and Extended Day.

- -- Estimated percentage of the MOE Fund requirement that will be met with preK expenditures (not to exceed 20 percent): 9 percent
- -- 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:

NA

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the MOE Fund requirement: \$ 5.2 million

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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)).

DCYF partners with many private organizations, most notably Child Care Awareof Washington (CCA), Thrive Washington, and School's Out Washington – all on the state level but with substantial presence in communities across the state. The goals of coordination with CCA include connecting families to high-quality child care and early learning programs, supporting child care providers who deliver high-quality care, and providing supports for early learning professionals to enrich their expertise. Products of this partnership are described in Section 1.7 and 2.6. Goals of the partnership with Thrive are to leverage public and private dollars to partner on home visiting, public awareness, building local community engagement in early learning and other projects. An example product of this partnership is the development of Early Learning Guidelines described in Section 2.4.5. Goals of the partnership with Schools Out Washington are described in Section 1.4.1. With support from DCYF, School's Out Washington hosts an annual two-day conference, The Bridge from School to Afterschool and Back, in October. This conference is focused on helping schools and afterschool programs work together to support children and youth. Each year, nationally recognized speakers, researchers, and advocates present materials on best practices, cutting-edge information, and useful tools. Participants come from around the country to

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learn from presenters and to network with others in the field.

Effective Date: 10/01/2018

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

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(98.52(b)).

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

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

1.7.1 Does the Lead Agency fund a system of local or regional CCR&R organizations? Effective Date: 07/01/2019

- No. The state/territory does not fund a CCR&R organization(s) and has no plans to establish one.
- Yes. The state/territory funds a CCR&R system. If yes, describe the following: a) What services are provided through the CCR&R organization?

DCYF supports a system of regional child care resource and referral (CCR&R) organizations. The services provided include the following: 1) Information about child care options including licensed child care centers and family child care homes, nontraditional hours, and emergency care where families are located; 2) Information about child care as provided by statewide family "call center" staff who are able to provide one-on-one assistance; 3) Assistance provided in the family's home language when needed; 4) Information provided about the importance of high quality early learning programs, and the quality rating of various facilities; and 5) Information and referral for other services such as IDEA for children with disabilities. DCYF collects data about the supply of, and demand for, child care services in local areas or regions to develop strategies to increase the supply and quality of child care services.

Other services provided to child care providers statewide through the CCR&R system include the following: Training, pre-probationary consultation, coaching for Early Achievers participants, culturally relevant (family, friend and neighbor) training and events, and service delivery and scholarships for child care professionals.

The regional child Care resource and referral organization also offers support to

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Family, Friend and Neighbor (FFN) caregivers through the offerings of facilitated play groups that focus on increasing caregiver skills in supporting the children in their care to grow, thrive and be ready to enter kindergarten ready. These facilitated play groups also offer a supportive, social environment for children to experience a group setting with other non-related children their same age in advance of entering the K-12 system. These groups are a low cost and important support for children and families who do not utilize the formal early learning system.

b) How are CCR&R services organized, include how many agencies, if there is a statewide network and if the system is coordinated?

CCA is the coordinating network office for six resource and referral regions throughout the state. DCYF contracts directly with CCA, and permits CCA to subcontract with each regional office.

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)(I)(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:

In consultation with OCC, a workgroup consisting of representatives from DCYF, DSHS,

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State Systems Specialists Network, and the CCA Network met monthly for approximately 27 months to develop the plan. These individuals provided subject matter expertise on child care licensing, child care subsidy, and statewide collaboration between stakeholders and community partners regarding emergency preparedness within the state. They also provided information on the roles of each of these agencies in order to achieve the objective of providing child care in an area that might be affected by a natural disaster and maintaining family eligibility for child care subsidy. The overarching theme of these meetings was effective communication between all entities to ensure children in care would be able to continue to attend safe child care facilities and that there would not be an interruption in child care subsidy services if there was a natural disaster.

During initial drafting, DCYF kept the state's SAC, the Early Learning Advisory Council (ELAC), informed on the workgroup's plan progress. DCYF's Health Specialist, who frequently conferred with the state Department of Health on matters of mutual interest, then reviewed the plan drafted by the workgroup. In October 2018, Department of Health reviewed a revised version of the plan and provided comment.

Members of the group then reconvened in Spring 2018 and updated the plan to reflect the transition to a new agency (functions of the newly formed DCYF having formerly existed within the Department of Early learning). The workgroup also updated the plan to include license exempt in-home/relative care in the response process, and to reflect personnel and other agency changes.

Effective Date: 10/01/2018

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:

Under the Plan, after a natural disaster occurs, child care licensing staff will contact all licensed child care facilities in the affected area to determine what facilities can continue to operate based on damage sustained (if any) using the Initial Assessment of Child Care

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Providers Following a Disaster form. Based on the assessments of the child care centers and homes in the area, DCYF will determine if there is a need to grant exceptions, or change existing exceptions, to Washington Administrative Code (WAC) in order to maintain sustainable services and/or child care capacity, and will expedite new license applications as needed. For licensed facilities that continue to operate, a licensor will conduct a health and safety visit to ensure the facility meets health and safety requirements. DCYF will share information with partner agencies, such as CCA of WA, DSHS, American Red Cross, the State Fire Marshal, local and state health departments, and local building and fire inspectors, and ask for assistance from these partners as needed. Child care subsidy payments will continue to be timely and uninterrupted for services if the systems/information technology needed is functional. An emergency backup system can be functional within 72 hours if needed. If an authorization for a family living in the disaster area is expiring and their provider is operational, the family's certification may be extended for two months. If the provider is an in-home/relative provider (called in Washington a Family, Friends, and Neighbors (FFN) provider), the parent must contact DCYF to initiate a two-month extension. If a provider is non-operational, the authorization can be changed to another provider at the request of the family without a new eligibility reauthorization determination.

Effective Date: 07/01/2019

1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services:

In the event of a disaster, DCYF will work with licensed child care centers, school age programs, family child care homes, and FFN providers to ensure child care environments are healthy and safe for children. DCYF will work with families to ensure authorizations are current and accurate so child care authorizations can continue for those eligible.

Further, DCYF's Child Care Statewide Licensing Administrator and License Exempt
Administrator will work with DCYF CCSP units regarding issues of common concern, sharing
information on continuity of eligibility determinations and adjustments to subsidy
authorizations. DCYF Child Welfare staff will assist DCYF licensors with initial assessment of
provider status following a disaster and in determining if more child care capacity is needed

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in the disaster area. Licensing will share information relevant to assessments with Child Welfare. The State Fire Marshal, state and local public health departments, and local building and fire inspectors will assist with inspection of new and existing child care sites, and agencies will share information necessary to the collaboration.

Effective Date: 07/01/2019

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:

DCYF licensing standards require licensed child care facilities to have a disaster plan that addresses these procedures. See WAC 110-300-0470. Non-relative license exempt FFN providers are also required to receive disaster preparedness and response training and to meet disaster preparedness related health and safety standards. See WAC 110-16-0025(1) and WAC 110-16-0035(5) which require a disaster preparedness plan that provides for, among other things, transportation of children who cannot walk and transportation of needed medications.

Effective Date: 08/01/2019

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):

WAC 110-300-0470 includes requirements for staff emergency preparedness training and practice drills. Additionally, all licensed providers are required to attend DCYF's licensing orientation. The orientation addresses emergency preparedness and requirements for disaster plans. Non-relative license exempt FFN providers are also required by WAC 110-16-

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0025(1) to receive emergency preparedness training within 90 days of beginning service, and practice drills are required for these providerss under WAC 110-16-0035(5).

Effective Date: 08/01/2019

1.8.6 Provide the link to the website where the statewide child care disaster plan is available:

https://dcyf.wa.gov/sites/default/files/pdf/ellicense/Final Draft Child Care in Emergencies Plan.pdf

Effective Date: 10/01/2018

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.

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

Effective Date: 07/01/2019

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

Describe:

CCA's website is available in English and Spanish, with an option at the top of every

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page to see content displayed in either language. CCA, and DCYF also utilize translation agencies as needed when working with families and providers, and some staff are bilingual and able to better assist individuals for whom English is not their first language. DCYF policy and procedure requires staff serving clients to identify limited English proficient (LEP) clients as early as possible during initial contact, identify primary language spoken, inform clients of their right to language services at no cost, and to then arrange effective language services. DCYF requires staff, when communicating in writing with LEP clients, to determine the most effective method for communicating, which, depending on circumstances may require full translation of written communications, a translated summary of written communications, a letter telling the client how to contact DCYF for assistance in understanding the communication, or an oral interpretation of the communication. These provisions are in effect during DCYF operating hours. In implementing these policies, DCYF takes into account linguistic needs of clients served to promote equitable access to services.

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

Effective Date: 07/01/2019

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

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- Availability and/or access to specialized services (e.g. mental health, behavioral specialists, therapists) to address the needs of all children
- Other.

Describe:

DCYF provides information to families about services for children via our website: https://www.dcyf.wa.gov/services/child-development-supports/esit#nolink. We also partner with a number of community organizations, listed on that webpage, to ensure eligible families and families who have concerns about their child's development have access to the resources they need.

DCYF contracts with the Washington State Department of Health to place materials in their Child Profile Health Promotion System. These materials, titled Watch and Help Me Grow, are sent to parents at three developmental periods in the child's growth: 3 months old, 6 months, and 12 months. These brochures raise parental awareness about early childhood development and signals of potential developmental delays, provide resource for parents to receive a free developmental screening, if needed, and connect parents to get a free developmental screening, if needed. They are printed in English and Spanish.

DCYF delegates responsibility for Child Find and some outreach services at the local level to our Local Lead Agencies. DCYF also provides materials to these LLAs for engaging and educating families. DCYF also partners with WithinReach, and non-profit state-wide organization that helps families navigate the health and social services systems through a hotline, website, and materials distribution. Families can connect with WithinReach to find services for children with disabilities.

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

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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 Webbased process:

As described on DCYF's webpage here, parents can submit complaints about child care providers suspected of child abuse and/or neglect, illegal unlicensed care, or any other complaint, by calling 1-866-End Harm (1-866-363-4276). This number is also provided by licensing staff and child protective services staff when requested. The DCYF website (https://www.dcyf.wa.gov/find-an-office) also provides contact information for all licensing offices in the state, including DCYF's state office. All complaints called into the agency's state office are forwarded to regional licensing staff to help the individual by either resolving the issue or providing information on how to call the complaint in to the Intake line.

Effective Date: 10/01/2018

2.2.2 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring:

When a call is made to the DCYF Intake phone number to report a complaint, the Intake Supervisor determines if the complaint rises to the level of child abuse and/or neglect and either screens the complaint for a Child Protective Services (CPS) investigation or out to child care licensing. If the Intake Supervisor screens the complaint for a CPS investigation, CPS takes the lead in responding to the complaint and licensing staff work with those involved in the investigation and inspect the complaint for any licensing violations. If the complaint screens out as Non-CPS, licensing staff conduct an unannounced complaint visit and contact the referrer and all collateral individuals involved. For Non-CPS complaints, if the licensor finds the issue valid after conducting a licensing inspection of the allegation(s), it is considered substantiated. For child abuse and neglect complaints, if the CPS investigator determines the allegations to be founded, it is considered substantiated.

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For complaints that do not involve CPS investigation, DCYF's timeline for screening, substantiating, and responding to complaints is 45 days from date of submission. For complaints that involve CPS investigation, CPS' timeline for finalization is 90 days.

Effective Date: 10/01/2018

2.2.3 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring:

When a call is made to the DCYF Intake phone number to report a complaint, the Intake Supervisor determines if the complaint rises to the level of child abuse and/or neglect and either screens the complaint for a Child Protective Services (CPS) investigation or out to child care licensing. If the Intake Supervisor screens the complaint for a CPS investigation, CPS takes the lead in responding to the complaint and licensing staff work with those involved in the investigation and inspect the complaint for any licensing violations. If the complaint screens out as Non-CPS, licensing staff conduct an unannounced complaint visit and contact the referrant and all collateral individuals involved. For Non-CPS complaints, if the licensor finds the issue valid after conducting a licensing inspection of the allegation(s), it is considered substantiated. For child abuse and neglect complaints, if the CPS investigator determines the allegations to be founded, it is considered substantiated.

For complaints that do not involve CPS investigation, DCYF's timeline for screening, substantiating, and responding to complaints is 45 days from date of submission. For complaints that involve CPS investigation, CPS' timeline for finalization is 90 days.

Effective Date: 10/01/2018

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2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints:

DCYF documents and maintains all parental complaints in its agency case management system, WA Compass. If approved by the licensing supervisor for the licensing office investigating the complaint, DCYF WA Compass admin staff open the record to document a substantiated complaint in the system. At this point the record in WA Compass is locked and the complaint is published to Child Care Check. WA Compass Admin staff can also reopen the record in WA Compass to document corrections or update information, but only at the approval of the licensing supervisor.

Effective Date: 07/01/2019

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:

DCYF makes information about compalints available to the public throughits website which includes a page describing Child Care Check, where information is provided regarding child care providers and any complaints or health and safety issues:

https://www.dcyf.wa.gov/services/earlylearning-childcare/child-care-check. Child Care Check provides information on substantiated licensing complaints for each provider along with Facility Licensing Compliance Agreements that indicate the rules the provider is working to comply with and plans of correction, as well as information on the following:

- Licensed Child Care, ECEAP and Head Start programs
- How long the provider has been licensed
- How many children and the age ranges of the children the provider may care for
- Current licensing status (i.e., non-expiring license, initial license, probationary license)
- The name and contact information for the licensor
- Background check status for the past three years
- Routine licensing inspections and resulting compliance agreements as of July 1, 2011
- Closed providers, whether suspended, revoked, etc.
- Certified child care providers, which are providers who are exempt from being licensed

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but wish to show they meet state licensing requirements

- Number of slots for ECEAP and Head Start programs
- Whether the provider participates in Early Achievers, Washington's quality rating and improvement system.
- The provider's Early Achievers rating and what that rating means
- When available, a personalized statement, provided by an Early Achievers provider, highlighting unique qualities of their program

The page also provides an email and phone number for additional questions, e.g., regarding the specifics of a particular provider complaint: check@del.wa.gov and 1-866-482-4325 option 3.

Effective Date: 10/01/2018

2.2.6 Provide the citation to the Lead Agency's policy and process related to parental complaints:

Policy: https://www.dcyf.wa.gov/sites/default/files/pdf/el-

license/ComplaintInspectionPolicy.pdf

Procedure: https://www.dcyf.wa.gov/sites/default/files/pdf/el-

license/ComplaintInspectionProcedure.pdf

Effective Date: 10/01/2018

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

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access to a yearly statewide report on deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To assist families with any additional questions, the website should provide contact information for local child care resource and referral organizations and any other agencies that can assist families in better understanding the information on the website.

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

2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible:

DCYF is a newly formed agency with a new website launched July 1, 2018. As we continue reviewing, developing, and amending the content for this new website, we are actively using the principles of the World Wide Web Consortium's recommendations around readability, keeping language at a secondary reading level, minimizing where feasible the use of technical terms and acronyms. Further, we adhere to the Associated Press Styleguide, which helps ensure consistency and readability across mediums.

DCYF uses the Drupal content management system to create and manage the website. Drupal provides accessibility features to make it easy for content managers and Web developers to adhere to accessibility guidelines. Drupal has made a committment to ensuring that all features of Drupal core conform with the World Wide Web Consortium (W3C) guidelines: WCAG 2.0 and ATAG 2.0. In addition, the site was developed using responsive design so the content can be viewed in an optimal way regardless of the screen size it's being viewed on.

Further, DCYF makes the site consumer-friendly by working with our content experts and the site end-users to understand the information clients, service providers, and other users access on our site in order to design the structure to best meet their needs. DCYF will conduct usability studies throughout the development of the site to identify issues. Google analytics will also help identify most popular search terms people are entering to ensure the language we're using is correct, track our highest hit pages, and provide insight to help us

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better understand our users so we can adjust our design accordingly.

In addition, with the development of our new online child care resources, our partner CCA is using the same web base for more seamless integration with DCYF's Child Care Check system.

Effective Date: 10/01/2018

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)):

DCYF's site displays prominently at the top left of every page a link to Google Translate. Clicking the link displays over 100 languages the user can select to translate site text into. Further, forms that our customers need to fill out are available on the website in languages identified by census and other data collection as prominent in communities we serve, and customerscan request translation of any document into any language. However, an English speaking person may need to help non-English speaking consumers navigate the website to find the forms. Key pieces of written outreach materials are currently translated into languages most commonly spoken by the intended audiences, as are training materials for service providers. We provide telephone interpretation services for consumers, and this resource is prominently displayed on the DCYF website.

Effective Date: 07/01/2019

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

DCYF is committed to providing information and services that are accessible to people with disabilities. We provide reasonable accommodations, and strive to make all of our programs accessible to all persons, regardless of ability, in accordance with all relevant state and federal laws. The DCYF website is fully compliant with Washington State's Office of the Chief

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Information Officer's policy on accessiblity, which states "[t]his policy establishes the expectation for state agencies that people with disabilities have access to and use of information and data and be provided access to the same services and content that is available to persons without disabilities unless providing direct access is not possible due to technical or legal limitations."

https://docs.google.com/viewerng/viewer?url=https://ocio.wa.gov/sites/default/files/public/policies/188_Accessibility_Interim_TSB_Approved_20170912.pdf.

Further, the new DCYF website is built in Drupal, which provides accessibility features that make it easy for content managers and Web developers to adhere to accessibility guidelines. Some of these features include search engine form and presentation, drag and drop functionality, and the way webpages present color contrast and intensity. Read more about their policies and features here: https://www.drupal.org/about/features/accessibility.

During design and construction of the website, we used state-owned computer testing labs to verify the site's compatibility with the most common screen reader tool for people with visual impairments. For ongoing maintenance, DCYF uses a web-based tool that routinely scans our website for errors, including website accessibility issues.

Other features that we use to ensure optimal use of the site for persons with disabilities include:

- Closed captioning videos
- Text alternatives for non-text content
- Using labels and not just color to communicate
- Including TTY phone numbers where available
- Alternative ways of contacting a person (voice, email)
- Navigating forms and website with keyboard equivalents
- Drupal supports the proper use of semantic markup for people who rely on a screen reader or other assistive technologies.

Effective Date: 07/01/2019

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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.

Effective Date: 07/01/2019

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:

DCYF's website includes a page withinformation on how to become a licensed child care provider: https://www.dcyf.wa.gov/services/early-learning-providers/licensed-provider. Revised Code of Washington (RCW) 43.216.010 dictates who is exempt from licensing requirements. A form of care is exempt if it does not meet the definition of "agency" provided in the RCW. The rationale for these exemptions vary, but they generally are intended to support access to relative care, care that is not ongoing, parent participation in mutually cooperative exchange of care, nursery schools operating less than four hours per day, seasonal camps of short duration, etc.

b) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2:

Licensing policies and procedures can be found on the DCYF website at https://www.dcyf.wa.gov/practice/policy-laws-rules. The Monitoring Visit policy and procedure is located under 10.1 General Licensing.

Rules governing non-relative FFN monitoring procedure are contained in Chapter 110-16 WAC: http://lawfilesext.leg.wa.gov/law/wsr/2018/20/18-20-093.htm.

c) Provide the link to the policies and procedures related to criminal background checks for staff members of child care providers and the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in sections 5.4.1 and 5.4.11:

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The policy and procedure for background checkscan be found on the agency website at https://www.dcyf.wa.gov/practice/policy-laws-rules. The Background Checks section is 10.5. Additionally, DCYF follows RCW 43.216 and Washington Administrative Code (WAC) 170-06 regarding Background Check Rules:

http://apps.leg.wa.gov/WAC/default.aspx?cite=110-06. WAC 170-06-0120 lists offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds.

2.3.5 List of providers

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

Effective Date: 10/01/2018

a) Provide the website link to the searchable list of child care providers:

CCA maintains a website with a page where families can search for providers by type, zip code, and other criteria: http://www.childcarenet.org/families/family-resources-1/your- child-care-search. DCYF's Child Care Check system provides a searchable list of child care providers with health and safety inspection reports:

https://www.dcyf.wa.gov/services/earlylearning-childcare/child-care-check. In addition, DCYF maintains a page that links to both resources:

https://www.dcyf.wa.gov/services/earlylearning-childcare/find-child-care

b) In addition to the licensed providers that are required to be included in your searchable list, which additional providers are included in the Lead Agency's searchable list of child care providers (please check all that apply):

✓ License-exempt center-based CCDF providers

License-exempt family child care (FCC) CCDF providers

✓ License-exempt non-CCDF providers

Relative CCDF child care providers

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Other.	
Describe	

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

Licensed Providers

- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

CCA's child care search includes a link to DCYF's Child Care Check (CCC) search. CCC search results display information including operating status (open or closed), years in operation; number of valid complaints received in the past five years; whether the program is licensed, certified, or certified for payment only; whether the program is ECEAP or Head Start; whether the provider is participating in the quality rating improvement system (Early Achievers); and the history of the facility. The history includes the Early Achievers Rating, Complaints, Background Checks, Inspections, and the License History. In addition, providers are able to write and update a brief description of their program in Child Care Check. CCA search results indicate providers in the family's area based on hours care is available, type of care they seek, subsidy programs the provider participates in, and days and hours care is needed (including nonstandard hours). Search results indicate the provider's Early Achievers rating, and program model.

License-Exempt, non-CCDF Providers

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Years in Operation
Provider Education and Training
Languages Spoken
Quality Information
Monitoring Reports
Other.
Describe:
License-Exempt CCDF Center Based Providers
☑ Contact Information
Enrollment Capacity
Years in Operation
Provider Education and Training
✓ Languages Spoken
Quality Information
Monitoring Reports
Other.
Describe:
License-Exempt CCDF Family Child Care
✓ Contact Information
☑ Enrollment Capacity
☐ Years in Operation
Provider Education and Training
✓ Languages Spoken
Quality Information
☐ Monitoring Reports
Other.
Describe:

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Relative CCDF Providers
Contact Information
☐ Enrollment Capacity
☐ Years in Operation
Provider Education and Training
☐ Languages Spoken
Quality Information
Cther.
Describe:
Other
Other.
Describe:
☐ Contact Information
☐ Enrollment Capacity
Years in Operation
Provider Education and Training
☐ Languages Spoken
☐ Quality Information
☐ Monitoring Reports
Cther.
Describe:

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

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Effective Date: 07/01/2019

a) How does the Lead Agency determine quality ratings or other quality information to include on the website?
✓ Quality rating and improvement system
National accreditation
☐ Enhanced licensing system
✓ Meeting Head Start/Early Head Start requirements
✓ Meeting prekindergarten quality requirements
School-age standards, where applicable
Other.
Describe
b) For what types of providers are quality ratings or other indicators of quality available?
✓ Licensed CCDF providers.
Describe the quality information:
Child Care Check and Child Care Aware indicate the provider's Early Achievers rating
(2-5) or that the provider is not yet rated.
(2-3) of that the provider is not yet rated.
✓ Licensed non-CCDF providers.
Describe the quality information:
Child Care Check and Child Care Aware indicate the provider's Early Achievers rating
(2-5) or that the provider is not yet rated. Early Achievers participation is voluntary for
licensed providers not receiving subsidy.
licensed providers not receiving subsidy.
✓ License-exempt center-based CCDF providers.
Describe the quality information:
Child Care Aware indicates the provider's Early Achievers rating (2-5) or that the
provider is not yet rated.
Editional comment FOC CODE annuities
✓ License-exempt FCC CCDF providers.

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Describe the quality information:

Child CareAware indicates the provider's Early Achievers rating (2-5) or that the provider is not yet rated. Early Achievers participation is unavailable for license-exempt in-home/relative care.

✓ License-exempt non-CCDF providers.

Describe the quality information:

Child Care Aware indicates the provider's Early Achievers rating (2-5) or that the provider is not yet rated. Early Achievers participation is voluntary for license-exempt providers not receiving subsidy and unavailable for license-exempt in-home/relative care.

Relative child care providers Describe the quality information:
Other.
Describe

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

Certify by responding to the questions below:

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a) What is the Lead Agency's definition of plain language and describe the process for receiving feedback from parents and the public about readability of reports.

As DCYF continues reviewing, developing, and amending the content for its website, DCYF defines "plain language" to mean actively using the principles of the World Wide Web Consortium's recommendations around readability, keeping language at a secondary reading level, and minimizing where feasible the use of technical terms and acronyms. Furthermore, DCYF adheres to the Associated Press Styleguide, which helps ensure consistency and readability across mediums. On each page of the website we provide a link to email communications@dcyf.wa.gov so users can provide feedback on the readability of reports or any other documents or text available on the website.

b) Are monitoring and inspection reports in plain language?
✓ If yes,
include a website link to a sample monitoring report.
DCYF's full child care center licensing checklist form is available here:
https://dcyf.wa.gov/sites/default/files/pdf/el-license/10.9.4.5CtrChecklist.pdf
Other checklists can be found here: https://dcyf.wa.gov/services/early-learning-
providers/licensed-provider/forms-documents
T If no
If no,
describe how plain language summaries are used to meet the regulatory requirements
and include a link to a sample summary.
NA
c) Check to certify what the monitoring and inspection reports and/or their plain language summaries include:
✓ Date of inspection
Health and safety violations, including those violations that resulted in fatalities or serious injuries.

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Describe how these health and safety violations are prominently displayed.

Health and safety violations, including those that resulted in fatalities or serious

injuries, are prominently documented and displayedin facility inspection reports in

Child Care Check.

Corrective action plans taken by the State and/or child care provider.

Describe

The FLCA describes the plan of action and timelines agreed to by the provider and licensor to correct health and safety violations.

d) The process for correcting inaccuracies in reports.

Once a FLCA or inspection report is finalized and DCYF publishes it to its licensing system, WA Compass, the record is locked and published to Child Care Check. If an error is noticed the provider can bring it to the attention of their licensor and they can request WA Compass admin staff reopen the record for corrections to occur by the licensor. Any process that would initially need an approval, such as a complaint inspection or license information, would then be required to again receive supervisor approval.

- e) The process for providers to appeal the findings in reports, including the time requirements, timeframes for filing the appeal, for the investigation, and for removal of any violations from the website determined on appeal to be unfounded.

 Providers have 10 days from the date the compliance agreement was signed to request an internal Supervisory Review. The licensing supervisor then has 15 days to uphold, overturn, or modify the enforcement decision. The document is not posted to Child Care Check until after the time to appeal a decision has passed.
- f) How reports are posted in a timely manner. Specifically, provide the Lead Agency's definition of 'timely' and describe how it ensures that reports are posted within its timeframe. Note: While Lead Agencies define 'timely,' we recommend Lead Agencies update results as soon as possible and no later than 90 days after an inspection or corrective action is taken

DCYF defines timely as no later than 90 days after inspection or corrective action. However, DCYF posts reports (monitoring visit checklists) immediately upon completion and posts compliance agreements, if required due to monitoring findings, immediately after all components are documented and the provider's 10 day period to appeal compliance findings has passed.

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g) Describe the process for maintaining monitoring reports on the website. Specifically, provide the minimum number of years reports are posted and the policy for removing reports (98.33(a)(4)(iv)).

DCYF automatically removes reports from the Child Care Check page after 6 years.

h) Any additional providers on which the Lead Agency chooses to include reports. Note
Licensed providers and CCDF providers must have monitoring and inspection reports
posted on their consumer education website.
☐ License-exempt non-CCDF providers
Relative child care providers
☐ Other.
Describe

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

Certify by providing:

Effective Date: 10/01/2018

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.

DCYF is the designated entity to which providers report serious injuries or deaths. Per licensing regulations, providers are required to report any instances of serious injury or death by submitting an injury/incident report to licensing.

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b) The definition of "substantiated child abuse" used by the Lead Agency for this requirement.

"Abuse or neglect" means sexual abuse, sexual exploitation, or injury of a child by any person under circumstances which cause harm to the child's health, welfare, or safety, excluding conduct permitted under RCW 9A.16.100; or the negligent treatment or maltreatment of a child by a person responsible for or providing care to the child. A reported incident is considered "substantiated child abuse" if Child Protective Services issues a founded finding.

c) The definition of "serious injury" used by the Lead Agency for this requirement.

DCYF defines "serious injury" as any of the following: -Injury resulting in overnight hospital stay

- -Severe neck or head injury
- -Choking/unexpected breathing problems
- -Severe bleeding
- -Shock or acute confused state
- -Unconsciousness
- -Chemicals in eyes, on skin, or ingested in the mouth
- -Near-drowning
- -Broken bone
- -Severe burn requiring professional medical care
- -Poisoning
- -Medication overdose
- d) The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted.

 https://dcyf.wa.gov/practice/oiaa/reports/child-fatality

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:

DCYF's website provides information on the local CCR&R agency, CCA, in multiple locations

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in order to be easily accessible to families. A button on the homepage of the website directsconsumers to Child Care Check, Washington State's licensed child care status and record data base. On the Child Care Check webpage, we explicitly direct consumers to CCA for referrals on programs to meet individual family needs: https://www.findchildcarewa.org. Other examples of locations from which we link to the CCA website are:

https://www.dcyf.wa.gov/services/earlylearning-childcare/school-age-care
https://www.dcyf.wa.gov/services/getting-help
https://www.dcyf.wa.gov/services/early-learning-providers/licensed-provider/licensing-process

In addition, DCYF's site equally emphasizes accessibility of information about CCA.

Effective Date: 07/01/2019

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:

DCYF's site contains contact links and phone numbers in the footer section on every page. It also has a single page with direct contact information by program area and topic where this method is appropriate, and specialty contact information on program pages, where appropriate. Here are examples of pages that contain specialty contact information (as well as the general contact information in the footer): DCYF, Early Support for Infants and Toddlers: https://www.dcyf.wa.gov/services/child-development-supports/esit; DCYF, Foster Parenting: https://www.dcyf.wa.gov/services/foster-parenting.

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2.3.11 Provide the website link to the Lead Agency's consumer education website. Note: An amendment is required if this website changes.

https://www.dcyf.wa.gov/services/earlylearning-childcare/find-child-care

Effective Date: 10/01/2018

2.3.12 Other. Identify and describe the components that are still pending per the instructions on

CCDF Plan Response Options for Areas where Implementation is Still in Progress in the Introduction.

NA

Effective Date: 10/01/2019

2.4 Additional Consumer and Provider Education

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

In questions 2.4.1 through 2.4.5, certify by describing:

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

DCYF makes information available to parents and the general public about the availability of child care services provided through CCDF and other programs on various pages of its website, such as the following:

Child Care Subsidy Programs:

https://www.dcyf.wa.gov/services/early-learning-providers/subsidy

State Pre-K:

https://www.dcyf.wa.gov/services/early-learning-providers/eceap

Finding Child Care:

https://www.dcyf.wa.gov/services/earlylearning-childcare/find-child-care

Provider Quality Rating and Improvement System:

https://www.dcyf.wa.gov/services/early-learning-providers/early-achievers

The information provided at these links is tailored for parents and the general public through the use of plain language and through website organization that directs readers to information specifically for them. For example, parent information on available child care services is located under "For Parents" under the "Services" tab on the DCYF home page. Many documents available at these links are translated to ensure accessibility.

Information for providers on availability of child care services is also available on the DCYF site, including the following examples:

Becoming a Licensed Provider:

https://translate.google.com/translate?hl=en&sl=en&tl=es&u=https%3A%2F%2Fwww.dcyf.wa.gov%2F&anno=2

Licensing Standards Alignment:

https://www.dcyf.wa.gov/services/early-learning-providers/standards-alignment

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Electronic Attendance Systems

https://www.dcyf.wa.gov/services/early-learning-providers/electronic-attendance-system

Again, information is tailored to the provider audience through use of plain language, website organization (the above links are found under the "Services" tab of the DCYF home page, under "For Providers"), and through translation of critical documents.

Effective Date: 07/01/2019

2.4.2 The partnerships formed to make information about the availability of child care services available to families.

Child Care Aware of Washington:

DCYF refers to and partners with CCA, who publishes brochures for dissemination at community-based sites like libraries and community centers. CCA's referral service helps parents navigate their options for child care, and provides dual-language and translation services to support non-English speaking families. See http://wa.childcareaware.org/families/child-care-aware-of-washington-family-center. CCA, in

turn, refers parents to DCYF's Child Care Check webpage as the final step in providing information to assist them in selecting a provider.

Department of Health:

DCYFalso provides brochure inserts in the Child Profile packets, in partnership with Department of Health, providing parents with periodic resources on finding licensed, quality care coinciding with health developmental milestones. Visit www.childprofile.org for more information and materials.

Community-Based Organizations:

Through social media DCYF partners with community-based organizations to spread awareness of our resources further. DCYF further assists families who need to find a child

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care providers by referring families to CCA. When families apply to DSHS for food assistance, TANF or other assistance, they are provided information about child care subsidy. DSHS' online consumer portal allows a family to enter in their family demographic and income data and then shows the family the services for which they are potentially eligible.

Department of Social and Health Services:

For the Seasonal Child Care (SCC) program, DCYF administers Mobile Community Service Offices (CSOs) that travel to areas where seasonal work is widespread so that families that engage in this work can more readily access subsidized child care.

Thrive Washington and the Early Learning Regional Coalitions:

DCYF works in partnership with Thrive Washington to support the state's 10 Early Learning Regional Coalitions (ELRCs), which represent families statewide. The coalitions play an important role in coordinating and connecting resources and programs in their communities, getting information out to families about the importance of early learning, promoting early literacy and creating local advocates who take action to generate support for early learning at local and state levels. The Coalitions are essential to the elevating local expertise and experiences to inform state policies and programs and are also key players with the implementation and ultimate success of key state initiatives. DCYF's goals for the partnership include the following:

- Strengthen the effectiveness and durability of ELRCs as regional planning and system building platforms by continuing to integrate the Infant/Toddler Regions and creating guiding documents and other mechanisms to ensure: clear decision-making and communication processes, broad agreement, and effective implementation.
- Increase engagement of diverse regional stakeholders by identifying the types of engagement opportunities to use to engage different types of stakeholders; assessing current outreach efforts to different cultural, income-level and geographically remote communities; cultivating advocates, funders and policymakers; and raising parent and public awareness about regional priorities, initiatives and services.
- Strengthen joint regional and state action to achieve common goals by creating simple regional action plans to implement prioritized strategies and strengthen joint local, regional and state action, and providing a voice for regional stakeholders, including families and

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parents.

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2.4.3 How the Lead Agency provides the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers. In the description include, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners who assist in providing this information.

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▼ Temporary Assistance for Needy Families program:

When a family applies for child care subsidies over the phone by calling the DCYF call center, if they do not already have a client ID, they are routed to a navigator. The navigator asks what services they are seeking and routes them to the appropriate queue(s), including Temporary Assistance for Needy Families (TANF). If the caller does have a client ID and the system shows they are approaching the date when they need to be reviewed for continued eligibility, they will be routed directly to the queue(s) for all benefits for which they are active, bypassing the navigator. In the child care queue, the primary focus is establishing child care eligibility. However, if the client asks about other services, they can be transferred to the navigator or another queue, or be referred to 211. For questions about child care options, including Head Start and ECEAP, staff refer to CCA. Call center workers and navigators have access to language link interpreter and translation services to assist clients for whom English is their second language.

When a family applies for child care subsidy benefits on-line through Washington Connections, the system displays a range of services for which they may be eligible, including TANF, based on their income, family composition, etc:

https://www.washingtonconnection.org/home/availablebenefits.go. The family can also search for services from this screen using Find Services:

https://www.washingtonconnection.org/home/home.go. Washington Connections is

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available in English and Spanish and information is presented in plain language to maximize accessibility.

Finally, DCYF maintains a <u>page</u> on its website that links families to services outside DCYF, including TANF.

Families connect with Head Start and Early Head Start programs and providers primarily through CCA -- either through its child care search on its website or by calling CCA's Family Center. CCA employs staff with language skills in prevalent consumer and provider languages, and CCA's child care search allows users to refine their search by program types, locations, hours care is needed, etc.

DCYF also maintains a webpage on its site at

www.dcyf.wa.gov/services/earlylearning-childcare/eceap-headstart with information for families about Head Start, including eligibility criteria, enrollment information, and contact information for staff who can assist with questions. The site is presented in plain language and staff available at the contact information have access the translation and interpreter services to maximize accessibility of information.

When a family applies for child care subsidies over the phone by calling the DCYF call center, staff refer them to CCA for questions about other child care options like Head Start and Early Head Start. Further, when a family applies for child care subsidy benefits on-line through Washington Connections, there is an option on the page for Children Services (right-most column, second from bottom). From there, a link to Head Start information can be found. DCYF workers have access to language link translation and interpreter services and Washington Connections is available in Spanish to improve accessibility.

✓ Low Income Home Energy Assistance Program (LIHEAP):

When a family applies for child care subsides over the phone and the client asks about LIHEAP, they are referred to <u>211</u>. 211's site includes a translator, and 211 callers have access to interpreter services. 211 assists callers and site users to connect with LIHEAP. Further, Washington's Department of Commerce maintains a <u>webpage</u>, with

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a translator, providing information on LIHEAP, including eligibility criteria and information on how to apply. Finally, when families use Washington Connection to access various benefits, there is a link to Commerce's LIHEAP webpage available under the "FInd Services" tab.

■ Supplemental Nutrition Assistance Programs (SNAP) Program:

DCYF maintains a <u>webpage</u> on its site with a link to SNAP program information. The site is presented in plain language to maximize accessaiblity. The link takes site users to DSHS' SNAP page, which includes information on eligibility and how to apply, including application forms in multiple languages. Further, families can apply for SNAP using Washington Connection at

https://www.washingtonconnection.org/home/availablebenefits.go. This site is presented in plain language and is available in Spanish to maximize accessibility.

Women, Infants, and Children Program (WIC) program:

DCYF maintains a page on its website that links families to services outside DCYF, including WIC. The page is presented in plain language to maximize accessibility. The link takes users to Department of Health's WIC page where information on eligibility and how to apply for benefits is available. This page is available in multiple languages and includes a link to WIC language services, and is presented in plain language to maximize accessibility.

When a family applies for child care subsides over the phone and the client asks about WIC, they are referred to <u>211</u>.211's site includes a translator, and 211 callers have access to interpreter services. 211 assists callers and site users to connect with the WIC program.

When a family applies for child care subsidy benefits on-line through Washington Connections, the family can also search for services from this screen using Find Services: https://www.washingtonconnection.org/home/home.go. A link to a page with information about WIC eligibility and application is available there. Washington Connections is available in Spanish to maximize accessibility.

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Child and Adult Care Food Program(CACFP):

DCYF maintains a page on its website linking providersto nutrition and physical activity resources, including CACFP. DCYF's site is presented in plain language to maximize accessability. The link takes users to OSPI's webpage devoted to CACFP where they can find information on CACFP-eligible programs, contact information for program staff, and other resources. OSPI's site includes a link to accessibility information on every page.

Medicaid and Children's Health Insurance Program (CHIP):

DCYF maintains asection on its site regarding Health for Youth with a page discussing Apple Health, Washington's Medicaid and CHIP program. DCYF also maintains a page on its website linking to Washington Connection, where families can find information on Apple Health and Apple Health for Kids here. DCYF's site is presented in plain language to maximize accessibility.

Further, When a family applies for child care subsides over the phone and the client asks about CHIP, they are referred to 211. 211's site includes a translator, and 211 callers have access to interpreter services. 211 assists callers and site users to connect with Washington Health Plan Finder and Apple Health resources.

When a family applies for child care subsidy benefits on-line through Washington Connections, the family can also search for services from this screen using Find Services: https://www.washingtonconnection.org/home/home.go. A link to a page with information about Apple eligibility and application is available there. Washington Connections is available in Spanish to maximize accessibility.

✓ Programs carried out under IDEA Part B, Section 619 and Part C:

DCYF is the lead agency for IDEA Part C,called in Washington Early Support for Infants and Toddlers, and maintains a <u>section</u> of its site devoted to that program, including information on services available and eligibility. DCYF's site is presented in plain language to maiximize accessibility.

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ESIT program providers are informed about, and required to have, transition plans for children who age out of Part C to Part B Section 619 contained in the family's Individualized Family Service Plan. Part C to B transition is described here.

When a family applies for child care subsidy benefits on-line through Washington Connections, the family can also search for services from this screen using Find Services: https://www.washingtonconnection.org/home/home.go. A link to a page with information about ESIT is available there. Washington Connections is available in Spanish to maximize accessibility.

2.4.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children's development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners in providing this information.

Parents and the General Public

DCYF's program Strengthening Families Washington is focused on parent engagement and helping families become stronger together through a variety of tactics, including home visiting and community outreach. Resources concerning the program are available on DCYF's site here. Strengthening Families includes partnering on several public awareness campaigns including Speak Up When You're Down, Have A Plan: Shaken Baby Syndrome, Child Abuse Prevention Month, and Safe Sleep. The Strengthening Families program also offers funding opportunities to community organizations whose work promotes the protective factors among families and communities.

DCYF provides parents and the general public information on research and best practices concerning child development, health, and safety here. DCYF provides information on nutrition and physical activity through its Healthiest Next Generation (HNG) initiative, with resources available here. This page provides information on

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breastfeeding, healthy eating, physical activity, and screen time reduction, an also links to the Governor's HNG website where more resources are available, and discusses DCYF's partnership with DOH and OSPI through the initiative.

Finally,DCYF partners with WithinReach, a non-profit state-wide organization that helps families navigate the health and social services systems through a hotline, website, and materials distribution. See here.

The information on DCYF's site for both initiatives is tailored for parents and the general public by using plain language and broad descriptions of resources, intitiatives, goals, and successes,

Providers

DCYF provides dozens of nutrition and physical activity resources to its providers through a page on its website <u>here</u>.

DCYF also provides parent engagement resources to providers through its Strengthening Families self assessments on its site here, tailored to specific provider types.

Effective Date: 07/01/2019

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

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Parents and the General Public

DCYF's Early Learning and Development Guidelines, available on its site here, take a whole child approach and include information about the importance of promoting the social and emotional health of children from birth through age eight. They are organized by age and area of development and offer common language for parents, the general public, and early learning professionals to build a bridge for two-way communication. Two particular areas of development that relate to social-emotional and behavioral issues are "About me and my Family and Culture" and "Building Relationships". At the end of each section, there is a place for parents and early learning professionals to reflect on developmental milestones as well as information about how to connect with resources related to Early Intervention Services.

Providers

DCYF requires child care providers that participate in Early Achievers to complete training in the Washington State Early Learning and Development Guidelines, as a foundational quality training. Child care providers may request this in-person training through the DCYF Career Portal and receive training credit for completion.

In January 2018, DCYF published a <u>list</u> of curricula that align with the Early Learning and Development Guidelines for Early Achievers participants. Participating child care providers must use an aligned curriculum to demonstrate this quality standard. The aligned curricula meet comprehensive requirements and include goals and activities across multiple domains including social/emotional development. This tool is tailored to providers through use of plain language and translation in Spanish and Somali.

In July 2018, Early Achievers revised the Family Engagement standard to include an updated version of the Strengthening Families self-assessment tool for providers, available on DCYF's site here. Different versions of the tool are available for different provider types, ensuring that it is tailred to their needs.

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Effective Date: 07/01/2019

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

DCYF licensing standards, as expressed in program administrative rules, include several policies that prevent the suspension and expulsion of children from birth to age 5 in child care. These standards are available to the public online at https://app.leg.wa.gov/wac/default.aspx?cite=110-300 and are also linked to on the DCYF web page regarding licensing: https://www.dcyf.wa.gov/practice/policy-laws-rules. DCYF's licensor orientation also covers practices to prevent expulsion and refers providers to the applicable standards.

Licensing standards require providers to develop and follow expulsion policies and practices and expel children only when exhibiting behavior that presents a serious safety concern and when the program is not able to reduce or eliminate the concern through reasonable modifications. If a child is expelled the provider must review the policy with the parent or guiardian, provide a record to the parent or guardian about the expulsion and steps taken to avoid it, and provide the parent or guardian information on resources to benefit the child. Finally, the provider must report the expulsion to DCYF. See WAC 110-300-0340.

Licensing standards further require providers to have written behavior management and guidance practices in place, and to guide child behavior based on an understanding of the individual child's needs and stage of development. Providers must promote the child's developmentally appropriate social behavior, self-control, and respect for the rights of others. Further, providers must ensure behavior management and guidance practices that are fair, reasonable, consistent, and related to the child's behavior, and prevent and prohibit any person on the premises from using cruel, unusual, hazardous, frightening, or humiliating discipline, including corporal punishment, verbal abuse, and injurious physical restraint. Use of physical restraint is only allowed in limited circumstances and staff must complete a report of incidents involving its use, placed in the child's file and provided to the child's parents. See WAC 110-300-0330, -0331, and -0335.

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Licensing standards also require providers to provide to parents their program policies regarding guidance and discipline. See WAC 110-300-0450.

Paired with these standards, the State offers professional development opportunities for child care providers, Head Start and Early Head Start teachers and State preK teachers. In addition, the Early Achievers Institutes, a series of professional development opportunities offered by the University of Washington, focus on positive behavior support, individualizing instruction, and fostering resiliency and wellness in young children. They enable peer learning and provide professionals with the opportunity to create and keep materials to promote social-emotional and behavioral development in their own programs. Participants are also offered technical assistance from regional infant/toddler consultants and include consultations by early childhood mental health experts. The University of Washington also provides key training to child care licensing staff, coaches, and technical assistance staff who support Early Achievers participants. These trainings include reliability training in classroom quality observation tools, curricula, and effective behavior guidance and management practices.

In addition, DCYF has implemented Filming Interactions to Nurture Development (FIND), an intervention to support social-emotional development. FIND uses video coaching and brief, filmed clips of teachers interacting with young children to help caregivers identify and reinforce actions that support healthy development of our youngest learners.

Effective Date: 08/01/2019

2.5 Procedures for Providing Information on Developmental Screenings

Lead Agencies are required to provide information on developmental screenings, including information on resources and services that the State can deploy, such as the use of the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C, in conducting those developmental

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screenings and in providing referrals to services for children who receive subsidies. Lead Agencies must also include a description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)).

2.5.1 Certify by describing:

Effective Date: 07/01/2019

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)). DCYF provides information on its website for an online resource through Help Me Grow Washington for all parents to access a free online developmental screening using the Ages and Stages Questionnaire. This is available to parents regardless of whether or not they have a child enrolled in child care.

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.). DCYF provides information on th Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)program, and well child exams, on its page here.

Screening is one component of ESIT's federal requirement to conduct comprehensive Child Find in order to identify all eligible children. WithinReach, a non-profit organization that connects families to resources, is ESIT's central directory of public and private early intervention services and resources, including developmental screening services. And when ESIT staff receive inquiries about children outside IDEA Part C age ranges, they refer these families to appropriate available screening, including screening under IDEA Part B, Section 619.

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Further, when families contact the DCYF call center to apply for child care subsidy, call center staff refer them to ParentHelp123. When families use Washington Connection to apply for child care subsidy or other benefits, they will find a link under the "Find Services" tabs to developmental screening information, including ParentHelp123's page on screening, which also links to the Ages & Stages tool. Furher, when a family is determined eligible for subsidy, they receive a consumer statement with a link to ParentHelp123. Once the family finds an eligible provider, DCYF sends the provider a letter that also contains this information.

ParentHelp 123 also refers families for appropriate screening under IDEA Part B, Section 619.

Finally, DCYF's Early Achievers program also promotes provider usage of developmental screening by including developmental screening in its quality standards and by providing provider coaching on use of developmental screening tools.

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.

DCYF provides families with the phone number for the Family Health Hotline, 1-800-322-2588, and refers them to the Parent Help 123 website at http://www.parenthelp123.org/child-development/help-me-grow-washington on the family's statement of benefits for CCSP.

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.

Help Me Grow Washington provides an online child development resource for parents. This includes information about developmental milestones and developmental screening. That link is provided here: http://www.parenthelp123.org/child-development/child-development-screening-public.

There are interactive links so that parents can complete a questionnaire that is the developmental screening tool, Ages and Stages-3 (ASQ-3) and the Ages and Stages: Social-Emotional(ASQ-SE). Staff at WithinReach Washington score the screening tool

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and then discuss the results with parents, referring the parents to resources in their community. Parents may also call a number to speak with a person and complete the questionnaire over the phone.

Child care providers may also use this as a referral resource for parents. Child care providers can inform parents about the services available through Within Reach and direct parents to the website or phone number so that a parent may begin the process of developmental screening. Parents have the ability to share the results of the ASQ with the child care provider so that they can be partners in supporting the child's growth and development.

e) How child care providers receive this information through training and professional development.

In 2018, DCYF developed a free introductory online training course on developmental screening for licensed and exempt child care providers. This training covers the important role that child care providers play in developmental monitoring, developmental screening and sharing information with and from parents related to individual child growth and development. Child care providers are also introduced to resources in their community to share with parents to access developmental screening such as through Early Intervention and Help Me Grow Washington. Child care providers participating in Early Achievers and infant-toddler consultation in ten regions have the opportunity to participate in a training and mentoring program delivered by certified coaches to support family engagement in obtaining developmental screening for all children ages birth to five in a facility. Child care providers receive 4 hours of state approved training hours for developmental screening training, as well as the materials to conduct ASQ-3 and ASQ-SE screenings for all children. Coaches continue to provide ongoing mentoring through the process of scoring the screening, sharing results with parents, and making referrals to ESIT as necessary.

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

DCYF includes information on developmental screening on its website here. Further, DCYF sends parents information on how to obtain a screening in its consumer statement of benefits. Finally, Early Achievers awards providers points towards higher quality level ratings through its operating guidelines.

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2.6 Consumer Statement for Parents Receiving CCDF Funds

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

2.6.1 Certify by describing:

a) How the Lead Agency provides parents receiving CCDF funds with a consumer statement.

DCYF provides parents receiving CCDF funds the consumer statement in writing by mail.

Effective Date: 07/01/2019

b) What is included in the statement, including when the consumer statement is provided to families.

DCYFprovides families the consumer statement when they are determined eligible for child care subsidy programs. The statement describes the program they are approved for (Working Connections or Seasonal Child Care), their certification period, the activity they are participating in at the time of application that is the basis of their approval, their monthly copayment amount, how their income was determined (for eligibility and copayment determination purposes), a list of their rights and responsibilities, and contact information if they have any questions, concerns, or need to submit further information. It also includes the following:

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- -A link to Child Care Check, https://del.wa.gov/check, Washington State's licensed child care status and record data base. Parents can view detailed information about a program's licensing history, including licensing status, dates of inspections, monitoring reports, and licensing violations, plus basic staffing information, program philosophy, and level in Early Achievers, Washington's QRIS. It also provides information on how to submit a provider complaint and directs parents to CCA for resource and referral.

 -A link to CCA, http://www.wa.childcareaware.org, Washington State's child care referral resource. Parents can search for providers in their area based on hours care is available, type of care they seek, subsidy programs the provider participates in, and days and hours care is needed (including nonstandard hours). Search results indicate the provider's Early Achievers rating, and program model.

 -A link to Parenthelp123, <a href="http://www.parenthelp123.org/child-development/help-me-grow-parenthelp123.org
- -A link to Parenthelp123, http://www.parenthelp123.org/child-development/help-me-grow-washington, providing information on child development screening.
- c) Provide a link to a sample consumer statement or a description if a link is not available.

https://www.dshs.wa.gov/sites/default/files/FSA/forms/pdf/07-106.pdf

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 pf policy promotes continuity for families receiving services through multiple benefit programs.

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

3.1 Eligible Children and Families

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

3.1.1 Eligibility criteria based on a child's age

a) The CCDF program serves children

from 0

(weeks/months/years)

through 12

years (under age 13). Note: Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).

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

No

Yes.

Effective Date: 10/01/2018

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and the upper age is through 18 years

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity:

DCYF's definition of children with special needs also defines physical and/or mental incapacity. Children with special needs means persons age thirteen to nineteen years and under court supervision; or less than age nineteen years, and (a) having a verified physical, mental, emotional, or behavioral condition that requires a higher level of care while in the care of a licensed or certified facility, a DCYF contracted seasonal day camp or an in-home/relative provider; and (b) having a condition and need for higher level of care verified by an individual who is not employed by the child care facility and is either a health, mental health, education or social service professional. WAC 110-15-0220.

c) Does the Lead Agency allow CCDF-funded child care for ch but below age 19 years who are under court supervision? (658	•
No.✓ Yes	
and the upper age is through 18 years	
(may not equal or exceed age 19)	

d) How does the Lead Agency define the following eligibility terms? "residing with":

"Residing with", for CCSP eligibility purposes, means an eligible consumer with parental control of one or more children and who lives in the state of Washington and is the child's biological or adopted parent, step-parent, legal guardian, adult sibling or step-sibling, nephew or niece, aunt or uncle, great-aunt or great-uncle, grandparent or great-grandparent.

"in loco parentis":

"In loco parentis" means the adult caring for an eligible child in the absence of the biological, adoptive, or step-parent who is not a relative, or is a court-ordered guardian or a custodian.

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3.1.2 Eligibility criteria based on reason for care

Effective Date: 07/01/2021

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":

"Working" means engaging in legal, income-generating activity taxable under the United States Tax Code or that would be taxable with or without a treaty between an Indian Nation and the United States. This includes unsubsidized employment, as verified by DCYF, and subsidized employment, such as:

- (a) Working in a federal or state paid work study program; or
- (b) VISTA volunteers, AmeriCorps, JobCorps, and Washington Service Corps (WSC) if the income is taxed.

"Job training":

"Job training" means an approved activity under either the WorkFirst Program WAC 388-310-0200 or Participating in SNAP E&T program under chapter 388-444 WAC.

"Education":

"Education" includes high school, high school equivalency programs, adult basic education, English as a second language classes, public and private technical, community college, or tribal college.

"Attending job training or education" (e.g. number of hours, travel time):

Non-TANF families may receive child care for job training or education if they work a minimum of 20 hours per week in unsubsidized work, or a minimum of 16 hours per week in state or federal Work Study; eligible activities include adult basic education, English language skills training, GED or high school completion (for those under age 22, work is not required), vocational education, and job skills training. Child care authorizations may include the time the consumer is participating in the activity, travel time, study time and sleep time. WAC 110-15-0040 and 110-15-0045.

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Non-TANF families may receive child care for job training or education as described in 3.1.2b. Parents participating in a registered apprenticeship program or an associates degree program can also qualify under this definition.

3.1.2 Eligibility criteria based on reason for care

b) Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training participation alone (without additional minimum work requirements)?

No.

If no, describe the additional work requirements:

Yes.

If yes, describe the policy or procedure:

Parents attending vocational education may be approved for full-time child careprovided without a work require if they are full time students enrolled at a community, tribal, or technical college.

High school students under age 22 years, or those working towards a high school equivalency certificate under age 22 years, are also not required to work. Consumers over age 22 years are required to work in addition to education and training, but can meet the requirement through work study. See WAC 110-15-0045.

Finally, there is no minimum work requirement for non-TANF consumers participating in the Basic Food Education & Training (BFET) or Resources to Initiate Successful Employment (RISE) programs.

Parents attending vocational education, adult basic education or English as a second language programs part time and working at least 20 hours per week or participating in work study at least 16 hours per week may be approved for child care provided.

3.1.2 Eligibility criteria based on reason for care

c) Does the Lead Agency consider seeking employment (engaging in a job search) an

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eligible activity at initial eligibility determination (at application) and at the 12-mont eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of months of job search) No. Yes. If yes, describe the policy or procedure. (including any differences in eligibility at eligibility determination vs. redetermination of eligibility):	of three
3.1.2 Eligibility criteria based on reason for care	
 d) Does the Lead Agency provide child care to children in protective services? No. ✓ Yes. If yes: Please provide the Lead Agency's definition of "protective services": DCYF's definition of protective services includes families who qualify for WC under WAC 110-15-0023 and children who are homeless because of a disast 	
The definition also includes familieseligible for WCCC under DCYF's special eligiblity rules for families experiencing homelessness at WAC 110-15-0023	
The definition further includes children who:	
(a) In the last six months have:(i) Received child protective services as defined and used by chapters 26.4474.13 RCW;	1 and

- (ii) Received child welfare services as defined and used by chapter 74.13 RCW; or
- (iii) Received services through a family assessment response as defined and used by chapter 26.44 RCW;
- (b) Have been referred for child care as part of the family's case management as defined by RCW 74.13.020; and
- (c) Are residing with a biological parent or guardian.

The definition lastly includes children in the parental control of a non-needy relative (NNR).NNR means the adult caring for an eligible child in the absence of the biological, adoptive, or step-parent and who is the child's adult sibling or step-

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sibling, nephew or niece, aunt or uncle, great-aunt or great-uncle, grandparent or great-grandparent. DCYF verifies an individual's NNR status using the following documentation:

- A court-order;
- A closed case with Children's Administration; or
- A written document or verbal statement from the child's biological, adoptive or step-parent.

In the case of an NNR, income eligibility may be determined solely based on the income received by the eligible child as indicated at WAC 110-15-0015(f), or the income may be combined with an existing child care assistance unit at the same address, when it is beneficial for the household.

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

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

Effective Date: 07/01/2019

a) How does the Lead Agency define "income" for the purposes of eligibility at the point of determination?

Income is defined in WAC 110-15-0060 and includes money earned or received from:

- A TANF grant (except for the first three calendar months after starting a new job);
- Child support payments;
- Supplemental Security Income (SSI);
- Other Social Security payments, such as SSA and SSDI;
- Refugee assistance payments;
- Payments from the Veterans' Administration, disability payments, or payments from labor and industries (L&I);
- Unemployment compensation;
- Other types of income;
- VISTA volunteers, AmeriCorps, and Washington Service Corps (WSC) if the income is taxed:
- Gross wages from employment or self-employment. Gross wages include any wages that are taxable;
- Lump sums as money a consumer receives from a one-time payment such as back child support, an inheritance, or gambling winnings; and
- Income for the sale of property.
- b) Provide the CCDF income eligibility limits in the table below at the time of initial determination. Complete columns (a) and (b) based on maximum eligibility at initial entry into CCDF. Complete columns (c) and (d) *only if* the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. Fill in the chart based on the most populous area of the state (the area serving the highest number of CCDF children). If the income eligibility limits are not statewide, please respond to c) below the table.

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	(a)	(b)	(c)	(d)
Family Size	100% of SMI(\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	3975	3380	2082	52
2	5198	4420	2818	54
3	6421	5460	3556	55
4	7647	6500	4292	56
5	8867	7540	5028	57

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)). NA

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://www.acf.hhs.gov/ocs/resource/state-median-income-estimates-for-optional-use-in-fy-2018-and-mandatory-use-in-fy-2019
- e) Identify the most populous area of the State used to complete the chart above. NA
- f) What was the date (mm/dd/yyyy) that these eligibility limits in column (c) became effective? 04/01/2018
- g) Provide the citation or link, if available, for the income eligibility limits. WAC 110-15-005: http://apps.leg.wa.gov/WAC/default.aspx?cite=110-15-0005
- 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)).

 Effective Date: 07/01/2019

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a) Describe how the family member certifies that family assets do not exceed \$1,000,000 (e.g., a checkoff on the CCDF application).

CCSP applicants certify that they do not have family assets that exceed \$1,000,000 at the time of CCSP application. Families are required by regulation to notify DCYF when assets exceed \$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, describe the policy or procedure and provide citation:

3.1.5 Describe any additional eligibility conditions or priority rules applied by the Lead Agency during eligibility determination or redetermination (98.20(b)).

In the event that the program exceeds capacity, a wait list goes into effect. Wait list priority groups are established by regulation and members of these groups, if otherwise eligible and to the extent that program resources allow, are not placed on thewait list. These priority groups include families with children with special needs; teen parents; families receiving TANF; TANF families curing a sanction; and families that received WCCC/SCC within thirty days of application.

Emergency Temporary Change: Effective starting the effective date of Proclamation 20-05 on February 29, 2020 and continuing through May 2020, DCYF extended families' authorizations for 12 months, at their prior authorization levels, when the family reapplied in March, April, May, or June and met all other eligibility criteria but activity hours decreased during COVID-19.

Effective Date: 02/29/2020

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

Effective Date: 09/01/2020

Coordinating with Head Start, prekindergarten, or other early learning programs to create a package of arrangements that accommodates parents' work schedules
Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)
Establishing minimum eligibility periods greater than 12 months
✓ Using cross-enrollment or referrals to other public benefits
Working with IDEA Part B, Section 619 and Part C staff to explore how services included in a child's IEP or IFSP can be supported and/or provided onsite and in collaboration with child care services
Providing more intensive case management for families with children with multiple risk factors;
Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities
✓ Other.

Describe:

DCYF partners with OSPI, DOH, DSHS, and Thrive Washington to coordinate early learning activities between the five entities. This partnership meets monthly to discuss current projects within early learning and transition services for children. The goal of this partnership is to move toward a seamless system of services for children birth to age eight, and improve supports to child care providers.

DCYF also coordinates services with Head Start, ECEAP (state pre-K) and other preschool programs such as the City of Seattle Preschool Initiative. In order to better coordinate services, DCYF has a Memorandum of Understanding with the City of Seattle which outlines specific agreements and services between ECEAP and the

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Preschool Initiative. At the statewide level DCYF is moving toward serving all income eligible 4 year old children who are not in Head Start by 2020.

Emergency Temporary Change: Effective September 1, 2020, DCYF began authorizing care during school instruction hours while school districts moved to remote learning models to support continuity of care for school age children during the COVID-19 pandemic and social distancing.

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

Effective Date: 07/01/2019

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.

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

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

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be considered eligible for a full minimum 12-month eligibility period, even if their income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

A family eligible for services via the graduated phase-out of assistance is considered eligible under the same conditions as other eligible families with the exception of the copayment restrictions, which do not apply to a graduated phase-out. To help families transition 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.

Effective Date: 07/01/2019

rocedures regarding the graduated phase-out of assistance.	
N/A - The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.	
N/A - The Lead Agency sets its exit eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.	
☐ The Lead Agency sets the second tier of eligibility at 85 percent of SMI.	
Describe the policies and procedures.	
Provide the citation for this policy or procedure.	
The Lead Agency sets the second tier of eligibility at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency initial eligibility threshold.	's
Provide the second tier of eligibility for a family of three.	
\$3,809	

Describe how the second eligibility threshold:

i. Takes into account the typical household budget of a low-income family:

After 12 months of eligibility, at redetermination, if a family's income exceeds the program income limit of 200 percent Federal Poverty Level (FPL) but does not exceed 220 percent FPL, the family will be eligible for twelve additional months of services. Taking into account the typical household budget for these still low-income families, DCYF calculates copays for families in the phase-out period as

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if their income were 200 percent FPL, and the copay cannot increase during the period. Should family income decrease during the period, the family may report the fact toDCYF and eligibility staff will verify the fact and reduce the copay.

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:

The continuation of the second tier of eligibility to 220 percent FPL provides an extension of income progression beyond the initial application eligibility. CCSP policy keeps the copay at the 200 percent FPL level as described above.

iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption:

At redetermination, so long as the family timely reapplies for benefits, if they qualify for the phase-out they receive another 12-month eligibility period with no disruption just as ifDCYF had determined them eligible under the program's initial income limit of 200 percent FPL.

WAC 110-15-0109

☐ Other.

Identify and describe the components that are still pending per the instructions on
CCDF Plan Response Options for Areas where Implementation is Still in Progress
in the Introduction.

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

☑ No
☐ Yes

i. If yes, describe how the Lead Agency gradually adjusts copays for families under

iv. Provide the citation for this policy or procedure:

a graduated phase-out.

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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)). Check the processes, if applicable, that the Lead Agency uses to take into account irregular fluctuations in earnings and describe, at a minimum, how temporary increases that result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) do not affect eligibility or family copayments.

Effective Date: 07/01/2019

Average the family's earnings over a period of time (i.e. 12 months). Describe:
Request earning statements that are most representative of the family's monthly income.
Describe:
Deduct temporary or irregular increases in wages from the family's standard income level. Describe:
▼ Other.
Describe:
At application, a consumer's household income must be under 200 percent of the

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Federal Poverty Level. If past wages are not reflective of current household income due to, e.g., a temporary increase in hours, WAC 110-15-0065 allows the DCYF eligibility worker to estimate current or future wages.

Consumers are required to notify DCYF if their household income exceeds 85 percent of state median income (SMI) during the 12-month eligibility period. However, under WAC 110-15-0110 DCYF eligibility workers do not terminate eligibility unless the household experiences a sustained income increase above this limit. This is to allow for temporary or seasonal peaks that put the household over income for a short time period.

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.

Effective Date: 07/01/2020

Applicant identity.

Describe:

DCYFeligibility staff cross reference the name indicated on the CCSP application with wage stubs, the employer verification form, and/or other automated systems such as Automated Client Eligibility System (ACES) for other benefit programs. If the name indicated on the application is questionable based on this information, the worker requests additional identity verification.

Applicant's relationship to the child.

Describe:

DCYF eligibility staff cross-reference the applicant's stated relationship to the child in the CCSP application to information in other systems such as ACES. If the statement is questionable based on information available to staff, they request additional verification such as a birth certificate, collateral third party statement, or custody agreement.

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☑ Child's information for determining eligibility (e.g., identity, age, citizen/immigration status).

Describe:

DCYF eligibility staff cross-reference the child's information stated in the CCSP application with the federal Social Security Number Verification Service, and, when the case has been processed as to food benefits or TANF, they check the federal databse for eligibility for federal programs. Once a child is cofirmed eligible, based on immigration/citizenship status, the elgibility system captures the approval status. If a client statement as to eligibility is questionable based on information available to staff, they request additional verification such as birth certificate, collateral third party statement, or custody agreement.

Work.

Describe:

DCYF eligibility staff cross-reference work information stated in the CCSP employment verification form with information in the TALX database of employment and payroll information, Employent Security Division payroll and unemployment records, paystubs, and/or information supplied by the employer. Staff verify self-employment using federal or state tax documents for existing self-employment, or a projected profit and loss statement for new businesses.

Job training or educational program.

Describe:

DCYF staff verify job training and education programs by comparing schedules stated in the WCCC application with official school or training schedules, and/or other information provided by school or training officials. Education and training are not approved activities in the SCC program so this process does not apply to SCC applicants.

Family income.

Describe:

DCYF staff cross-reference information stated in the CCSP employment verification form with information in the TALX database of employment and payroll information,

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Employment Security Division payroll and unemployment records, paystubs, and/or information supplied by the employer. Staff verify self-employment using federal or state tax documents for existing self-employment, or a projected profit and loss statement for new businesses. Staff verify child support paid or received with court documentation, receipts, paystubs, a verbal or written statement from the non-custodial parent (or a statement from the consumer explaining why they are unable to obtain one), and with information in the Division of Child Support's Support Enforcement Management System (SEMS).

✓ Household composition.

Describe:

DCYF staff cross-reference household composition information stated in the CCSP application with information available in ACES, SEMS, Employment Security Division, TANF, food assistance, medical assistance, and other available systems as needed such asDepartment of Revenue or the County Assessor's site. If the consumer's statement of household composition is questionable in light of records for that consumer under these systems, DCYF may request that the consumer provide additional verification or a collateral third party statement, or send a DSHS Office of Fraud and Accountability (OFA) investigator to make an unannounced visit to the consumer's home to verify the consumer's circumstances.

If the consumer is the only parent named on the CCSP application and DCYF is unable to verify household composition in agency records under TANF, food assistance, medical assistance, or child support services, then the consumer must provide the name and address of the other parent. Alternatively, the consumer may indicate under penalty of perjury, that the other parent's identity and address are unknown or that providing this information will likely result in serious physical or emotional harm to the applicant or anyone residing with them. In addition, the consumer must indicate under penalty of perjury whether the other parent is present or absent in the household. WAC 110-15-0012.

Applicant residence.

Describe:

DCYF staff cross-reference residence information stated in the CCSP application with

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information in other systems such as ACES. If the statement on the application is questionable in light of the information available to staff, staff request a collateral statement from a landlord. DCYF uses information contained in the ACES and eJAS system to substantiate claims of homelessness. Families experiencing homelessness can qualify for a special eligibility period under WAC 110-15-0023.

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?

Effective Date: 07/01/2020

Time limit for making eligibility determinations

Describe length of time:

For CCSP, the time limit for making eligibility determination is 30 days from the date the application is received. Under WAC 110-15-0065, families with new employment may self-attest income and third party verification is required within 60 days, and if verification is not received within that timeframe, eligiblity system automation terminates the case. Special rules described in Section 3.2.1 apply regarding families experiencing homelessness who are unable to verify participation in approved activities under WAC 110-15-0023.

☐ Track and monitor the eligibility determination process✓ Other.

Describe:

For CCSP, when the consumer's current eligibility period is within 45 days of ending, DCYF mails a reapplication with a letter describing the information DCYF needs to determine eligibility for another period.

None

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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.

Effective Date: 07/01/2019

- a) Identify the TANF agency that established these criteria or definitions: DSHS
- b) Provide the following definitions established by the TANF agency:

"Appropriate child care":

"Appropriate child care" means child care licensed, certified, or approved under federal, state, or tribal law and regulations for the type of care the family wants and was free to choose within locally available options.

"Reasonable distance":

"Reasonable distance" means within range without traveling farther than is expected in the community.

"Unsuitability of informal child care":

"Unsuitability of informal child care means care that does not meet the definition of appropriate child care".

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"Affordable child care arrangements":

"Affordable child care arrangements" means care arrangements that do not cost more than the copayment would under the relevant CCSP.

- 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:

DSHS adds text to every individual responsibility plan (IRP) informing the parent about the exception to the individual penalties associated with the TANF work requirements.

d) Provide the citation for the TANF policy or procedure:

The policy and procedure are available in the DSHS EA-Z Manual (https://www.dshs.wa.gov/esa/manuals/eaz) and also in WAC 388-310-1600(3)(c) and RCW 74.08A.270(1)(a).

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).

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3.2.1 Describe how the Lead Agency defines:

Effective Date: 07/01/2019

a) "Children with special needs":

"Children with special needs" means persons age thirteen to nineteen years and under court supervision; or less than age nineteen years, and (a) having a verified physical, mental, emotional, or behavioral condition that requires a higher level of care while in the care of a licensed or certified facility, a DCYF contracted seasonal day camp or an inhome/relative provider; and (b) having a condition and need for higher level of care verified by an individual who is not employed by the child care facility and is either a health, mental health, education or social service professional. WAC 110-15-0220.

b) "Families with very low incomes":

"Families with very low incomes" means families enrolled in TANF. When a wait list is required, these families are given priority. See WAC 110-15-2210.

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

Effective Date: 07/01/2020

a) lo appl	dentify how services are prioritized for children with special needs. Check all that ly:
Į.	Prioritize for enrollment
Γ	Serve without placing these populations on waiting lists
	Waive copayments
Г	Pay higher rates for access to higher-quality care
	Use grants or contracts to reserve slots for priority populations
F.	Other.
	Describe:
	In addition to the base rate for licensed care, DCYF will authorize additional special

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needs daily rates based on child age and geographic region.

b) Identify how services are prioritized for families with very low incomes. Check all that apply:
☐ Prioritize for enrollment
Serve without placing these populations on waiting lists
☐ Waive copayments
Pay higher rates for access to higher-quality care
☐ Use grants or contracts to reserve slots for priority populations
Other.
Describe:
"Families with very low incomes" means families enrolled in TANF. When a wait list
is required, these families are given priority. See WAC 110-15-2210.
c) Identify how services are prioritized for children experiencing homelessness, as defined by the CCDF. Check all that apply: Prioritize for enrollment Serve without placing these populations on waiting lists Waive copayments Pay higher rates for access to higher-quality care Use grants or contracts to reserve slots for priority populations
Other.
Describe:
Families experiencing homelessness have12 months to begin approved activities,
and to resolve any outstanding copayment issues. DCYF authorizes the family for
full-time care, and the family's copayment is waived during the 12 month period. See WAC 110-15-0023.
366 WAC 110-10-0023.

DCYF coordinates services to homeless families available under these programs through regular inter- and cross-divisional planning and collaboration. DCYF's ongoing goals for this coordination are to expand capacity to assist families in crisis and to expand access to quality full-day, full-year programs with comprehensive services under WCCC, SCC, ECEAP, Head Start and Early Head Start. DCYF prioritizes homeless families for services under all these programs and continues to

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explore layered funding strategies through ECEAP expansion and Early Head Start - Child Care Partnerships to improve access to quality comprehensive services for this vulnerable population.

In addition, DCYF contracts with CCA, who assists families experiencing homelessness to navigate the DCYF eligibility determination under the rules described above. CCA, using a separate statewide phone line, provides these families expert guidance on eligibility rules affecting them. CCA works with DCYF when it identifies eligibility barriers for these families in policy or service delivery. As a result, families experiencing homelessness are given tools to provide DCYF the information needed to determine eligibility based on their true circumstances.

d) Identify how services are prioritized, if applicable, for families receiving TANF program
funds, those attempting to transition off TANF through work activities, and those at risk of
becoming dependent on TANF (98.16(i)(4)). Check all that apply:
Prioritize for enrollment
✓ Serve without placing these populations on waiting lists
☐ Waive copayments
Pay higher rates for access to higher-quality care
Use grants or contracts to reserve slots for priority populations
Cther.
Describe:

3.2.3 List and define any other priority groups established by the Lead Agency.

Families with foster children; families with teen parents; families with a child who has received child protective or child welfare services or a family assessment response from DCYF; and CCSP reapplicants. See WAC 110-15-0005,110-15-2210 and 110-15-0024.

Effective Date: 07/01/2020

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3.2.4 Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.2.3.

In the event of a wait list, prioritized families are exempt from the wait list to the extent of available funds. See WAC 110-15-2210. Students attending high school or completing a high school equivalency certificate and under the age of 21 years have different eligibility criteria as detailed in WAC 110-15-0005. These students do not have a copayment and the coparent's activity is not used in determining the amount of care the child requires activity.

Effective Date: 09/01/2020

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

Effective Date: 07/01/2020

a) Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained.

WCCC eligibility rules allow families experiencing homelessness, according to the McKinney-Vento definition, who would otherwise be WCCC ineligible because they are not participating in approved activities or cannot verify that they are, or have outstanding copayment issues, to be eligible to receive WCCC. DCYF determines whether documentation in the Automated Client Eligibility System (ACES) or Electronic Jobs Automated System (eJAS) for other benefits programs corroborates the statement of homeless status. If systems show conflicting information, DCYF requires a corroborating written or verbal statement from a third party who knows the family's homeless status.

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Further, CCSP does not require families to produce immunization records to qualify for child care subsidies. Immunizations records are required for children to attend licensed child care but families have time to either obtain the child's immunization, re-start immunizations, or provide documentation according to WAC 110-300-0210. DCYF contracts with CCA to provide outreach to these families and assist with obtaining immunization records.

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

Other

DCYF contracts with CCA to provide outreach to families experiencing homelessness. CCA created a separate menu choice on its Family Center telephone hotline for families who are experiencing homelessness. CCA ensures that Family Center employees who answer the line are able to consult with these families to determine early learning/child care service(s) for which the family may be eligible to include, but not limited to: WCCC, Early Childhood Education and Assistance Program (ECEAP), Head Start or WCCC through TANF, and information on how families can obtain these services.

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

3.2.6 Lead Agencies must establish a grace period that allows 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

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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)).

Effective Date: 07/01/2020

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 Lead Agency's CCDF)

CCSP does not require families to produce immunization records to qualify for child care subsidies. Immunizations records are required for children to attend licensed child care but families have time to either obtain the child's immunization, re-start immunizations, or provide documentation according to WAC 110-300-0210. DCYF consulted with Department of Health in developing all health and safety standards, including provisions related to immunization.

Provide the citation for this policy and procedure.

WAC 110-15-0023. WAC 110-300-0210

Children who are in foster care.

NA

Provide the citation for this policy and procedure.

NA

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)).

DCYF coordinates services to homeless families available under these programs through regular inter- and cross-divisional planning and collaboration. DCYF's ongoing goals for this coordination are to expand capacity to assist families in crisis and to expand access to quality full-day, full-year programs with comprehensive services under WCCC, SCC,

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ECEAP, Head Start and Early Head Start. DCYF prioritizes homeless families for services under all these programs and continues to explore layered funding strategies through ECEAP expansion and Early Head Start - Child Care Partnerships to improve access to quality comprehensive services for this vulnerable population.

In addition, DCYF contracts with CCA, who assists families experiencing homelessness to navigate the DCYF eligibility determination under the rules described above. CCA, using a separate statewide phone line, provides these families expert guidance on eligibility rules affecting them. CCA works with DCYF when it identifies eligibility barriers for these families in policy or service delivery. As a result, families experiencing homelessness are given tools to provide DCYF the information needed to determine eligibility based on their true circumstances.

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

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change in eligible activity includes, at a minimum, any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working; any student holiday or break for a parent participating in a training or educational program; any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program; any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency; a child turning 13 years old during the 12-month eligibility period (except as described in 3.1.1); and any changes in residency within the state, territory, or tribal service area.

Effective Date: 1/1/2021

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.

DCYF's CCSP rules allow 12 months of uninterrupted eligibility regardless of any change in a family's circumstances with two major exceptions: resources exceeding \$1 million and gross income exceeding 85% of State Median Income. Neither temporary nor non-temporary changes in consumers' activities impact eligibility during the 12-month eligibility period. However, the family must be participating in activities at initial eligibility determination, andat redetermination in order to receive an additional 12 months eligibility.

Effective January 1, 2021, to ensure families receive a full 12 months of child care subsidy, newly eligible families, once approved to receive subsidy, will have 12 months to obtain a child care provider. Once a provider is selected the family will receive a 12 month authorization starting the month the provider was selected. (WAC 110-15-0109).

Note that DCYF allows children who reach age 13 years during their authorization to complete their 12 month eligibility so long as they were age 12 years at the time of their family's application for CCSP benefits.

Families applying for TANF are conditionally approved for CCSP benefits while their Individual Responsibility Plan (IRP) is being developed. These cases are paid for with TANF funds unless the family is approved for TANF and obtains an IRP with an approvable activity. Once the eligible family obtains an IRP they are eligible for CCSP benefits for 12 months. Workers check back on applications after 14 days to ensure the family was approved for TANF and given an IRP, if not the case is closed. Once

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approved for their TANF activity, the client's authorization is eligible for 12 months even if the client transitions to work, with no increase in copay. See WAC 110-15-0055.

Emergency Temporary Change: Effective starting the effective date of Proclamation 20-05 on February 29, 2020 and continuing through May 2020, DCYF extended families' authorizations for 12 months, at their prior authorization levels, when the family reapplied in March, April, May, or June and met all other eligibility criteria but activity hours decreased during COVID-19.

b) How does the Lead Agency define "temporary change?"

Temporary change is not a defined term because CCSP rules allow for 12 months of uninterrupted eligibility regardless of any change in approved activity, temporary or otherwise.

c) Provide the citation for this policy and/or procedure.

WAC 110-15-0040, 110-15-0082

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.

Effective Date: 07/01/2020

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 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:
i. Provide a summary describing the Lead Agency's policies and procedures for
discontinuing assistance due to a parent's non-temporary change: NA
ii. Describe what specific actions/changes trigger the job-search period. NA
iii. How long is the job-search period (must be at least 3 months)? NA
iv. Provide the citation for this policy or procedure. NA
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:
NA

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ii. Provide the citation for this policy or procedure:

NA

A change in residency outside of the state, territory, or tribal service area.

Provide the citation for this policy or procedure:

WAC 110-15-0031, 110-15-0110

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.

Clients convicted of fraudulently obtaining CCSP benefits are banned from receiving CCSP benefits for 5 years from the date of conviction. Clients that are approved for CCSP benefits due to misrepresenting their household income and are not eligible for CCSP benefits have their cases closed and must repay the funds used.

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).

Effective Date: 07/1/2020

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 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:
Families are required to report to DCYF within 10 days when household resources exceed \$1 million, and when income exceeds 85 percent of the State Median Income. WAC 110-15-0031.
Changes that impact the Lead Agency's ability to contact the family. Describe:
Families are required to report to DCYF within 10 days when household address changes. WAC 110-15-0031.
☑ Changes that impact the Lead Agency's ability to pay child care providers. Describe:
A newly approved families have 30 days to report a provider as part of the application process. Existing families are required to report to DCYF within 5 days when they start attending a provider, or change providers. A need for increased care must be reported to DCYF within 10 days. WAC 110-15-0031.

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.

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reporting requirements are not burdensome and to avoid an impact on continued eligibility between redeterminations? Check all that apply.
Phone
✓ Email
✓ Online forms
Extended submission hours
✓ Postal Mail
▼ FAX
✓ In-person submission
Other.
Describe:

c) How does the Lead Agency allow for families to report changes to ensure that

- 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. Families have the option to voluntarily report changes in their approved activity schedule on an ongoing basis during the 12-month eligibility period in order to receive additional authorized care units, e.g. when work hours increase, or to reduce their copayment whenincome decreases.
 - ii. Provide the citation for this policy or procedure. WAC 110-15-0031, WAC 110-15-0085.

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

Lead Agencies are required to have procedures and policies in place to ensure that parents (especially parents receiving assistance under the TANF program) are not required to unduly

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disrupt their employment, education, or job training activities to comply with the Lead Agency's or designated local entity's requirements for the redetermination of eligibility for assistance (658E(c)(2)(N)(ii); 98.21(d)).

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

Effective Date: 07/01/2019

- a) Identify, where applicable, the Lead Agency's procedures and policies to ensure that parents (especially parents receiving TANF program funds) do not have their employment, education, or job training unduly disrupted to comply with the state/territory's or designated local entity's requirements for the redetermination of eligibility.
 - Advance notice to parents of pending redetermination
 - Advance notice to providers of pending redetermination
 - Pre-populated subsidy renewal form
 - ☑ Online documentation submission
 - Cross-program redeterminations
 - Extended office hours (evenings and/or weekends)
 - Other.

Describe:

Eligibility redetermination requires verification of family participation in an approved activity so DCYF sends families a reapplication before their eligibility period ends. WAC 110-15-0109. Families can reapply or report changes in-person, using a toll-free phone number, using Washington Connections, a web-based program, by mail, and by fax. These multiple reapplication options help parents reapply in the manner that best minimizes disruption to their employment, education, and job training. Further, as described in 3.3.3 above, DCYF's implementation of 12-month eligibility minimizes reporting requirements, reducing time spent interacting with DCYF eligibility staff to meet program requirements. Finally, DCYF policy allows families to self-report work schedules instead of requiring employers to supply

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them, eliminating unnecessary contact between DCYF staff and employers that can create strain in the employment relationship.

 b) How are families allowed to submit documentation, described in 3.1.9, for redetermination? Check all that apply.
Postal Mail
☑ Email
✓ Online forms
☑ FAX
✓ In-person submission
Extended submission hours
Other.
Describe:

3.4 Family Contribution to Payments

Lead Agencies are required to establish and periodically revise a sliding-fee scale for CCDF families that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) that is not a barrier to families receiving CCDF funds (658E(c)(5)). In addition to income and the size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. Lead Agencies, however, may NOT use cost of care or amount of subsidy payment in determining 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 3.1.7 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

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

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

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)	Family of This Size Based on the Income Level in	in Column (b) is What	Initial or First Tier Income Level Before a Family Is	Monthly Co- Payment for a Family of This Size Based on the Income Level in	The Co- Payment in Column (e) is What Percenta ge of the Income in Column (d)?
1	1	15	1500	2126	115	5
2	1	15	1500	2874	115	4
3	1	15	1500	3620	115	3
4	1	15	1500	4366	115	3
5	1	15	1500	5114	115	2

- b) What is the effective date of the sliding-fee scale(s)? January 1, 2021
- c) Identify the most populous area of the state used to complete the chart above. King County, identified as Region 4.
- d) Provide the link to the sliding-fee scale: https://apps.leg.wa.gov/wac/default.aspx?cite=110-15-0075
- e) If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).

NA. Note that the chart above reflects a temporary change to the copayment structure effective January 21, 2021 whereby the maximum copay amount is capped at \$115.

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

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▼ 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:

The family's contribution is per family, depends on family income, and is broken into three tiers. Tier 1 includes families with incomes between 0% and 82% FPL and is a flat \$15 per month. Tier 2 includes families with incomes more than 82% FPL through 137.5% FPL and is a flat \$65 per month. Tier 3 includes families with income more than 137.5% FPL through 200% FPL and the fee is calculated on income as follows: Subtract 137.5% FPL from the family countable income, then multiply by .5 and add \$65. Finally, the contribution during the graduated phase out

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is capped at the level it would be were family income equal to 200% FPL. See DCYF's Copay Calculation table for more information:

https://www.dcyf.wa.gov/sites/default/files/pdf/copay_calculation_table.pdf.

Effective January 1 through June 30, 2021, DCYF capped family copays at a maximum amount of \$115 per month.

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)).

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▼ 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:
Cother.
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.

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

Families experiencing homeless may qualify for a special eligibility period, under which the family contribution is waived. Families that have received child protective services within the last 6 months may be eligible for CCSP for 12 months with a waived copayment.

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.

Emergency Temporary Change: In addition to the flexibility allowed under CCDF to eliminate the copayment requirement for families with incomes below the federal poverty level, DCYF submitted a letter requesting waiver from the copayment requirements for families with incomes above the federal poverty level. The waiver was approved. With the waiver and the flexibility allowed under CCDF, copays for all families were waived for the period April through June 2020. Beginning October 1,2020, copays were again waived for all families through December 31, 2020.

With the flexibility allowed, under CRRSA CCDF, DCYF waived copays for all families for the period of July 1, 2021 through September 30, 2021.

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

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

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

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

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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)).

DCYF provides families thechild care award letter directly after they are determined eligible for child care subsidy programs. It describes the program they are approved for (Working Connections or Seasonal Child Care), their eligibility period, the activity they are participating in at the time of application that is the basis of their approval, their monthly copayment amount, how their income was determined (for eligibility and copayment determination purposes), a list of their rights and responsibilities, and contact information if they have any questions, concerns, or need to submit further information. It also includes the following:

-A link to Child Care Check, https://www.findchildcarewa.org, Washington State's licensed child care status and record data base. Parents can view detailed information about a program's licensing history, including licensing status, dates of inspections, monitoring reports, and licensing violations, plus basic staffing information, program philosophy, and level in Early Achievers, Washington's QRIS. It also provides information on how to submit a provider complaint and directs parents to CCA for resource and referral.

-A link to CCA, http://www.wa.childcareaware.org, Washington State's child care referral resource. Parents can search for providers in their area based on hours care is available, type of care they seek, subsidy programs the provider participates in, and days and hours care is needed (including nonstandard hours). Search results indicate the provider's Early Achievers rating, and program model.

-A link to Parenthelp123, http://www.parenthelp123.org/child-development/help-me-grow-washington, providing information on child development screening.

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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.

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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:
DCYF's website provides information about state child care assistance and subsidy
information at https://www.dcyf.wa.gov/services/earlylearning-childcare/getting-help.
Child care services available through grants or contracts. Effective Date: 07/01/2019
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.
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.
a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots (658A(b)(1))? Note: Do not check 'yes' if every provider is simply required to sign an agreement to be paid in the certificate program. ☑ No. If no, skip to 4.1.4. ☐ Yes, in some jurisdictions but not statewide.

4.1.3

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iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers):
iv. The process for accessing grants or contracts:
v. How rates for contracted slots are set through grants and contracts:
vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality:
vii. If contracts are offered statewide and/or locally:
4.1.3 Child care services available through grants or contracts.
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 children experiencing homelessness
Programs to serve children in underserved areas
Programs that serve children with diverse linguistic or cultural backgrounds
Programs that serve specific geographic areas
☐ Urban
☐ Rural
☐ Other
Describe

4.1.3 Child care services available through grants or contracts.

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

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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
Other
Describe

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)).

CCSP's administrativerules require that parents have access to their children at all times while they are in child care. WAC 110-15-0025. CCSP's parent brochure and parent applications also communicate this information. Additionally, licensing rules require that providers inform parents that they have unlimited access to their child(ren) in care at all times.

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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?

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□ 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) requirent Describe:	nents.
Restricted based on the provider meeting a minimum age requirement. (relative provider must be at least 18 years of age based on the definition child care provider (98.2). Describe:	
In-home/relative (FFN)providers 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:	
The following document, available in both English and Spanish, explains subsidies and billing rules for in-home providers:	child care

https://www.dcyf.wa.gov/sites/default/files/pdf/FFN_subsidy_guide.pdf. Under WACs 110-15-0023 and 110-15-3566, in-home care is not allowed during thespecial eligibility period families experiencing homelessness and waiting to begin approved activities, or in the Seasonal Child Care program.

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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

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professional development, curricula and supplies, group size and ratios, enrollment levels, licensing requirements, quality level, facility size, and other factors.

- Describe how the alternative methodology will provide complete information that captures the universe of providers in the child care market.
- Describe how the alternative methodology will reflect variations by provider type, age of children, geographic location and quality.
- Describe how the alternative methodology will use current, up to date data.
- Describe the estimated reporting burden and cost to conduct the approach.

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

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☑ MRS
Alternative methodology.
Describe:
Both.
Describe:

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

Describe how the Lead Agency consulted with the:

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a) State Advisory Council or similar coordinating body:

DCYF consulted with ELAC prior to developing the MRS methodology and solicited feedback on the survey instrument prior to deployment of the survey.

b) Local child care program administrators:

Field administrators and supervisors participate in some local Early Learning Coalitions throughout the state and are consulted through this participation.

c) Local child care resource and referral agencies:

DCYF solicited feedback on the proposed MRS methodology and survey instrument from CCA.

d) Organizations representing caregivers, teachers, and directors:

DCYF revised the prior survey instrument and methodology to reflect SEIU 925 recomendations to include all licensed providers in the survey sample, and to standardize the survey instrument for all provider types, including additional demographic detail necessary to analyze the impact of alternate subsidy rate payment regions or methodologies.

e) Other. Describe:

NA

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 MRS is statistically valid and reliable because it uses rigorous data collections procedures, is representative of the child care market, provides the most complete and current data available, reflects geographic variations, and analyzes the data to capture

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relevant differences.

Rigorous data collection procedures; Representative of the child care market:

In fall 2016, the Administration for Children and Families (ACF) published guidance on conducting and calculating an accurate child care market rate survey. For the 2018 child care market rate survey, DCYF updated its methodology in accordance with the guidance provided by ACF.

In years past, DCYF calculated the child care market rate percentile solely on provider rates in a licensing region. For this report, under ACF guidance, the market rate percentile is calculated using provider rates in a licensing region and the enrollment of programs. While both methods yield a similar result, by including the actual enrollment in the calculations, the 75th percentile rate will more accurately represent the rate needed to access available slots in a region rather than treating all programs the same--regardless of their size or licensed capacity. As ACF states, "the more children a provider serves, the greater the impact or weight the provider has on the market".

For the 2018 Child Care Market Rate Survey, the inclusion of enrollment in the calculations of the 75th percentile will provide a rate that would allow a child to access 75 percent of programs in the region most likely to have available slots for them.

DCYF determined the use of a census survey methodology--outreach to all licensed providers--as the best approach to capture as many responses as possible. DCYF provided its contractor for the study, Public Consulting Group (PCG) with information on each of the state's licensed child care programs, including program name, address, telephone number, email address, license identification number, program type, license status, and DCYF rate region assignment. PCG used the unique license identification number for tracking purposes.

DCYF developed survey questions in partnership with a group of stakeholders and providers prior to contracting with PCG. Questions related to the following categories:

- -Capacity and enrollment, by age;
- -Program hours and characteristics (i.e. Quality Rating and Improvement System (QRIS) and accreditation participation);

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- -Subsidy participation;
- -Staff compensation and education; and
- -Additional fees and services offered, including services related to special needs.

PCG developed an online survey tool using Survey Gizmo with English, Spanish, and Somali options. The survey instrument included logic to filter specific questions for each type of program, so providers only answered questions relevant to them. The guided-logic questions screened responses during the data analysis process, such as guidance to correct provider type and questions on school-age care. To minimize further data entry errors, the online survey instrument included several features, including requirements for mandatory responses and validated fields. DCYF designed the questionnaire to allow programs to enter rate information in the time units (hour, day, week, or month) they used to quote and charge parents. The online link also housed PDF copies of the survey in each language, for providers to print as a reference, or if desired, to print and submit via email attachment.

Initially, DCYF set the online survey collection period as January 22, 2018 to March 23, 2018. It extended the survey collection period to April 20, 2018 to increase response rates.

To initiate the survey collection period, PCG sent an email to all providers. Subsequently, PCG sent an email reminder, with link and unique program identification number weekly. On February 5, 2018, PCG sent a post card to mailing addresses of programs who had not yet responded to the survey.

A call center team operated from February 5, 2018 to April 20, 2018 to collect information by phone. The team made more than 8,500 phone calls to licensed providers across the state. Throughout the collection period, members of the call team focused on reaching out to licensed providers to improve response rates based on high priority cities, regions, provider type, and language spoken. The call center team also responded to incoming calls and returned voicemails.

DCYF also employed strategies to boost response rates, including:

- -Posts onDCYF social media (Facebook, Twitter, and blog);
- -Weekly phone calls with SEIU;
- -Announcement in a SSPS trailer;

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- -Outreach to licensors, Child Care Aware, and other stakeholders with relationships with providers; and
- -Emails sent via listservs.

As a result of these efforts, the final response rates as of April 20, 2018 were 51 percent for licensed centers and 36 percent for licensed family homes, for an average response rate of 42 percent.

There were two major changes in the child care rating setting methodology from the 2014 Market Rate Survey to more accurately reflect the licensed child care market:

- -Researchers weight the rate percentile calculations based on enrollment.
- -Center regions follow the subsidy rate groupings, rather than the licensing regions.

The 2017 Market Rate Survey bases the percentile rate calculation on the theory of supply and demand. Prices are a function of demand (how much parents are willing or able to pay, how many children need care) and supply (the cost of providing care, how many child care slots providers can offer). Equilibrium is then a compromise between the parent's economic needs and the provider's economic needs. In this way, the price of child care (the private pay rate) should reflect the actual cost of providing that care. Therefore, when one examines the child care market as a whole, the average price of child care represents a point of market equilibrium.

The MRS informs this economic theory of the methodology in a few ways. First, the market for child care is dramatically different throughout the state. Thus, it is necessary to analyze regional child care markets when evaluating subsidy rates, as well as distinguish between provider types and ages of children in care. Centers paid at a higher rate than their geographic region are included in the regional rates they are paid at (Clark County is included in the Region 3 rates, Benton, Walla Walla, and Whitman are included in the Region 6 rates). The Administration of Children and Families advises states to set child care rates at the 75th percentile in order ensure equal access for families with subsidized child care.

Researchers cleaned raw survey data in preparation for analysis and visualizations of child care rates, enrollment, and other details of the child care market. After matching survey responses with administrative data, researchers removed duplications and internally

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inconsistent responses. Project staff made additional effort to include as many provider responses as possible, including contacting providers with incomplete survey responses. Researchers reported unsubsidized child care rates for children enrolled in care converted to 22-day monthly rates for analysis, and normalized billing intervals. Researchers found more complete and consistent responses with full day rates and thus do not report part-time rates.

Most complete and current data available:

For its 2015 MRS, DCYF selected a small sample of providers from each provider type to take the survey. 1,293 licensed centers responded in 2015 compared to 1,041 in 2018. 707 licensed family child care homes responded in 2015 compared to 1,205 in 2018. Further, the rate of provider response to the 2018 MRS was relatively consistent across regions, ensuring adequate data from which to base regional percentile differences. While the 2015 study's response rate was higher overall, due to the substantial increase in the number of family child care homes participating in the 2018 MRS, this study provides more complete data than its predecessor, and is therefore the most complete and current data available in Washington on market rates.

Reflects geographic variations:

In Washington, subsidy rates vary by region as well as child age. DCYF divides the state into six county clusters that each make up a region, and Spokane represents a seventh, separate region. See DCYF's <u>rate map</u> for more information. The regions represent broad economic variation across the state, and DCYF sets rates with the goal of accounting for these economic differences. The 2018 MRS is aligned with this approach because it surveyed providers across all the regions and used the resulting data to describe market rate percentiles for each.

Analyzes the data to capture relevant differences:

The 2018 MRS includes analysis of the data captured to produce findings that will guide rate setting and policy by describing differences by provider type, child age, geographic/economic region, and other factors. Key findings, further detailed in the report, include the following:

- Overall, licensed family child care home subsidies are closer to the reported market rates than licensed centers.

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- Subsidy for licensed family child care homes in Region 4 (King County) covers a greater percentage of currently enrolled children than for any other provider type and region, covering approximately half of children most of the time. In contrast, subsidy for licensed centers in Region 4 covers the lowest percentage of the 75th percentile of market rates than any other region.
- Market rates for infant-age children are the highest of all age groups, and rates generally decrease as a child ages.
- Regions 3 and 4 experience the highest cost in terms of market rates, respectively. In contrast, Regions 1 and 2 experience the lowest costs, respectively.

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4.2.4 Describe how the market rate survey or alternative methodology reflects variations in the price or cost of child care services by:

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a) Geographic area (e.g., statewide or local markets). Describe:

The MRS survey data was linked with administrative demographic data at the region, county, city, and zip code level. The published MRS report included market rate percentile comparison by the seven DCYF licensing regions across the state and was consistent with existing variation in subsidy base rates by region. For example, survey data indicated that market rates in Spokane remain higher than market rates in the surrounding, more rural areas, consistent with the existing subsidy rate structure that established Spokane as its own region. Similarly, for child care centers only, Clark county base rates are paid at the Region 3 rate to reflect higher market rates in Clark county as opposed to its surrounding, more rural counties -- MRS data continues to support this differentiation as well.

SeeDCYF's rate map for more information.

b) Type of provider. Describe:

Survey responses were grouped and analyzed by centers and family homes.

Participation in low income preschool and Head Start programs was also collected and reported.

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c) Age of child. Describe:

Private pay rates were gathered by age groups: Birth to 11 months, 12 to 23 months, 24 to 29 months, 30 months to 6 years (not in school), kindergarten, and school age.

d) Describe any other key variations examined by the market rate survey or alternative methodology, such as quality level.

Early Achievers quality level was derived from administrative data and analyzed from the MRS.Additionally, DCYF conducted a three phase Cost of Quality study that analyzed market pricing, expenditures needed for higher rating in Early Achievers, and staff compensation.

4.2.5 After conducting the market rate survey or alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or alternative methodology. The detailed report must also include the estimated cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, pre-K standards, Head Start performance standards, or State defined quality measures.)

Effective Date: 10/01/2018

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

- a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). 07/26/2018
- b) Date the report containing results was made widely available no later than 30 days after the completion of the report. 07/27/2018

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c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted.

DCYF made its detailed report widely available by posting it to the DCYF website here: https://www.dcyf.wa.gov/sites/default/files/pdf/reports/2018_Washington_State_Market_Rate_Survey.pdf. DCYF further posted the report on its Facebook and Twitter pages.

d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report.

DCYF developed survey questions in partnership with a group of stakeholders and providers prior to contracting with Public Consulting Group to conduct the survey. Further, SEIU 925, ELAC, and CCA all received a draftcopy of the survey and provided edits that were incorporated before deployment. Finally, a soft launch to licensed providers allowed DCYF to incorporate their feedback as well.

4.3 Setting Payment Rates

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

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

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a) Infant (6 months), full-time licensed center care in the most populous geographic region

Rate \$ 95.73 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 85th

b) Infant (6 months), full-time licensed FCC home in the most populous geographic region

Rate \$ 68.18 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 85th

c) Toddler (18 months), full-time licensed center care in the most populous geographic region

Rate \$ 79.55 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 85th

d) Toddler (18 months), full-time licensed FCC care in the most populous geographic region

Rate \$ 63.64 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 85th

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region

Rate \$ 71.82 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 85th

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

Rate \$ 59.09 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 85th

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

Rate \$ 45.00 per day unit of time (e.g., daily, weekly, monthly, etc.)

Percentile of most recent MRS: 85th

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

Rate \$ 40.00 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 85th

i) Describe how part-time and full-time care were defined and calculated.

DCYF defines full-time care as more than five hours care per day, 23 days per month and 30 half day units per month in the case of school-age care. DCYF defines part-time care as any lesser amount. Note that licensed family home providers have an additional child age rate category not reflected above for children ages 12 through 17 months -- rates for these children are the same as for infants birth through age 11 months.

- j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). July 1, 2021
- k) Identify the most populous area of the state used to complete the responses above. King County, identified as Region 4.
- I) Provide the citation or link, if available, to the payment rates. https://www.dcyf.wa.gov/services/early-learning-providers/subsidy m) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)). NA

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

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rates were based on the MRS and/or an alternative methodology, and the amount of the rate. Check all that apply.

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Differential rate for *non-traditional hours*.

Describe:

For CCSP, the add-on is \$90 dollars per child per month additional payment for licsned family home providers, and \$75 for child care centers. The provider must belicensed or certified and provides at least 30 hours of non-standard hours care during one month. This payment is subject to availability based on the fixed amount appropriated annually for this purpose by the state Legislature, and in recent years the appropriation has been exhausted in less than 12 months.

Differential rate for *children with special needs*, as defined by the state/territory.

Describe:

Licensed centers, licensed family homes, and FFN providers are all eligible to receive an additional special needs rate. This rate can vary based on the level of care required for the individual child and the type of provider providing the child care. There are two levels of Special Needs authorization that can occur for each given provider type.DCYF has a specialized team that determines if a level 1 special needs rate is appropriate or if a level 2 special needs rate review must take place. If a level 2 special needs review is required, an interagency review board reviews the circumstances around the case and determines:

- -If a level 2 special needs rate is, indeed, necessary and,
- -What the level 2 special needs rate will be after review, a special needs rate is authorized to the provider by an authorizing worker at DCYF and the provider can bill appropriately.

The special needs rates have a range of maximums depending on the child's age, geographic region, and provider type. This range is as low as \$.62 per hour to as high as \$15.89 per hour.

Differential rate for <i>infants and toddlers</i> . Note: Do not check if the	
Lead Agency has a different base rate for infants/toddlers with no separate bonus	or

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add-on. Describe: Differential rate for *school-age programs*. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on. Describe: ☑ Differential rate for higher quality, as defined by the state/territory. Describe: Licensed providers may participate in the state's QRIS, Early Achievers. A provider's additional rate depends on their level rating (on a scale of 1 through 5) and is a percentage bonus calculated on the base rate. For licensed centers, that additional rate is as follows: Level 2=2%, Level 3=8%, Level 4=15%, and Level 5=20%. For licensed family homes, the additional rate is as follows: Level 2=2%, level 3=12%, level 4=17%, and level 5=20%. Other differential rates or tiered rates. Describe: CCSP pays registration fees for all licensed providers of up to \$50 per child per calendar year and field trip fees to licensed family home providers and Family, Friends, and Neighbors providers of up to \$30 per child per month. 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)):

Effective Date: 10/01/2018

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a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices.

CCSP makes subsidy payments to the full-range of providers, including licensed centers, family homes, and school-age programs, license exempt Family, Friends, and Neighbors, and certified for payment programs (military, tribal, school district-operated, etc.). Licensed providers must participate in Early Achievers and be rated level 3 or higher within 30 months in order to be eligible to receive subsidy payment. DCYF asked providers during the most recent market rate survey if they accepted subsidized children and if they were willing to provide care for subsidized children. All geographic regions had providers with vacancies and accepted children with subsidies at all age groups. According to the 2015 CCA Data Report, the vast majority of providers (84%) accept at least one kind of subsidy or offer other forms of financial assistance, although some limit the number of subsidized children they accept at any given time. DCYF has received anecdotal evidence that there are areas of the state where barriers to participation exist and is engaged in research to quantify the issue and identify root cause.

b) Describe how payment rates are adequate and have been established based on the **most recent MRS or alternative methodology**. Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result. Existing base rates for licensed family homes were established based on the then current MRS, while DCYF continues to seek funding from the Legislature to base payment for

centers on the current MRS.

Further, as part of its efforts to incentivize providers to serve children receiving subsidy, DCYF provides substantialtiered reimbursement for providers at various levels of its QRIS, Early Achievers. Licensed center providers rated levels 2 and 3, for example, receive 2 percent and 8 percent tiered reimbursement, respectively. Licensed family home providers at levels 2 and 3 receive 2 percent and 12 percent tiered reimbursement, respectively. According to DCYF's Early Achievers Data Dashboard for September, 2018, 48 percent of centers receiving subsidy are at level 2, and 49 percent are at level 3. 67 percent of licensed family homes receiving subsidy are currently at level 2, and 33 percent are at level 3. Note that providers who begin participation in Early Achievers automatically start at level 2 and are required to rate level 3 within 30 months in order to continue receiving subsidy, so DCYF expects that the percentage of providers rating level 3 will increase substantially as the deadline approaches, since current data indicates most providers rate levels 3 and 4. Note also that the percentages above for level 2 include providers who are awaiting rating.

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In addition to its base rates and tiered reimbursement, Washington has a generous 12 month eligibility policy ensuring continuity of provider payment, health insurance for family child care providers, add-ons (e.g overtime pay, nonstandhard hours bonsues) and incentives for centers and licensed family homes. DCYF's absent day policy allows licensed providers to bill for all absent days in a month, up to the extent of the authorization, so long as the child attends at least one day of care in the month. License exempt FFN providers are paid an hourly rate of \$2.55 for each child and may recieve payment for up to 6 children at any givent time, and in some cases are able to bill as much as their licensed counterparts for similar age groups and numbers of children. These reimbursement rates and policies combine to create an effective payment framework.

c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF.

DCYF payment rates pay differently based on region and child age in order to assist providers where the cost to meet health and safety requirements is the highest. Further, DCYF requires licensed and certified subsidy providers to participate in Early Achievers, and all Early Achievers participants receiving receive at least two percent tiered reimbursement calculated on the base rate for participation, and facilities that rate highly in Early Achievers receive more significant increases. Therefore base rate payments should be considered in light of these additional amounts.

Further, DCYF has negotiated a \$100,000 fund to support non-relativeFFN providers in paying for CPR/First Aid training. Licensed family homes receive quality improvement awards of \$2,750 yearly for maintaining level 3 in Early Achievers, while centers receive \$5,000 per year for the same. These forms of compensation, along with tiered reimbursement, and other add-ons and incentives, enable providers to meet basic health and safety, quality, and staffing requirements.

d) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, Pre-K standards, Head Start performance standards, or State defined quality measures).

DCYF contracted for a cost-of-quality study in 2013 which provided the foundation of the tiered reimbursement percentages. That study reviewed the Early Achievers standards to

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be met, the anticipated costs of doing so, and combined this with existing data on actual costs of current programs meeting the various levels. Data on current expenditures were available for Washington-specific salaries and wages from the federal Bureau of Labor Statistics; Non-personnel costswere collected from providers in many states. These data were adapted for Washington based on the professional judgment of, and data collected from, directors and owners of early learning programs and family child care homes on Washington-specific operational practices and costs.

DCYF then used data on the number of children being served by providers at different levels within Early Achievers to determine how to set tiered reimbursement percentages and quality improvement awards with a focus on ensuring that providers at level 2 move to level 3. These data particularly informed collective bargaining that established licensed family home tiered reimbursement percentages of 2, 10, 15, and 20 percent for Early Achievers level 2 through 5, respectively. Those negotiations increased the level 3 through 5 tiers, which for both family homes and centers had been set at 5, 10, and 15 percent respectively, by 5 percent each on the basis of the study's finding that "maintaining quality at Level 3 will require some additional time and some costs. Time is assumed to be additional staff time beginning at Level 3 and increasing through Level 5. The cost of a child assessment system is a set expense calculated per child for each Level 3-5. Replacement of educational equipment and materials is an expense item beginning with Level 3 and modestly increasing through Level 5. The amount of these increases is related to the actual cost of specific materials required for ERS scores of 3, 5 and 7." The study indicated that professional development costs for these levels, while less significant, were still a factor.

Further, DCYF's policy is to extend parity to centers if licensed family home tiered reimbursement is negotiated higher, and so to that extent the study also informed DCYF's intended policy, at the time of negotiation, for centers as well.

DCYF more recently completed another cost of quality study in 2018 and DCYF is weighing how to incorporate its findings into Early Achievers.

e) How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds

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(98.16 (k))? Check all that apply.

☑ Limit the maximum co-payment per family.

Describe: .

CCSP's copay scheme provides for a \$15 per month copay for families below 82% of FPL and a \$65 copay for families between 87.5% and 137.5% FPL. For incomes between 137.5% and 200% FPL, copay is calculated as a percentage of income (see link in section 3.4.1).

At reapplication and after 12 months of eligibility, a family may be eligible for a 12-month Income Phase-Out eligibility period if the household income changed and is equal to or greater than 200% federal poverty guidelines (FPG) but less than 220% of the FPG. There is no break between the 12-month eligibility and Income Phase-Out period. Copays for families in the phase out period will not exceed those for a family at 200% FPL. WAC 110-15-0109.

Effective January 1, 2021, DCYF capped family copays at a maximum amount of \$115 per month.

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

Minimize the abrupt termination of assistance before a family can afford the full cost of care ('the cliff effect') as part of the graduated phase-out of assistance discussed in 3.1.7.

At the end of a 12-month eligibility period, a family reporting information which is verified and accepted byDCYF and meeting all other eligibility requirements before the last day of the eligibility period will receive benefits for the next eligibility period without disruption. If a consumer fails to re-apply before the end of their eligibility period, the consumer may be eligible for a 12-month phase out period per WAC 110-15-0109(3) if certain criteria are met.

Other.	
Descril	oe:

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f) To support parental choice and equal access to the full range of child care options, does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

✓ No

Yes. If yes:

- i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families.
- ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.
- iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees.
- g) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers.

DCYF's CCSP payment practices support equal access to a range of providers by ensuring quick turnaround of payment (within one day of servicesin some cases), by paying on full- and part-time bases in full day and half day units, by allowing licensed providers to bill for any days a child is absent in a month so long as the child attends at least one day, by paying registration and field trip fees and bonuses for care during nonstandard hours, and by providing access to health insurance for licensed family home providers. All these policies and processes incentivize providers to care for children receiving subsidy, thereby ensuring equal access.

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

Describe:

Base rates for subsidy are differentiated according to seven geographic regions, including Spokane, which is its own region. Regions are clustered according to

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geography and economic similarity. Where a certain geographic area may differ significantly from the surrounding region in terms of economy or the child care market, DCYF establishes exception. Examples incldue the separation of Spokane into its own region, and Clark County which is paid at region 3 rates instead of the lower rates of its surrounding region. Finally, the market rate survey is used to determine base rate in each geographic region.

Type of provider.

Describe:

Subsidy base rates differ for licensed centers, licensed family homes, and licenseexempt FFN providers. The market rate survey determines market rate for each licensed provider type in each geographic region.

Age of child.

Describe:

Subsidy base rates vary based on the child¿s age. The market rate survey determines market rate for each children¿s age rage (infants, toddlers, preschool, and school-aged).

Quality level.

Describe:

Tiered reimbursement payments vary based on the provider¿s rating at a given quality level, one through five, though only providers who participate in Early Achievers are eligible to receive subsidy payment, and they must rate level 3 or higher within 30 months of receiving subsidy payments. License-exempt FFN providers are exempt from participation in Early Achievers, but other license exempt providers receiving subsidy must participate.

Other.

Describe:

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

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Payment rates are set at the 75th percentile benchmark or higher of the most recent MRS.
Describe:
NA
Based on the approved alternative methodology, payments rates ensure equal access.
Describe:
NA
Feedback from parents, including parent surveys or parental complaints.
Describe:
NA
Cother.
Describe:
NA

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

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generally accepted in its particular state, territory, or service area or among particular categories or types of providers, Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents (658E(c)(2)(S); 98.45(I)(3)).

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

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

Effective Date: 07/01/2021

a) Ensure the timeliness of payments by either (Lead Agency to implement at least one
of the following):
Paying prospectively prior to the delivery of services.
Describe the policy or procedure.

Paying within no more than 21 calendar days of the receipt of a complete invoice for services.

Describe the policy or procedure.

DCYF processes payment within one business day if billing occurs before 4:30 p.m.

Payment is processed within two business days if billing occurs after 4:30 p.m.

Providers who sign up for Electronic Funds Transfer receive their payment within 1 day of being processed. Otherwise, DCYF issues a warrant for payment via physical mail and sends within 1 business day of being processed.

b) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):

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Paying based on a child's enrollment rather than attendance. Describe the policy or procedure. Emergency Temporary Change: Effective March 16 through August 31, 2020, providers will be paid on a enrollment basis regardless of child attendance in care. Providers are allowed to bill to the limit of the authorization and there is no requirement that the child attend care in the month in order for the provider to be allowed to bill. Providers are also allowed to bill based on enrollment despite the provider having closed the facility due to COVID-19. Providing full payment if a child attends at least 85 percent of the authorized time. Describe the policy or procedure. Providing full payment if a child is absent for five or fewer days in a month. Describe the policy or procedure. ■ 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.

DCYF recognizes that providing more stability in subsidy payments facilitates provider participation and parental choice, so we model our licensed child care payment structure to align with the private pay market as closely as possible. Licensed providers are eligible to bill for any absent days in a month as long as the child attends at least one day in the month within the authorization. DCYF authorizes care based on parent activity schedule at eligibility determination but can increase the authorization during the 12-month eligibility period if parents report a verified increase in activity schedule.

c) The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(I)(3)).

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i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time).

Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time).

Licensed and certified providers are paid in half-day and full-day units. DCYF pays in half-day units when care is needed five or fewer hours per day, and in full-day units when care is need for more than five hours, up to ten hours, per day.

Further, whena licensed or certified provider cares for a child whose family participates in 110 or more hours of approved activities, that family is authorized 23 full days of care per month, or 30 half days of care per month for school-age children, which DCYF defines as full time. For FFN providers, DCYF authorizes 230 hours of care, or 115 hours of care for school-age children, but the provider can only bill hourly, for hours of care provided.

Where children attend licensed family homes and require less than 5 hours of care per day and attendance is split with an offsite activity, DCYF will pay the provider at 75% of the full day rate.

Starting September 1, 2019, DCYF also implemented a partial day monthly unit for school age children with the purpose of improving transparency, simplifying the billing process, assisting financial planning, and mitigating overpayment risk for subsidy providers. If the child is eligible for a full time authorization based on their parent's participation in 110 or more hours of approved activities per month, is authorized for care with only one provider, and does not need care for more than five hours during a typical school day and needs care before and after school, the provider will be authorized one monthly unit instead of daily units. The monthly unit amount differs during the school year and summer months to account for the increased care need during the former, and is calculated using the school age base rate for the geographic region. See WAC 110-15-0190.

Emergency Temporary Change: Effective starting the effective date of Proclamation 20-05 on February 29, 2020 and continuing through August 31, 2020, school age authorizations increased to full time for school age children eligible for full-time care -

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this supports the child care needs of families with school age children with increased care need while schools closed.

FFN providers are paid hourly, as established through collective bargaining with SEIU 925 who represents these providers. Hourly payment aligns with the practices of similarly situated informal care providers in the private market, allows DCYF to authorize multiple providers (and multiple types of care) with total care hours to address the family's care needs, and supports better access to care during nontraditional hours and weekends. Also in many instances, FFN care is short term (less than 6 months) while the family finds more suitable care with a licensed or certified provider, or while the parent engages in employment of short duration.

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.

Describe the policy or procedure.

DCYFauthorizes registration fees, field trip fees for licensed family homes and FFN providers, and both licensed family homes and centers can receive non-standard hours payment bonuses.

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:

When DCYF authorizes payment, it sends written notice to the provider including the type of payment (base rate or registration fee, for example), the rate, number of units, and authorization time period.

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:

When a family's eligibility status changes, the associated authorization for payment closes with 10 days notice. This generates immediate notice to the provider of the change, via e-mail if available, or physical mail. DCYF sends notice the same day of the

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change.

f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

Payment inaccuracies and disputes can be reviewed by any worker or, if escalated, a supervisor. DCYF review is immediately available during business hours. If the DCYF worker or supervisor is unable to resolve a dispute, it can be addressed through the administrative hearing process. Consumers may request an administrative hearing up to 90 days from the date of decision.

g) Other. Describe:

NA

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

Effective Date: 10/01/2018

🗵 No, the p	ractices do	not vary	across	areas.
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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)).

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

Effective Date: 07/01/2019

✓ In licensed family child care.

Current Efforts

DCYF collaborates with CCA, who produces statewide and county level data on trends, child care supply, cost of care, and demand for child care referrals. CCA's 2017 Child Care Data Report (available at http://www.childcarenet.org/about-us/data) indicates there are 25 fewer licensed providers than in December 2016, but that total licensed provider capacity has risen by about 3,000 since 2016. Regionally, Pierce County, Southwest Washington, and the Olympic Peninsula have seen a 21-23 percent drop in providers representing loss of 4-6 percent capacity since 2012. Lost capacity is most pronounced in Jefferson and Wahkiakum counties. DCYF further uses its Early Achievers Data Dashboard and data from SSPS on subsidy provider payment to track the number of subsidy providers, by provider type,in the statewide system over time. This data can be sorted by subsidy base rate regions and by county showing the availability of quality providers by geography to assist DCYF in making changes to support equal access and parental choice.

Efforts Underway to Be Implemented in the Future

DCYF has identified a statewide decline in licensed child care providers since 2010, both overall and in the subsidy market for young children. Because of this decline, DCYF is developing a data-focused system to track the supply of child care throughout Washington state. DCYF's system and tracking is intended to generate large yet meticulous sets of data to identify shortages in child care-not only in specific demographics as identified here, but down to very local levels. DCYF analyzes market forces and provider survey feedback to further advance an in-depth understanding of the factors that impact the child care industry, both positively and negatively. Such analysis will enable DCYF to thoroughly

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understand and predict issues that may alter the supply of licensed child care. Accordingly, DCYF has initiated two distinct research and analysis projects to identify and remedy provider shortages in Washington state.

The first is the "Targeting Underserved Populations Analysis," which will analyze existing child care program data against the demand for services at a hyper-local level (e.g. school district, zip code, legislative district). While the goal of this project is to pinpoint gaps in supply using multiple variations and across multiple programs, it is a large analytic effort and is just getting under way. This project enables DCYF to provide descriptive data at the state and local levels that precisely indicates the gap between supply and demand for most of DCYF's programs.

The second analysis project is the "Time Series Analysis," which investigates county-level panel data from 2012-2017 as well as local market forces and economic factors. This analysis will enable DCYF to better understand what drives supply for subsidized child care. Data this project will look at includes demand factors, subsidy rates, community demographics, economic indicators, public preschool enrollment, and major policy changes at the county level for all 39 counties in Washington. This data is analyzed to determine its impact on the outcome of supply of subsidized child care.

In addition to these analysis projects, the department is using a recent increase in federal funding to address shortages in the supply of quality child care providers. In early 2018, the department received an additional \$38 million from Congress for CCDF programs. Prior to this award of additional money, the Washington state legislature mandated any increase in federal funding to be spent on certain priorities. Three of these priorities were: (1) increasing child care rates based on the 75th percentile of market rate; (2) increasing access to infant and toddler child care; and (3) increasing access to child care in geographic areas where supply for subsidized child care does not meet the demand. DCYF is currently exploring specific options for use of this funding to address shortages.

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In licensed child care centers.

Current Efforts

DCYF collaborates with CCA, who produces statewide and county level data on trends, child care supply, cost of care, and demand for child care referrals. CCA's 2017 Child Care Data Report (available at http://www.childcarenet.org/about-us/data) indicates there are 25 fewer licensed providers than in December 2016, but that total licensed provider capacity has risen by about 3,000 since 2016. Regionally, Pierce County, Southwest Washington, and the Olympic Peninsula have seen a 21-23 percent drop in providers representing loss of 4-6 percent capacity since 2012. Lost capacity is most pronounced in Jefferson and Wahkiakum counties. DCYF further uses its Early Achievers Data Dashboard and data from SSPS on subsidy provider payment to track the number of subsidy providers, by provider type,in the statewide system over time. This data can be sorted by subsidy base rate regions and by county showing the availability of quality providers by geography to assist DCYF in making changes to support equal access and parental choice.

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Other.	
NA	

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

Effective Date: 07/01/2019

- a) Children in underserved areas. Check and describe all that apply.
 - Grants and contracts (as discussed in 4.1.3).

Describe:

Through the RFA process, DCYF prioritizes ECEAPapplicants who will serve children in underserved areas of the state as identified through the <u>ECEAP and Head Start Saturation Study</u>. Depending on community need, full- and extended-day ECEAP slots are prioritized for these communities as indicated by the Study.

Finally, DCYF has prioritized participation of Tribal Nations in ECEAP, resulting in significant increases in children served by ECEAP on Tribal land. DCYF further supports increasing supply for children in these underserved areas by including Tribal preschools in its Outdoor Preschool Pilot, by receiving Tribal input into its project to align licensing and ECEAP standards, and through Early Achievers community meetings DCYF hosted with Tribal Nations.

Family child care networks.
Describe:
Start-up funding.
Describe:

▼ Technical assistance support.

Describe:

DCYF provides extensive technical assistance support through its Early Achievers program. Early Achievers coaches assist providers in preparation for Early Achievers rating, and in instances where the provider operates in an underserved

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area, can tailor their support to the provider's specific needs. If, for example,a provider serves an area that is underserved because it is low income with more families experiencing homelessness, their coach's command of best practice for serving children and families experiencing homelessness becomes all the more valuable for the provider. DCYF licensors provide further technical assistance toward compliance with health, safety, and child development requirements that may be particularly challenging for providers serving underserved populations such as LEP families or families experiencing homelessness or with children with disablities. This coaching and technical assistance can spell the difference as to whether a provider reaches and maintains quality rating levels that are a condition of receiving subsidy, or maintains their license, thereby supporting supply in underserved areas.

Recruitment of providers. Describe:
☐ Tiered payment rates (as discussed in 4.3.2). Describe:
☐ Support for improving business practices, such as management training, paid sick leave, and shared services. Describe:
Accreditation supports. Describe:
Child Care Health Consultation. Describe:
Mental Health Consultation. Describe:
Cother.

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			,	Н.

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

o) Infants and toddlers. Check and describe all	that apply
Grants and contracts (as discussed in 4.	1.3).
Describe:	

Family child care networks.

Describe:

Several communities have family child care cohorts which meet regularly to provide support and training for child care providers. In three communities, coaches and consultants from the infant-toddler consultation network expand this work and attend these meetings providing training on infant toddler development and classroom supports.

Start-up funding.

Describe:

▼ Technical assistance support.

Describe:

DCYF provides extensive technical assistance support through its Early Achievers program. DCYFfunds CCA and Educational Service Districts to coach providers on the Infant-Toddler Environment Rating Scale-Revised (ITERS-R) which focuses on setting up developmentally appropriate environments to include welcoming spaces, child sized furnishings, displays at the child's level that represent families and culture, personal care routines, interactions during mealtime, and outdoor play. Infant-Toddler specialists focus on interactions with serve and return, developing warm, responsive relationships and building social and emotional competence. Also included is coaching on the benefits of universal developmental screening and partnering with families to promote universal developmental screening and referral when necessary.

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infant/toddler health and safety requirements.
Recruitment of providers. Describe:
Tiered payment rates (as discussed in 4.3.2) . Describe:
Support for improving business practices, such as management training, paid sick leave, and shared services. Describe:
Accreditation supports. Describe:

Describe:

In partnership with the network of infant/toddler specialists and the Washington State Department of Health (DOH) Project LAUNCH (Linking Actions to Unmet Needs in Children's Health), three communities implemented a training and mentoring project related to developmental screening through the infant-toddler resource network. DOH's goals for Project LAUNCH include increasing developmental screening for children, integrating behavioral health training and services into early care and education systems, improving family strength and local parent support opportunities, and enhancing local services to at least 100 child care and early learning providers and 1,500 children/families over the course of the grant.

✓ Mental Health Consultation.

Describe:

DCYF funds a statewide network of infant mental health consultants that provide on-site consultation or training within the state QRIS to include the following focus

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areas: child development, developmental screening, behavior challenges,
preventing expulsion, connecting families with referral resources, and strategies for
inclusion.
Cother.
Describe:
4.6.2 Describe what method(s) is used to increase supply and to improve quality for the following.
c) Children with disabilities. Check and describe all that apply.
Grants and contracts (as discussed in 4.1.3).
Describe:
Family child care networks.
Describe:
☐ Start-up funding.
Describe:

▼ Technical assistance support.

Describe:

DCYF provides extensive technical assistance support through its Early Achievers program. Specialized coaching and TA is also available to ECE providers on the benefits of developmental screening and how to partner with families to promote universal developmental screening for children birth to five. Providers are given information about activities to enhance development for children who may need additional exposure for skill development and referral for community services when further intervention is necessary. Further, ECEAP contractors funded by DCYF provide regular coaching and resources for providers working with children with special needs, as special needs can be one of the eligibility criteria for ECEAP enrollment. DCYF also sponsors the annual Infant and Early Childhood Conference each year which is a learning opportunity for early learning providers who work with children birth to five with special needs.

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and safety requirements of particular importance to serving children with disabilities.
Recruitment of providers. Describe:
Tiered payment rates (as discussed in 4.3.2). Describe:
Support for improving business practices, such as management training, paid sick leave, and shared services. Describe:
Accreditation supports. Describe:
Child Care Health Consultation. Describe:
Mental Health Consultation. Describe:

DCYF licensors provide further technical assistance toward compliance with health

Other.

Describe:

For CCSP, if the provider cares for a child with special needs and requests additional funding for the child's care, a DCYF special needs review board makes a determination to approve or deny the request based on submitted documentation. Licensed centers, licensed family homes, and family, and FFN providers are all eligible to receive an additional special needs rate. This rate can vary based on the level of care required for the individual child and the type of provider providing the child care.

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There are two levels of Special Needs authorization that can occur for each given provider type. DCYF has a specialized team that determines if a level 1 special needs rate is appropriate or if a level 2 special needs rate review must take place. If a level 2 special needs review is required, an interagency review board reviews the circumstances around the case and determines:

- -If a level 2 special needs rate is, indeed, necessary and,
- -What the level 2 special needs rate will be after review, a special needs rate is authorized to the provider by an authorizing worker at DCYF and the provider can bill appropriately.

The special needs rates have a range of maximums depending on the child's age, geographic region, and provider type. See WACs 110-15-0220, 110-15-0225, 110-15-0230, and 110-15-0235.

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

d) Children who receive care during non-traditional hours. Check and describe all that apply	
Grants and contracts (as discussed in 4.1.3). Describe:	
Family child care networks. Describe:	
Start-up funding. Describe:	
Technical assistance support. Describe:	
Recruitment of providers	

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Describe:
Tiered payment rates (as discussed in 4.3.2) . Describe:
Support for improving business practices, such as management training, paid sick leave, and shared services. Describe:
☐ Accreditation supports. Describe:
Child Care Health Consultation. Describe:
Mental Health Consultation. Describe:
Describe: If a licensed provider cares for a child at least 30 hours per month between 6:00 p.m. and 6:00 a.m. the following day, and/or on weekends and holidays, the provider is eligible to receive an additionalpayment per child per month. See WAC 110-15-0249.
4.6.2 Describe what method(s) is used to increase supply and to improve quality for the following.
e) Other. Check and describe all that apply: Grants and contracts (as discussed in 4.1.3). Describe:
Family child care networks.

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	Describe:
	Start-up funding. Describe:
1	Technical assistance support. Describe: DCYF provides extensive technical assistance support through its Early Achievers program. Early Achievers coaches assist providers in preparation for Early Achievers rating, and in instances where the provider operates in an underserved area, can tailor their support to the provider's specific needs. DCYF licensors provide further technical assistance toward compliance with health and safety requirements.
	Recruitment of providers. Describe:
	Tiered payment rates (as discussed in 4.3.2). Describe: Licensed providers may participate in the state's QRIS, Early Achievers. A provider's additional rate depends on their level rating (on a scale of 1 through 5) and is a percentage bonus calculated on the base rate. For licensed centers, that additional rate is as follows: Level 2=2%, Level 3=8%, Level 4=15%, and Level 5=20%. For licensed family homes, the addition rate is as follows: Level 2=2%, level 3=12%, level 4=17%, and level 5=20%. These additional payment rates can assist providers to overcome financial barriers to operating a business in underserved areas.
	Support for improving business practices, such as management training, paid sick leave, and shared services. Describe:
	Accreditation supports.

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Describe:	
Child Care Health Consultation Describe:	•
Mental Health Consultation. Describe:	
Other. Describe:	

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

Effective Date: 07/01/2019

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment?

RCW 43.216.010(16) defines "Low-income neighborhood" to mean a district or community where more than twenty percent of households are below the federal poverty level.

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 DCYF differentiates rates based on region/sub-region and child age including infants, toddlers, preschool, and school age, with a goal of achieving subsidy rates at the 75th percentile. Washington also allows twelve-month certification periods for families, even when an approved activity ends. This allows for the continued use of care for families who are experiencing unemployment. The Early Achievers program provides coaching, professional development, and resources for providers who serve low-income families. We supplement our base subsidy rates with Tiered Reimbursement for providers

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participating in Early Achievers. This provides higher rates to support quality to areas with increased poverty and unemployment. Early Achievers is designed for providers who care for non-school age children. The department also offers scholarships to providers caring for school age children to participate in quality improvement workshops and trainings.

Further, each year, DCYF prepares the ECEAP and Head Start Saturation Study to analyze access to ECEAP and Head Start programs serving 3-year-olds and 4-year-olds. The study incorporates data on families with children accessing free lunch in schools to capture areas with significant concentrations of poverty. The 2017 study data was part of the information used to determine appropriate locations for 1,000 new ECEAP slots for the 2018-2019 school year. Current or potential ECEAP Contractors can also use this data to inform decisions to apply for ECEAP slots or move existing ECEAP slots.

The 2015 Early Start Act also created an Early Achievers Joint Select Committee, tasked with duties described under RCW 43.216.0851(2). These include completing a report by December 1, 2018 "review[ing] the demand and availability of licensed or certified child care family homes and centers, approved early childhood education and assistance programs, head start programs, and family, friend, and neighbor caregivers by geographic region, including rural and low-income neighborhoods" and making recommendations to the Legislature on the need to target funds based on the report. DCYF actively participated in all meetings of the committee toward completion of the report.

Finally, DCYF applies an equity lens to developing programs, services and system building. See https://www.dcyf.wa.gov/practice/racial-equity-diversity-inclusion. The collection and analysis of data provides the basis for identifying, and prioritizing access to, high quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment. Recognizing that current data indicates disparate outcomes for children along economic and racial lines, DCYF also uses the Washington Racial Equity Theory of Change as a frame for this work: https://thrivewa.org/work/racial-equity-2/

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

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

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

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

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

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

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5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

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

Effective Date: 08/01/2019

Center-based child care.

Describe and Provide the citation:

WAC 110-300-0010 requires that and individual or entity that provides care and early learning services for children must be licensed unless specifically exempt under RCW 43.216.010(2) and WAC 110-300-0025.

Family child care.

Describe and Provide the citation:

WAC 110-300-0010 requires that and individual or entity that provides care and early learning services for children must be licensed unless specifically exempt under RCW 43.216.010(2) and WAC 110-300-0025.

In-home care (care in the child's own home).

Describe and provide the citation (if applicable):

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5.1.2 Describe if any providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)).

Effective Date: 03/1/2021

Note: Additional information about exemptions related to CCDF providers is required in 5.1.3. Certified Centers on Triballand are license exempt. Exemption does not endanger the health, safety, and development of children because these programs must meet the same requirements as licensed programs in order to receive state CCDF, and are monitored to those standards, the only distinction between them and their licensed counterparts being that DCYF lacks jurisdiction to license them. Certified for Payment Only Centers on Tribal land are also exempt but must meet minimum CCDF requirements per their CCDF plan as to health, safety, and development. Tribes that are Certified for Payment Only must provide DCYF documentation of their compliance with CCDF requirements for Tribal grantees, such as their CCDF Plan, in order receive DCYF certification. Military programs must follow the standards set by the Department of Defense, which exceed CCDF requirements. Thanks to these requirements, the exemptions identified above do not endager the health, safety, or development of children.

Certified Family Homes on Tribal land are license exempt must meet the same requirements as licensed programs in order to receive state CCDF and are monitored to those standards, the only distinction between them and their licensed counterparts being that DCYF lacks jurisdiction to license them. Certified for Payment Only Family Homes on Tribal land must meet minimum CCDF requirements per the Tribe's CCDF plan as to health, safety, and development. Tribes that are Certified for Payment Only must provide DCYF documentation of their compliance with CCDF requirements for Tribal grantees, such as their CCDF Plan, in order receive DCYF certification.

Family, Friends, and Neighbors (FFN) providers are also license exempt. Non-relative FFN providers must receive a background check, complete health and safety training, and receive yearly monitoring, so their license exempt status does not endanger child health and safety and development. While relative FFN providers are not subject to health and safety training and monitoring requirements, DCYF elected to make them subject to background check

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despite CCDF rules allowing them to be exempt from the requirement in order to promote child health and safety and development.

Outdoor preschools currently operating in Washington state are license-exempt, pursuant to RCW 43.216.010(2)(e), because none enroll a child for more than four hours per day on a regular basis. However, the Washington state legislature mandated DCYF to conduct a pilot project to study licensing these programs. The pilot project will run from August, 2017, through June, 2021. Exempting outdoor preschools from licensing does not endanger the health, safety, or development of children because DCYF developed an alternative but largely similar set of rules and standards for the pilot project participants to protect children's health, safety, and development. First, DCYF promulgated administrative code (WAC) for this pilot project, one rule of which specifically requires participants to comply with applicable CCDF rules (45 CFR part 98). Second, DCYF drafted a guidance document, the "Touchstone Standards," which details specific rules each outdoor preschool must comply with to participate in the pilot project. The Touchstone Standards are also incorporated into the WAC by reference. Third, DCYF requires each pilot project participant to sign an annual participation agreement, within which the participant agrees to follow the Touchstone Standards as well as all applicable CCDF requirements concerning health, safety, and development. Lastly, DCYF monitors each outdoor preschool program for compliance with the promulgated WAC, the Touchstone Standards, and the participation agreement. Monitoring visits are conducted no less than once each fiscal year (Jul 1 through June 30, yearly). Programs that fail to comply with any of these rules or standards must take corrective action, will have their access to state subsidies revoked, or will have their participation in the pilot project cancelled outright.

Emergency Temporary Change: DCYF submitted a letter requesting waiver from the health and safety monitoring requirements for providers who meet the state's definition of a Seasonal Camp as described in emergency licensing rules, WAC 110-310-0005(7). The waiver was approved. The waiver and a temporary change whereby monitoring is not required for these providers are effective February 29, 2020 through September 30, 2021. The state will maintain a baseline of health and safety for these providers by providing health and safety training, and, if such provider receives state subsidy, by prescribing health and safety standards in subsidy contracts for these providers.

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

Effective Date: 10/16/2020

Center-based child care.

If checked, describe the exemptions.

Exempt federally recognized Tribal providers can request to become Certified or to be certified for Payment Only from DCYF. To become Certified, the Tribal Nation must meet the same minimum standards as a licensed program in the State of Washington on their Tribal land, but because DCYF lacks jurisdiction to license programs on Tribal land, the program receives certification instead of a license. To become certified for Payment only, the Tribe must establish its own rules and standards that meet CCDF requirements, and must provide DCYF documentation of those standards and a letter from their tribal chair requesting certification for Payment Only. Once DCYF reviews the Tribe's standards and accepts them as meeting basic health and safety standards, DCYF will issue a Payment Only certification.

Military providers follow the rules of the Department of Defense. Once DCYF receives documentation from the identified military provider, DCYF will issue a Payment Only certification for each provider.

Additionally, outdoor, nature-based early learning and child care programs ("outdoor preschools") are exempt from DCYF child care licensing rules, pursuant to RCW 43.216.010. This exemption is because no outdoor preschool operates for more than four hours per day. However, outdoor preschools participating in the pilot project, including those that receive assistance under 45 CFR part 98, are required to comply with health and safety rules contained in the pilot's Touchstone Standards. There are currently no references to outdoor preschool programs within the department's rules (title 110 WAC) because those programs are operating under a pilot program as mandated by the legislature in RCW 43.216.740.

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Emergency Temporary Change: DCYF submitted a letter requesting waiver from the health and safety monitoring requirements for providers who meet the state's definition of a Seasonal Camp as described in emergency licensing rules, WAC 110-310-0005. The waiver was approved. The waiver and a temporary change whereby monitoring is not required are effective February 29, 2020 through Septemer 30, 2021. The state will maintain a baseline of health and safety for these providers by providing health and safety training, and, if such provider receives state subsidy, but prescribing health and safety standards in subsidy contracts for these providers.

Family child care.

If checked, describe the exemptions.

Family Home child care programs on Tribal land are exempt from licensing but may be Certified or certified for Payment Only in the same manner as their Center counterparts.

License exempt FFN rules limit payment for this form of care to no more than 6 children at one time per care location. If the provider is a not a relative of the subsidized child, care must be provided in the child's home and the provider must complete a background check, complete health and safety training provided by DCYF, and receive health and afety monitoring visits at least once annually.

✓ In-home care.

If checked, describe the exemptions.

FFN rules limit payment for this form of care to no more than 6 children at one time per care location. Non-relative FFN providers are subject to background check, health and safety training, and annual health and safety monitoring requirements. If the FFN provider is a relative of the child, care can be provided in either's home and the provider must complete a background check. DCYF does not require relative providers to complete health and safety training or to receive health and safety monitoring visits.

Emergency Temporary Change: DCYF submitted a letter requesting waiver from the rule prohibiting adult sibilings living with the child from being defined as eligible to receive subsidy payments, thereby temporarily expanding the definition of a relative provider to include siblings over the age of 18 living in the same residence as the child so they can qualify as Family, Friends, and Neighbors (FFN) providers. The waiver was approved

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effective October 16, 2020 through September 30, 2021.

5.2 Health and Safety Standards and Requirements for CCDF Providers

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

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

Effective Date: 1/21/2021

a) Licensed CCDF center-based care

1. Infant

-- How does the State/territory define infant (age range):

DCYF defines "infant" asbirth through age 11 months.

-- Ratio:

DCYF'slimits the provider to infant ratio at 1:4.

-- Group size:

DCYF limits infant group size to 8 children.

-- Teacher/caregiver qualifications:

Lead teachers must be 18 years of age, have a high school diploma or equivalent, and have documented child development education/experience or the 30-hour state required basic training. Lead teachers must also earn an ECE Initial Certificate or equivalentwithin 5 years of beginning work, and a further ECE short certificate within two years after that. Assistant teachers must be 18 years of age

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and must also earn an ECE Initial Certificate or equivalent within 5 years of beginning work. All staff must have background clearance, a negative tuberculosis test, Bloodborne Pathogens training, and pediatric CPR/First Aid training if responsible for a group of children.

Effective January 21, 2021, DCYF allows providers who were working in early learning programs on August 1, 2019 when aligned standards took effect until August 1, 2026 to complete education requirements or equivalencies.

2. Toddler

-- How does the State/territory define toddler (age range):

DCYF defines "toddler" as a childage 12 months through 29 months.

-- Ratio:

DCYF limits the provider to toddlers ratioat 1:7.

-- Group size:

DCYF limitstoddler group size to 14.

-- Teacher/caregiver qualifications:

Lead teachers must be 18 years of age, have a high school diploma or equivalent, and have documented child development education/experience or the 30-hour state required basic training. Lead teachers must also earn an ECE Initial Certificate or equivalentwithin 5 years of beginning work, and a further ECE short certificate within two years after that. Assistant teachers must be 18 years of age and must also earn an ECE Initial Certificate or equivalent within 5 years of beginning work. All staff must have background clearance, a negative tuberculosis test, Bloodborne Pathogens training, and pediatric CPR/First Aid training if responsible for a group of children.

Effective January 21, 2021, DCYF allows providers who were working in early

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learning programs on August 1, 2019 when aligned standards took effect until August 1, 2026 to complete education requirements or equivalencies.

3. Preschool

-- How does the State/territory define preschool (age range):

DCYF defines "preschool" age as 30 months through 6 years of age and not attending kindergarten or elementary school.

-- Ratio:

DCYF limits the provider to preschool age child ratio at 1:10.

-- Group size:

DCYF limits groups size for preschool age children to 20.

-- Teacher/caregiver qualifications:

Lead teachers must be 18 years of age, have a high school diploma or equivalent, and have documented child development education/experience or the 30-hour state required basic training. Lead teachers must also earn an ECE Initial Certificate or equivalentwithin 5 years of beginning work, and a further ECE short certificate within two years after that. Assistant teachers must be 18 years of age and must also earn an ECE Initial Certificate or equivalent within 5 years of beginning work. All staff must have background clearance, a negative tuberculosis test, Bloodborne Pathogens training, and pediatric CPR/First Aid training if responsible for a group of children.

Effective January 21, 2021, DCYF allows providers who were working in early learning programs on August 1, 2019 when aligned standards took effect until August 1, 2026 to complete education requirements or equivalencies.

4. School-age

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-- How does the State/territory define school-age (age range):

DCYF defines "school-age" as not less than age 5 years through 12 years and attending kindergarten or elementary school

-- Ratio:

DCYF limits the provider to school-age child ratio at 1:15.

-- Group size:

DCYF limits group size for school-age children at 30.

-- Teacher/caregiver qualifications:

Lead teachers must be 18 years of age, have a high school diploma or equivalent, and have documented child development education/experience or the 30-hour state required basic training. Lead teachers must also earn an ECE Initial Certificate or equivalentwithin 5 years of beginning work, and a further ECE short certificate within two years after that. Assistant teachers must be 18 years of age and must also earn an ECE Initial Certificate or equivalent within 5 years of beginning work. All staff must have background clearance, a negative tuberculosis test, Bloodborne Pathogens training, and pediatric CPR/First Aid training if responsible for a group of children.

Effective January 21, 2021, DCYF allows providers who were working in early learning programs on August 1, 2019 when aligned standards took effect until August 1, 2026 to complete education requirements or equivalencies.

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers

Outdoor, nature-based early learning and child care programs ("outdoor preschools") are exempt from licensing, pursuant to RCW 43.216.010(2) but operate most similarly to center-based child care. Outdoor preschools participating in the pilot project comply with the following standards: Outdoor preschools define "school age" as children 30 months through 6 years of age and not attending kindergarten or elementary school. Outdoor preschools have a maximum ratio of 1:6 or smaller, e.g. 1:1 when using camp stoves or engaging with campfires. The maximum group size for outdoor preschools is

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16 children. Outdoor preschool Lead Teachers are required to meet the qualifications listed above plus education and training in environmental education, which may include wilderness skills or nature-based early education.

Programs on Tribal land that are Certified for Payment Only are not subject to group size or ratio requirements and instead follow their processes documented in their CCDF Plans. Programs within Military jurisdictions follow requirements as specified by the Department of Defense.

6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups.

Under WAC 110-300-0356, "[a] center licensee may combine children of different age groups for periods of no more than the first two hours of the day or the last two hours of the day, not to exceed two hours in any given day, provided the staff-to-child ratio and group size designated for the youngest child in the mixed group are maintained."

Further, under WAC 110-300-0357, center providers may mix age groups of children in care if they meet specific requirements and inform DCYF of their mixed age group policy. The WAC then specifies group size and ratio requirements for different mixed age groups as follows:

- "(2) A center early learning program must do the following to mix groups of children birth to thirty-six months old with a maximum group size of eight children:
- (a) Have at least two staff present with the group, consisting of one lead teacher and one other staff member qualified under this chapter; and
- (b) Keep a staff-to-child ratio of 1:4.
- (3) A center early learning program must do the following to mix groups of children birth to thirty-six months old with a maximum group size of nine children:
- (a) Have at least three staff present with the group, consisting of one lead teacher and two other staff members qualified under this chapter; and
- (b) Keep a staff-to-child ratio of 1:3.
- (4) A center early learning program must do the following to mix groups of children twelve to thirty-six months old:
- (a) Have at least two staff present with the group, consisting of one lead teacher and

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one other staff member qualified under this chapter; and

- (b) Keep a staff-to-child ratio of 1:7 with a maximum group size of fourteen children.
- (5) A center early learning program must do the following to mix groups of children twelve to thirty-six months old:
- (a) Have at least three staff present with the group, consisting of one lead teacher and two other staff members qualified under this chapter; and
- (b) Keep a staff-to-child ratio of 1:5 with a maximum group size of fifteen children.
- (6) A center early learning program must do the following to mix groups of children between thirty-six months old through kindergarten with a maximum group size of twenty children:
- (a) Have at least two staff present with the group, consisting of one lead teacher and one other staff member qualified under this chapter; and
- (b) Keep a staff-to-child ratio of 1:10.
- (7) A center early learning program must do the following to mix groups of children between thirty-six months old through kindergarten with a maximum group size of twenty-six children:
- (a) Have at least three staff present with the group, consisting of one lead teacher and two other staff members qualified under this chapter; and
- (b) Keep a staff-to-child ratio of 1:10.
- (8) A center early learning program must do the following to mix groups of children four and one-half to nine years old with a maximum group size of twenty children:
- (a) Have at least two staff present with the group, consisting of one lead teacher and one other staff member qualified under this chapter; and
- (b) Keep a staff-to-child ratio of 1:10.
- (9) A center early learning program must do the following to mix groups of children four and one-half to nine years old with a maximum group size of twenty-six children:
- (a) Have at least three staff present with the group, consisting of one lead teacher and two other staff members qualified under this chapter; and
- (b) Keep a staff-to-child ratio of 1:10."

7. Describe the director qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care.

Directors must be 18 years of age andthose working at the time Chapter 110-300 WAC became effective, August 1, 2019, must complete an ECE state certificate or equivalent within five years of that date. Directors hired or promoted after this date

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must have an ECE state certificate or equivalent at the time of hire. Directos must also have two years of experience as a teacher of children in any age group enrolled in their program and at least six months experience in administration or management, or have a DCYF-approved plan addressing the issue. Directors must take 30 hour state required basic training with 10 hours continuing each year thereafter.

Effective January 21, 2021, DCYF allows providers who were working in early learning programs on August 1, 2019 when aligned standards took effect until August 1, 2026 to complete education requirements or equivalencies.

b) Licensed CCDF family child care provider

1. Infant

-- How does the State/territory define infant (age range):

Birth through 11 months

-- Ratio:

1:2 if the provider is alone and up to 1:4 with a qualified assistant

-- Group size:

Group size varies depending on the ages of children in care. Group size 6 if there are two children under the age of two. Maximum group size of 12 with four children under the age of two with a qualified assistant.

-- Teacher/caregiver qualifications:

Family child care licensees must be 18 years of age, have a high school diploma or equivalent, have documented child development education/experience or the 30-hour state required basic training, have an ECE initial certificate within five years of the effective date, August 1, 2019, of Chapter 110-300 WAC, and must complete an ECE short certificate within two years after that. See WAC 110-300 for further information.

Lead teachers must be 18 years of age, have a high school diploma or equivalent,

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and have documented child development education/experience or the 30-hour state required basic training. Lead teachers must also earn an ECE Initial Certificate or equivalent within 5 years of beginning work, and a further ECE short certificate within two years after that. Assistant teachers must be 18 years of age and must also earn an ECE Initial Certificate or equivalent within 5 years of beginning work.

All staff must have background clearance, a negative tuberculosis test, Bloodborne Pathogens training, and pediatric CPR/First Aid training if responsible for a group of children.

2. Toddler

-- How does the State/territory define toddler (age range):

12 months through 30 months

-- Ratio:

1:4 if provider is alone and up to 1:8 with a qualified assistant.

-- Group size:

Mixed group size of various ages over 12 months. If provider is alone, there can be 8 toddlers, with a qualified assistant there can be 12.

-- Teacher/caregiver qualifications:

Family child care licensees must be 18 years of age, have a high school diploma or equivalent, have documented child development education/experience or the 30-hour state required basic training, have an ECE initial certificate within five years of the effective date, August 1, 2019, of Chapter 110-300 WAC, and must complete an ECE short certificate within two years after that. See WAC 110-300 for further information.

Lead teachers must be 18 years of age, have a high school diploma or equivalent, and have documented child development education/experience or the 30-hour state required basic training. Lead teachers must also earn an ECE Initial

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Certificate or equivalent within 5 years of beginning work, and a further ECE short certificate within two years after that. Assistant teachers must be 18 years of age and must also earn an ECE Initial Certificate or equivalent within 5 years of beginning work.

All staff must have background clearance, a negative tuberculosis test, Bloodborne Pathogens training, and pediatric CPR/First Aid training if responsible for a group of children.

3. Preschool

-- How does the State/territory define preschool (age range):

30 months through 6 years of age and not attending kindergarten or elementary school

-- Ratio:

1:10 if the provider is alone and 1:12 with a qualified assistant

-- Group size:

10 if the provider is alone and 12 with a qualified assistant.

-- Teacher/caregiver qualifications:

Family child care licensees must be 18 years of age, have a high school diploma or equivalent, have documented child development education/experience or the 30-hour state required basic training, have an ECE initial certificate within five years of the effective date, August 1, 2019, of Chapter 110-300 WAC, and must complete an ECE short certificate within two years after that. See WAC 110-300 for further information.

Lead teachers must be 18 years of age, have a high school diploma or equivalent, and have documented child development education/experience or the 30-hour state required basic training. Lead teachers must also earn an ECE Initial Certificate or equivalent within 5 years of beginning work, and a further ECE short

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certificate within two years after that. Assistant teachers must be 18 years of age and must also earn an ECE Initial Certificate or equivalent within 5 years of beginning work.

All staff must have background clearance, a negative tuberculosis test, Bloodborne Pathogens training, and pediatric CPR/First Aid training if responsible for a group of children.

4. School-age

-- How does the State/territory define school-age (age range):

5 years through 12 years and attending kindergarten or elementary school

-- Ratio:

For providers serving only school age children, maximum ratio is 1:12. For providers serving mixed age groups, including school age children, ratio depends on the age mix, up to a maximum ratio 1:10 if the group includes only school age and preschool age children.

-- Group size:

For providers serving only school age children, maximumgroup size is 12. For providers serving mixed age groups, including school age children, group size depends on the age mix, up to a maximum group size of 10 if the group includes only school age and preschool age children.

-- Teacher/caregiver qualifications:

Family child care licensees must be 18 years of age, have a high school diploma or equivalent, have documented child development education/experience or the 30-hour state required basic training, have an ECE initial certificate within five years of the effective date, August 1, 2019, of Chapter 110-300 WAC, and must complete an ECE short certificate within two years after that. See WAC 110-300 for further information.

Lead teachers must be 18 years of age, have a high school diploma or equivalent,

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and have documented child development education/experience or the 30-hour state required basic training. Lead teachers must also earn an ECE Initial Certificate or equivalent within 5 years of beginning work, and a further ECE short certificate within two years after that. Assistant teachers must be 18 years of age and must also earn an ECE Initial Certificate or equivalent within 5 years of beginning work.

All staff must have background clearance, a negative tuberculosis test, Bloodborne Pathogens training, and pediatric CPR/First Aid training if responsible for a group of children.

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

Programs on Tribal land that are Certified for Payment Only are not subject to group size or ratio requirements and instead follow their processes documented in their CCDF Plans. Programs within Military jurisdictions follow requirements as specified by the Department of Defense. License exempt FFN providers are prohibited from receiving subsidy payment for more than 6 children at any one time, but are otherwise not subject to group size or ratio requirements.

c) In-home CCDF providers:

1. Describe the ratios

WAC 110-16-0015 limits nonrelative FFN providers from caring for more than six children, including their own children, at any one time. Further, these providers can only receive subsidy payment for up to six children at any one time.

2. Describe the group size

WAC 110-16-0015 limits nonrelative FFN providers from caring for more than six children, including their own children, at any one time. Further, these providers can only receive subsidy payment for up to six children at any one time.

3. Describe the maximum number of children that are allowed in the home at any one time.

WAC 110-16-0015 limits nonrelative FFN providers from caring for more than six

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children, including their own children, at any one time. Further, these providers can only receive subsidy payment for up to six children at any one time.

4. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size

Nonrelative FFN providers can only receive subsidy payment for up to six children at any one time, but related children are not counted for purposes of any ratio or group size limits.

5. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day

WAC 110-16-0015 limits nonrelative FFN providers from caring for more than six children, including their own children, at any one time. Further, these providers can only receive subsidy payment for up to six children at any one time. This requirement is neutral as to child age.

5.2 Health and Safety Standards and Requirements for CCDF Providers

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)).

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

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- 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.)

DCYF requires both staff and enrolled children to be immunized against contagious diseases. Immunization forms (Certificate of Immunization Status) are required for all enrolled children in licensed facilities, although a provider can accept a child into their care who has a DOH-approved exemption. Specifically, the department requires testing for providers in both center and family home child care to be tested for tuberculosis and undergo treatment if needed. Providers are required to show proof of such testing and treatment. Both provider types are also required to have a plan in place to safely manage bloodborne pathogens. Center providers are required to comply with the applicable Washington Industrial Safety and Health Act as well as the state department of labor and industries' safety and health regulations. Family Home providers must have procedures for protecting staff and children from, and cleaning up, bodily fluids that includes the use of gloves, disinfection, and proper disposal.DCYF requires handwashing procedures to eliminate the contraction or spread of germs and parasites. DCYF also requires center child care providers to provide individual storage space for children's belongings to prevent the spread of disease, germs, or parasites through comingling. Additionally, all child care facilities must have a health plan approved by a medical professional that addresses what infectious and contagious diseases are and details processes to prevent infectious and contagious diseases. These plans also required providers to communicate with the parents or guardians of enrolled children and the local health department. Family home providers are even required to have immunization records for pets or animals that have contact with children enrolled in care.

License exempt non-relative FFN providers must comply with handwashing processes described in WAC and encourage and assist children to follow these same procedures. Providers must, at their annual inspection, show proof of vaccination or acquired immunity to vaccine-preventable diseases for all children in care.

-- List all citations for these requirements, including those for licensed and licenseexempt programs

For licensed providers, see WAC 110-300-005, -0120,-0210, -0460, and -0500. For

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license exempt FFN providers, see WAC 110-16-0030.

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

When FFN care is provided in the child's home by an adult unrelated to the children and there are no other unrelated children on the premises, there is no requirement for proof of child immunizations. If, however, the unrelated provider has his or her own children on the premises, then the provider must show proof of current immunizations. The parent and provider must complete, sign and return to DCYF an in-home Health and Safety Agreement. The agreement recaps safe practices related to the control and prevention of infectious diseases.

- -- Describe any variations based on the age of the children in care NA
- -- Describe if relatives are exempt from this requirement
 Relative in-home providers (FFNs) are exempt from these 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.)

DCYF requires both center and family home providers to keep records on file of staff and volunteers who completed infant safe sleep training. Center providers are required to have health policies in place that detail how the provider ensures its staff follows safe sleep practices. DCYF requires family home providers to include information about safe sleep practices in the parent/guardian handbook of all providers who care for infants.

For license exempt FFN providers, the standard requires providers to follow American Academy of Pediatrics standards concerning safe sleep, including, but not limited to, talking with parents about use of appropriate safe sleep equipment, actively supervising infants or toddlers when they sleep or are waking up, placing infants or toddlers on their backs for sleep, not using sleep positioning devices, using sufficient lighting while infants or toddlers sleep to observe skin color, monitoring breathing

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patterns, allowing infants or toddlers to follow their own sleep patterns, not allowing blankets and other items in occupied cribs, not allowing blankets or other items to drape over an occupied crib, not allowing bedding or clothing to cover an infant or toddler's head while they sleep, etc.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, see WAC 110-300-0106, -0110, -0270, -0291, -0450, and -0505. For license exempt FFN providers, see WAC 110-16-0035.

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

 NA
- -- Describe any variations based on the age of the children in care
 Safe sleep rules apply to defined ages of infants per the relevant WAC.
- -- Describe if relatives are exempt from this requirement
 Relative in-home providers (FFNs) are exempt from these requirements.
- 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.)

DCYF has requirements around medication storage, labeling, administration, and permissions for both center and family home providers. This includes getting the written consent of a child's health care provider and parent or guardian before administering prescription or over-the-counter medicines; directions on storing medicine in places that are not accessible to children and at appropriate temperatures; only allowing specific staff members to administer medication to children; when a child may be in charge of taking their own medicine; guideline for administering medicine to children and how to record when medicine was given; informing parents when and what medicines were given to their children; how medicines are to be labeled; and how to respond in case of emergency (i.e. if a child is incorrectly not given medicine, is given the wrong medicine, or is given the wrong amount of medicine).

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For license exempt non-relative FFN providers, the provider must receive training from the parent or appointed designee for special medical procedures, and the provider must have written and signed consent from the parent to administer medication. Providers must administer medication according to the medication label using cleaned and sanitized medication measuring devices. Providers must give prescription medication only to the child named on the prescription. If a child is authorized by the parent, the provider may allow children to take their own medication, but the provider must observe and document. Providers are required to keep and maintain medication notes, and must store medication as directed on medication labels and inaccessible to children.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, see WAC 110-300-0106, -0110, -0130, -0186, -0200, -0215, -0225, -0285, -0300, -0460, -0470, -0475, -0480, and -0500. For license exempt FFN providers see WAC 110-16-0035.

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

At the annual monitoring visit the provider must show written permission from the parent to administer medication and for treatment of illnesses and allergies of the children in care. The parent must ensure the provider has the necessary medication, training, and equipment to properly manage a child's illness and prevent and respond to emergencies due to food and allergic reactions.

- -- Describe any variations based on the age of the children in care NA
- -- Describe if relatives are exempt from this requirement Relative FFN providers are exempt from these requirements.
- 4. Prevention of and response to emergencies due to food and allergic reactions

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-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

DCYF requires both center and family home providers to develop and communicate plans to prepare for and respond to emergencies due to food and allergic reactions. Providers are required to get written directions from a child's health care provider and parent or guardian if that child has a food allergy or special dietary requirements. These directions must be in the child's Individual Care Plan. Additionally, center providers are required to receive instructions on proper nutrition in a child's individual health plan, post the food allergies of enrolled children where food is prepared and served, and notify staff of each child's food allergy and the potential reaction. Centers must keep special equipment, plans, and instructions on hand in case of a food allergy, either in the child's file or in an easily accessible location at the time of emergency. Family Home providers are also required to carry each child's emergency medicine and a list of each child's allergies when traveling off-site.

License exempt FFN providers are required to have parents inform them of any known food allergies of children in care, steps to take to avoid the allergens, specific symptoms that indicate the need for treatment, and how to respond to allergic reactions. They must have written approval from an enrolled child's parent or guardian to administer medication for allergies, and this written permission must be inspected by the department at least annually. This agreement must include an attestation from the parent or guardian that the license exempt FFN provider has all necessary medication, training, and equipment to respond to emergencies caused by food allergies.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, WAC 110-300-0005, -0110, -0186, -0241, -0300, -0500, -0505. WAC110-16-0030 for license exempt FFN providers.

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

In the case of non-relative FFN providers in the child's home, at the annual monitoring visit the provider must show written permission from the parent to administer medication and for treatment of illnesses and allergies of the children in care. The

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parent must ensure the provider has the necessary medication, training, and equipment to properly manage a child's illness and prevent and respond to emergencies due to food and allergic reactions.

- -- Describe any variations based on the age of the children in care NA
- -- Describe if relatives are exempt from this requirement
 Relative FFN providers are exempt from these requirements.
- 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.)

DCYF requires both center and licensed family home providers to maintain the safety of child care buildings and premises through proper construction or remodeling and regular inspections. DCYF requires center providers to have a certificate of occupancy from the local building department, be inspected by the state fire marshal's office, and notify other local and state offices of their intent to operate a child care center and comply with local ordinances. Additionally, center providers must maintain a safe environment by identifying areas or objects that present dangers such as burns, drowning, choking, cuts, entrapment, falls, firearms, hearing loss, falling objects, pinching, poisons, punctures, crushing, electric shock, and tripping. Providers are required to eliminate or make inaccessible such hazards.

License exempt FFN providers must follow a list of rules to promote building and physical premises safety. This includes proper handling and storage of hazardous materials, identifying and protecting children from potential hazards including bodies of water and vehicle traffic. These providers must visually inspect all child care areas for potentially hazardous items and circumstances. When a hazard is identified, providers are required to either correct any hazard or make the potentially hazardous item or area inaccessible to children. Additionally, providers are required to actively supervise children to prevent harm. Supervision is particularly critical if the child care area has

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tobacco products and their storage containers; any sort of weaponry; any equipment, material, or object that poses a risk of choking or strangulation; poisons, toxins, or chemicals; personal grooming products; alcohol; plastic bags; items or equipment that reaches a high heat; equipment and appliances that pose a threat of entrapment; walking areas that present a tripping hazard; large objects that pose a threat of tipping or falling over that could injure children; indoor temperature ranges; windows or openings that pose a risk of falling out of; and electrical components that pose a risk of shock or electrocution.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, WAC 110-300-0130, -0135, -0145, -0146, -0147, -0148, -0165, -0170, -0175, -0220, -0402, -0415. WAC 110-16-0035 for license exempt FFN providers.

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

Non-relative FFN providers must visually scan indoor and outdoor areas to identify potential child safety hazards and discuss, with the parent, removal or easing of that hazard. When it is not possible for the provider to immediately correct or make a hazard completely inaccessible to a child, the provider must take action and actively supervise the child to avoid injury.

- -- Describe any variations based on the age of the children in care NA
- -- Describe if relatives are exempt from this requirement Relative FFN providers are exempt from these requirements.
- 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.)

DCYF requires center and licensed family home providers to prohibit anyone from shaking or abusing children in care. The department also requires providers to report

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alleged or suspected child abuse to both DCYF and local authorities.

License exempt FFN providers are required to engage in health and safety activity practices including recognition and reporting of child abse and neglect and to comply with mandatory reporting requirements. Further, these providers are required to use their knowledge of each child's development and behavior to anticipate what may occur to prevent unsafe or unhealthy events or conduct, or to intervene in such circumstances as soon as possible.

Staff members of outdoor preschools participating in the state's pilot project are required to protect children by reporting to law enforcement or the department any time they have reasonable cause to believe a child has suffered abuse or neglect.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, see WAC 110-300-0005, -0331,-0425, -0450, and -0475. See WAC 110-16-0035 for license exempt FFN providers.

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

NA

- -- Describe any variations based on the age of the children in care NA
- -- Describe if relatives are exempt from this requirement Relative FFN providers are exempt from these requirements.
- 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;

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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.)

DCYF has a State Emergency Preparedness plan for natural disasters. Additionally, DCYF requires center and licensed family home providers to have emergency preparedness plans and supplies in the event of fire, natural disasters, or other emergency situations. These plans require providers to contact services for emergency help, have adequate staffing in case of emergency as well as food and supplies on hand at the child care facility and in vehicles in case of emergency. Providers are also required to practice and record emergency drills. Lastly, providers are required to have critical information in each child's file in case of emergency.

License exempt FFN providers must hold scheduled inspections of the child care facilities at least annually, and have an annual meeting with department inspectors. At the meeting, the provider must show to the inspector written instructions for disaster preparedness and evacuation of the home. Providers must also comply with several emergency preparedness and response planning requirements including visually scanning all child care areas to identify potential fire hazards; discussing with the children's parent or guardian how to eliminate fire hazards; actively supervising children to prevent harm from fire; draft a home evacuation plan that is agreed to by the children's parent or guardian; having supplies available in case of emergency such as a first aid kit, a working flashlight with extra batteries, a working telephone, and a three day supply of food, water, and medications for children. Lastly, providers are required to practice home evacuation drills with children.

Regarding the outdoor preschool program, DCYF requires all providers to have emergency preparedness plans and supplies in the event of fire, natural disasters, or other emergency situations. Additionally, outdoor preschool programs are required to have emergency preparedness plans for extreme weather events. Emergency preparedness plans require providers to contact services for emergency help, have adequate staffing in case of emergency as well as food and supplies on hand at the child care facility and in vehicles in case of emergency. Outdoor preschool programs must have emergency supplies in the vehicles of staff members or at an emergency shelter location. Providers must have critical information in each child's file in case of

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emergency. Outdoor preschools are required to have each child's emergency contact and health information either on their person or in the staff person's vehicle during the day. All child care providers are required to practice and record emergency drills.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, see WAC 110-300-0005, -0110, -0111, -0115, -0120, -0166, -0170, -0300, -0400, -0450, -0470, -0475, -0480, and -0505. See WAC 110-16-0030 for license exempt FFN providers.

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

In the case of non-relative FFN providers in the child's home, the provider and parent must have an agreed upon writtenemergency preparedness plan in the event of fire or an emergency/disaster. The provider must practice emergency and home evacuation drills with the children as follows: evacuation and relocation drills once every six calendar months and a lockdown/shelter-in-place drill once annually.

- -- Describe any variations based on the age of the children in care NA
- -- Describe if relatives are exempt from this requirement
 Relative FFN in-home providers are exempt from these requirements.
- 8. Handling and storage of hazardous materials and the appropriate disposal of biocontaminants
 - -- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

DCYF requires safe labeling, handling, use, storage, and disposal of all hazardous or potentially hazardous materials, including biocontaminants for centers and licensed family homes.

License exempt FFN providers are required tomake hazardous materials inaccessible to children, or, if it is not possible to do so, supervise the child to avoid injury from the

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hazard.

Outdoor preschools participating in the state's pilot project are required to follow all of the same rules as center licensed child care providers. In addition, these outdoor preschools are required to manage children's exposure to toxic or infectious agents such as animal waste, bee or other insect stings or bites, and toxic plants or fungi. Outdoor preschools must also notify parents and guardians if pesticides are applied to areas used by the program.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, see WAC 110-300-0005, -0148, -0150, -0165, -0170,-0225, -0260, and -0295. See WAC 110-16-0035 for license exempt FFN providers.

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

NA

- -- Describe any variations based on the age of the children in care NA
- Describe if relatives are exempt from this requirement
 Relative FFN providers are exempt from these requirements.
- 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.)

DCYF requires centers and licensed family homes to have appropriate licensing, registration, and current maintenance to operate a vehicle to transport children. Providers must carry proper identification, first aid and CPR supplies, and must maintain staff-to-child ratios. Providers are not allowed to smoke, vape, or engage in similar activities in a vehicle used to transport children. Additionally, providers are also required to have first aid supplies and emergency medicine and supplies in vehicles when transporting children off site.

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License exempt FFN providers are required to comply with transportation requirements if transporting children such as complying with all laws concerning child restraint and car seats, possessing a driver's license and car insurance, counting each child when entering and exiting the vehicle, and never leaving children unattended in the vehicle. Providers are also required to have written permission from an enrolled child's parent or guardian to "provide transportation for care, activities, and school when applicable."

Outdoor preschools participating in the state's pilot project are required to follow all of the same requirements as licensed center child care providers.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, see WAC 110-300-0110, -0230, -0345, -0355, -0356, -0360, -0420, -0450, -0460, and -0480. See WAC 110-16-0035 for license exempt FFN providers.

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

In the case of non-relative FFN providers in the child's home, at the annual monitoring visit the provider must show written permission from the parent to provide transportation for care, activities, and school when applicable.

- -- Describe any variations based on the age of the children in care NA
- -- Describe if relatives are exempt from this requirement Relative FFN providers are exempt from these requirements.
- 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.)

Center and licensed family home providers responsible for a group of children are

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required to have current pediatric CPR/First Aid training as to infants, children, and adults certified by the American Red Cross, American Safety and Health Institute, or another nationally recognized organization. These certifications must be kept in the record of each staff member and reviewed and approved by the department. Providers are also required to have a one-way CPR barrier or mask in a first aid kit at all times.

A license exempt FFN provider is required to show proof of current first aid and CPR certification (or letter from the instructor) at each annual scheduled inspection of the child care facilities. Providers are also required to carry a first aid kit, and these kits must contain a "CPR barrier with a one-way valve or a pediatric and adult CPR mask with a one-way valve."

Outdoor preschools participating in the state's pilot project are required to follow all of the same requirements as licensed center child care providers. In addition, outdoor preschools that operate more than 30 minutes from emergency medical care must have at least one staff person certified in wilderness first aid.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, see WAC 110-300-0106, -0230, -0300,-0470, and -0480. See WAC 110-16-0030 for license exempt FFN providers.

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

In the case of non-relative FFN providers in the child's home, the provider must show proof of the CPR/First Aid card at the annual monitoring visit

- -- Describe any variations based on the age of the children in care NA
- -- Describe if relatives are exempt from this requirement Relative FFN providers are exempt from these requirements.
- 11. Recognition and reporting of child abuse and neglect

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-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

DCYF requires center and licensed family home providers to prohibit anyone from shaking or abusing children in care. The department also requires providers to report alleged or suspected child abuse to both DCYF and local authorities. All licensed child care providers are considered mandatory reporters for child abuse and neglect. Licensed providers must also have program operations or policies about reporting abuse and neglect, and must supply policies regarding abuse and neglect to parents in the parent handbook.

License exempt FFN providers are required to engage in health and safety activity practices including recognition and reporting of child abuse and neglect.

Outdoor preschools participating in the state's pilot project are required to follow all of the same requirements as licensed child care providers.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, see WAC 110-300-0005, -0106, -0110, -0425, -0450, and 0475. See WAC 110-16-0035 for license exempt FFN providers.

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

NA

- -- Describe any variations based on the age of the children in care NA
- -- Describe if relatives are exempt from this requirement Relative FFN providers are exempt from these requirements.

b) Does the Lead Agency	include any of th	e following optiona	ıl standards?
No, if no, skip to 5.2	2.3.		

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Yes, if yes provide the information related to the optional standards addressed.

1. Nutrition

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Licensed facilities are required to meet USDA requirements for food served for all meals including breakfast, snacks, lunch, and dinner as applicable to the facility's operation.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, see WAC 110-300-0005, -0185, -0190, -0196, and-0285.

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

Non-relative FFN providers in the child's home are provided information and resources about proper child nutrition during DCYF approved training. The provider completes the training within 90 calendars days of subsidy payment begin date.

-- Describe any variations based on the age of the children in care.

NA

--Describe if relatives are exempt from this requirement

Relative FFN providers are exempt from these requirements.

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.)

Providers are required to provide outdoor play daily to meet children's developmental needsand rules require safe and developmentally appropriate equipment and space for outdoor play.

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-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, see WAC 110-300-0145, -0150,-0296, -0305, and -0331.

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

Non-relative FFN providers in the child's home are provided information and resources about the importance of access to physical activity during DCYF approved training. The provider completes the training within 90 calendars days of subsidy payment begin date.

-- Describe any variations based on the age of the children in care.

NA

--Describe if relatives are exempt from this requirement

Relative FFN providers are exempt from these requirements.

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.)

Rules for both centers and family child care homes require the provider to abide by the ADA and to have an agency- and medical provider-approved health care plan that includes caring for children with special needs. Facilities must have an individual health care plan specific to children with special needs that addresses the care needs of the the individual child.

Non-relative FFN providers are required to show written permission from the parent to provide for and accommodate the child's special needs. They are further required to encourage and facilitate children with special needs playing with other children.

-- List all citations for these requirements, including those for licensed and licenseexempt providers

For licensed providers, see WAC 110-300-0005, -0085, -0100, -0110, -0150, 0295, -0300, -0305, -0325, -0331, -0355, -0356, -0450, -0455, -0470, and -0500.

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

NA

-- Describe any variations based on the age of the children in care.

NA

-- Describe if relatives are exempt from this requirement

Relative FFN providers are exempt from these requirements.

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

Describe:

NA

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

NA

-- List all citations for these requirements, including those for licensed and licenseexempt providers

NA

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

NA

-- Describe any variations based on the age of the children in care.

NA

--Describe if relatives are exempt from this requirement

NA

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

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

Effective Date: 07/01/2020

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:

In person center orientation is required prior to opening a licensed center for directors who will be responsible for the operations of the center. The orientation includes an overview of all health and safety requirements in the licensing rules. Orientations require an average of 7 hours to complete. A 30-hours Child Care Basics training is required for directors, program supervisors, and lead teachers within the first six months of employment. Finally, providers are required to receive a 4-6 hour CPR/First Aid/Bloodborne Pathogens training preservice.

Emergency temporary change: During the COVID-19 Outbreak starting the effective date of Proclamation 20-05 on February 29, 2020 and continuing through September 30, 2021, DCYF implemented an emergency licensing program. Emergency licensing coexists with traditional licensing and includes condensed initial training covering all health and safety topics available for emergency licensed providers. Further, Child Care Basics (full initial training covering all health and safety topics and more) is expedited to online delivery at no cost to providers.

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Emergency Temporary Change: During the COVID-19 Outbreak, Licensed providers can request a Licensing waiver allowing them to take an abbreviated training (about three hours) in lieu of Child Care Basics, effective September 1, 2020. Providers can further request a waiver allowing online training in place of in-person CPR/First Aid, Bloodborne Pathogens, and Food Worker Card training, effective July 1, 2020. These options will not compromise health and safety standards because the abbreviated and online training is still required within 90 days of licensure and will cover all CCDF-required topics. DCYF will require providers using this option to complete Child Care Basics during the 2021-2022 state fiscal year, and in-person training when it becomes available again.

2. Licensed FCC homes:

Family child care applicants are required to complete an online orientation, considered phase 1, and then an in person orientation, considered phase 2. The 7-hour orientation includes an overview of all health and safety requirements in the licensing rules and is conducted with no more than 3 applicants and one licensor. A 30-hours Child Care Basics training is required for the licensee and primary assistant prior to licensure. Finally, providers are required to receive a 4-6 hour CPR/First Aid/Bloodborne pathogens training preservice.

Emergency temporary change: During the COVID-19 Outbreak starting the effective date of Proclamation 20-05 on February 29, 2020 and continuing through September 30, 2021, DCYF implemented an emergency licensing program. Emergency licensing coexists with traditional licensing and includes condensed initial training covering all health and safety topics available for emergency licensed providers. Further, Child Care Basics (full initial training covering all health and safety topics and more) is expedited to online delivery at no cost to providers.

Emergency Temporary Change: During the COVID-19 Outbreak, Licensed providers can request a Licensing waiver allowing them to take an abbreviated training (about three hours) in lieu of Child Care Basics, effective September 1, 2020. Providers can further request a waiver allowing online training in place of in-person CPR/First Aid, Bloodborne Pathogens, and Food Worker Card training, effective July 1, 2020. These options will not compromise health and safety standards because the abbreviated and

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online training is still required within 90 days of licensure and will cover all CCDF-required topics. DCYF will require providers using this option to complete Child Care Basics during the 2021-2022 state fiscal year, and in-person training when it becomes available again.

3. In-home care:

Non-relative FFN providers must complete pediatric CPR/First Aid training (4-6 hours), and training on all other health and safety topics (2-4 hours), within 90 days of their authorization begin date.

4. Variations for exempt provider settings:

Non-relative FFNs' training requirements vary from their licensed counterparts as described above. However, outdoor preschools participating in the pilot project are required to undergo all of the same pre-service and orientation trainings as licensed center child care providers that care exclusively for preschool aged children.

b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer)

Non-relative FFN providers must complete all health and safety trainings within 90 days of their authorization begin date. Outdoor preschool providers participating in the pilot project must complete pediatric CPR/First Aid training prior to being authorized to receive payment for care, and must complete training on all other health and safety topics within 90 days of their authorization begin date. Orientations for center and family child care licensing must be completed prior to being licensed. For child care centers, providers must complete the 30 hours of Child Care Basics training within 6 months of employment, and family child care providers must complete it prior to being licensed.

Emergency Temporary Change: During the COVID-19 Outbreak, Licensed providers can request a Licensing waiver allowing them to take an abbreviated training (about three hours)in lieu of Child Care Basics, effective September 1, 2020. Providers can further request a waiver allowing online training in place of in-person CPR/First Aid, Bloodborne Pathogens, and Food Worker Card training, effective July 1, 2020. These options will not compromise health and safety standards because the abbreviated and online training is still required within 90 days of licensure and will cover all CCDF-required topics. DCYF

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will require providers using this option to complete Child Care Basics during the 2021-2022 state fiscal year, and in-person training when it becomes available again.

c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served

NA

d) Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered

Child Care Basics training for licensed center and family home providers, and outdoor preschool pilot providers, is available in-person, online, and via a hybrid classroom/self-paced delivery method. Nonrelative FFN provider training is available in-person and online, with the exception. For all providers, CPR/pediatric first aid training is available only in-person or online.

Emergency Temporary Change: During the COVID-19 Outbreak, Licensed providers can request a Licensing waiver allowing them to take an abbreviated training (about three hours)in lieu of Child Care Basics, effective September 1, 2020. Providers can further request a waiver allowing online training in place of in-person CPR/First Aid, Bloodborne Pathogens, and Food Worker Card training, effective July 1, 2020. These options will not compromise health and safety standards because the abbreviated and online training is still required within 90 days of licensure and will cover all CCDF-required topics. DCYF will require providers using this option to complete Child Care Basics during the 2021-2022 state fiscal year, and in-person training when it becomes available again.

- e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).
 - Prevention and control of infectious diseases (including immunizations)
 Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0106 requireslicense applicants, center directors, assistant directors, program supervisors, lead teachers, assistant teachers, and aides to receive the 30

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hours Child Care Basics training prior to being granted a license or working unsupervised with children, or within three months of the rules' effective date (8/1/2019) if the provider was already employed or being promoted to a new role. WAC 110-300-0110 further requires providers to orient all staff to all center licensing requirements. Child Care Basics includes training on all CCDF required health and safety topics with the exception of pediatric first aid/CPR which is addressed in separate training (see below). All licensed providers receive preservice orientation referencing all licensing requirements, which address all CCDF health and safety requirements. Regarding non-relative FFN providers, WAC 110-16-0025(2) requires them to receive all trainings described in this subsection within 90 days of beginning service.

Does the state/territory require that this training topic be completed before
caregivers, teachers, and directors in licensed CCDF programs are allowed to care
for children unsupervised?
▼ Yes
□ No
Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
☐ Yes
✓ No
Describe if relatives are exempt from this requirement
Relative FFN providers are exempt from these requirements.

5.2.3e 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0106 requires license applicants, center directors, assistant directors, program supervisors, lead teachers, assistant teachers, and aides to receive the 30 hours Child Care Basics training prior to being granted a license or

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working unsupervised with children, or within three months of the rules' effective date (8/1/2019) if the provider was already employed or being promoted to a new role. WAC 110-300-0110 further requires providers to orient all staff to all center licensing requirements. Child Care Basics includes training on all CCDF required health and safety topics with the exception of pediatric first aid/CPR which is addressed in separate training (see below). All licensed providers receive preservice orientation referencing all licensing requirements, which address all CCDF health and safety requirements. Regarding non-relative FFN providers, WAC 110-16-0025(2) requires them to receive all trainings described in this subsection within 90 days of beginning service.

Does the state/territory require that this training topic be completed before
caregivers, teachers, and directors in licensed CCDF are allowed to care for
children unsupervised?
▼ Yes
No
Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed care for children unsupervised?
Yes
☑ No
Describe if relatives are exempt from this requirement
Relative FFN providers are exempt from these requirements.

5.2.3e 3. Administration of medication, consistent with standards for parental consent Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0106 requires license applicants, center directors, assistant directors, program supervisors, lead teachers, assistant teachers, and aides to receive the 30 hours Child Care Basics training prior to being granted a license or working unsupervised with children, or within three months of the rules' effective date (8/1/2019) if the provider was already employed or being promoted to a new

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role. WAC 110-300-0110 further requires providers to orient all staff to all center licensing requirements. Child Care Basics includes training on all CCDF required health and safety topics with the exception of pediatric first aid/CPR which is addressed in separate training (see below). All licensed providers receive preservice orientation referencing all licensing requirements, which address all CCDF health and safety requirements. Regarding non-relative FFN providers, WAC 110-16-0025(2) requires them to receive all trainings described in this subsection within 90 days of beginning service.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care
for children unsupervised?
✓ Yes
□ No
Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
☐ Yes
✓ No
Describe if relatives are exempt from this requirement
Relative FFN providers are exempt from these requirements.

5.2.3e 4. Prevention and response to emergencies due to food and allergic reactions Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0106 requires license applicants, center directors, assistant directors, program supervisors, lead teachers, assistant teachers, and aides to receive the 30 hours Child Care Basics training prior to being granted a license or working unsupervised with children, or within three months of the rules' effective date (8/1/2019) if the provider was already employed or being promoted to a new role. WAC 110-300-0110 further requires providers to orient all staff to all center licensing requirements. Child Care Basics includes training on all CCDF required health and safety topics with the exception of pediatric first aid/CPR which is

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addressed in separate training (see below). All licensed providers receive preservice orientation referencing all licensing requirements, which address all CCDF health and safety requirements. Regarding non-relative FFN providers, WAC 110-16-0025(2) requires them to receive all trainings described in this subsection within 90 days of beginning service.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
▼ Yes
□ No
Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
☐ Yes
☑ No
Describe if relatives are exempt from this requirement
RelativeFFN providers are exempt from these requirements.

5.2.3e 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, including citations for both licensed and license-exempt providers

WAC 110-300-0106 requires license applicants, center directors, assistant directors, program supervisors, lead teachers, assistant teachers, and aides to receive the 30 hours Child Care Basics training prior to being granted a license or working unsupervised with children, or within three months of the rules' effective date (8/1/2019) if the provider was already employed or being promoted to a new role. WAC 110-300-0110 further requires providers to orient all staff to all center licensing requirements. Child Care Basics includes training on all CCDF required health and safety topics with the exception of pediatric first aid/CPR which is

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addressed in separate training (see below). All licensed providers receive preservice orientation referencing all licensing requirements, which address all CCDF health and safety requirements. Regarding non-relative FFN providers, WAC 110-16-0025(2) requires them to receive all trainings described in this subsection within 90 days of beginning service.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to car for children unsupervised?
✓ Yes
□ No
Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
☐ Yes
☑ No
Describe if relatives are exempt from this requirement
Relative FFN providers are exempt from these requirements.

5.2.3e 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0106 requires license applicants, center directors, assistant directors, program supervisors, lead teachers, assistant teachers, and aides to receive the 30 hours Child Care Basics training prior to being granted a license or working unsupervised with children, or within three months of the rules' effective date (8/1/2019) if the provider was already employed or being promoted to a new role. WAC 110-300-0110 further requires providers to orient all staff to all center licensing requirements. Child Care Basics includes training on all CCDF required health and safety topics with the exception of pediatric first aid/CPR which is

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addressed in separate training (see below). All licensed providers receive preservice orientation referencing all licensing requirements, which address all CCDF health and safety requirements. Regarding non-relative FFN providers, WAC 110-16-0025(2) requires them to receive all trainings described in this subsection within 90 days of beginning service.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care
for children unsupervised?
✓ Yes
□ No
Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
☐ Yes
☑ No
Describe if relatives are exempt from this requirement
Relative FFN providers are exempt from these requirements.

5.2.3e 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, including citations for both licensed and license-exempt providers

WAC 110-300-0106 requires license applicants, center directors, assistant directors, program supervisors, lead teachers, assistant teachers, and aides to receive the 30 hours Child Care Basics training prior to being granted a license or working unsupervised with children, or within three months of the rules' effective date (8/1/2019) if the provider was already employed or being promoted to a new role. WAC 110-300-0110 further requires providers to orient all staff to all center licensing requirements. Child Care Basics includes training on all CCDF required health and safety topics with the exception of pediatric first aid/CPR which is addressed in separate training (see below). All licensed providers receive preservice orientation referencing all licensing requirements, which address all

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CCDF health and safety requirements. Regarding non-relative FFN providers, WAC 110-16-0025(2) requires them to receive all trainings described in this subsection within 90 days of beginning service.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
✓ Yes
□ No
Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
☐ Yes
☑ No
Describe if relatives are exempt from this requirement
Relative FFN providers are exempt from these requirements.

5.2.3e 8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0106 requires license applicants, center directors, assistant directors, program supervisors, lead teachers, assistant teachers, and aides to receive the 30 hours Child Care Basics training prior to being granted a license or working unsupervised with children, or within three months of the rules' effective date (8/1/2019) if the provider was already employed or being promoted to a new role. WAC 110-300-0110 further requires providers to orient all staff to all center licensing requirements. Child Care Basics includes training on all CCDF required health and safety topics with the exception of pediatric first aid/CPR which is addressed in separate training (see below). All licensed providers receive preservice orientation referencing all licensing requirements, which address all CCDF health and safety requirements. Regarding non-relative FFN providers, WAC 110-16-0025(2) requires them to receive all trainings described in this subsection

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within 90 days of beginning service.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care
for children unsupervised?
✓ Yes
□ No
Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
✓ No
Describe if relatives are exempt from this requirement
Relative FFN providers are exempt from these requirements.

5.2.3e 9. Appropriate precautions in transporting children (if applicable)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0106 requires license applicants, center directors, assistant directors, program supervisors, lead teachers, assistant teachers, and aides to receive the 30 hours Child Care Basics training prior to being granted a license or working unsupervised with children, or within three months of the rules' effective date (8/1/2019) if the provider was already employed or being promoted to a new role. WAC 110-300-0110 further requires providers to orient all staff to all center licensing requirements. Child Care Basics includes training on all CCDF required health and safety topics with the exception of pediatric first aid/CPR which is addressed in separate training (see below). All licensed providers receive preservice orientation referencing all licensing requirements, which address all CCDF health and safety requirements. Regarding non-relative FFN providers, WAC 110-16-0025(2) requires them to receive all trainings described in this subsection within 90 days of beginning service.

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Does the state/territory require that this training topic be completed before
caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
✓ Yes
□ No
Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
Yes
✓ No
Describe if relatives are exempt from this requirement
Relative FFN providers are exempt from these requirements.
5.2.3e 10. Pediatric first aid and CPR certification
Provide the citation for this training requirement, including citations for both
licensed and license-exempt providers
Under WAC 110-300-0106 providers are required to "have a current first-aid and
cardiopulmonary resuscitation (CPR) certification prior to being alone with children.
Early learning providers must ensure that at least one staff person with a current
first-aid and CPR certificate is present with each group of children at all times."
While not specified in WAC, the first aid training must be pediatric. Further, these
requirements are addressed in the department required pre-licensing orientation.
For non-relative FFN providers, CPR and first aid are required within 90 days of the
authorization begin date as described in WAC 110-16-0025(1).

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

V	Yes
	No

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Does the state/territory require that this training topic be completed before
caregivers, teachers, and directors in license-exempt CCDF programs are allowed
to care for children unsupervised?
✓ No
Describe if relatives are exempt from this requirement
Relative FFN providers are exempt from these requirements.

5.2.3e 11. Recognition and reporting of child abuse and neglect

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0106 requires license applicants, center directors, assistant directors, program supervisors, lead teachers, assistant teachers, and aides to receive the 30 hours Child Care Basics training prior to being granted a license or working unsupervised with children, or within three months of the rules' effective date (8/1/2019) if the provider was already employed or being promoted to a new role. WAC 110-300-0110 further requires providers to orient all staff to all center licensing requirements. Child Care Basics includes training on all CCDF required health and safety topics with the exception of pediatric first aid/CPR which is addressed in separate training (see above). All licensed providers receive preservice orientation referencing all licensing requirements, which address all CCDF health and safety requirements. Regarding non-relative FFN providers, WAC 110-16-0025(2) requires them to receive all trainings described in this subsection within 90 days of beginning service.

Does the state/territory require that this training topic be completed before
caregivers, teachers, and directors in licensed CCDF programs are allowed to care
for children unsupervised?
▼ Yes

☐ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

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Prov licen WAC servi child langa requ deve orier FFN	2. Child development (98.44(b)(1)(iii)) ide the citation for this training requirement, including citations for both sed and license-exempt providers is 110-300-0107requires providers to "complete a minimum of ten hours of ince training 'child development'". WACs 110-300-0310 through -0330 cover development topics including curriculum philosophy, concept development, ague modeling, facilitatiang child interests. Further, WAC 110-300-0325 res providers to "maintain a climate for healthy, culturally responsive child lopment" and lists examples of methods of how to do so. Preservice tation for both licensed provider types reference these WACs. For non-relative providers, training within 90 days of beginning service is required as described AC 110-16-0025(2).
for c for c Y Does	os the state/territory require that this training topic be completed before givers, teachers, and directors in license-exempt CCDF programs are allowed re for children unsupervised?

5.2.3e 13.

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Describe if relatives are exempt from this requirement

Relative FFN providers are exempt from these requirements.

Describe other training requirements, such as nutrition, physical activities, caring for children with special needs, etc..

Licensing orientationand Child Care Basics training for licensed center and family home providers includes training on the topics of nutrition, physical activities, and caring for children with special needs. Health and safety training for non-relative providers also includes training on nutrition and physical activities.

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0106 and -0107for licensed providers. WAC 110-16-0025 for nonrelative FFN providers.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care
or children unsupervised?
▼ Yes
□ No
Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed o care for children unsupervised?
Yes
▼ No
Describe if relatives are exempt from this requirement
Relative FFN providers are exempt from these requirements.

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.

Effective Date: 08/12/2021

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a) Licensed child care centers:

Licensed child care centers are required to take 10 hours of ongoing DCYFapprovedtraining each calendar year. Providers licensed to care for infants must take safe sleep training each calendar year.

Further, licensed providers register in MERIT and record and track their training information there. Providers can complete annual ongoing health and safety training by taking either DCYF developed online modules or in-person training offered by state-approved trainers delivering content in the allowable subject matter areas. All ongoing health and safety training is recorded in MERIT with the date of completion and expiration. This is verified and displayed in each individual's professional record under "health and safety information."

If a provider fails to complete at least one hour of annual ongoing health and safety training on a CCDF-required health and safety training topic in a given calendar year, their training history notifies them of the unmet requirement and displays all the training they completed and the CCDF topics covered in that training in order to meet the requirement. Safe sleep training on its own is insufficient to meet the requirement if the provider does not serve children of the corresponding age.

When a provider fails to meet the annual ongoing health and safety requirement, in addition to informing the provider, MERIT informs DCYF Licensing Division for further action, which takes place during health and safety monitoring.

b) Licensed FCC homes:

Licensedfamily homes are required to take 10 hours of ongoing DCYF-approved training each calendar year. Providers licensed to care for infants must take safe sleep training each calendar year.

Further, licensed providers register in MERIT and record and track their training information there. Providers can complete annual ongoing health and safety training by taking either DCYF developed online modules or in-person training offered by state-approved trainers delivering content in the allowable subject matter areas. All ongoing health and safety training is recorded in MERIT with the date of completion and expiration. This is verified and displayed in each individual's professional record under

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"health and safety information."

If a provider fails to complete at least one hour of annual ongoing health and safety training on a CCDF-required health and safety training topic in a given calendar year, their training history notifies them of the unmet requirement and displays all the training they completed and the CCDF topics covered in that training in order to meet the requirement. Safe sleep training on its own is insufficient to meet the requirement if the provider does not serve children of the corresponding age.

When a provider fails to meet the annual ongoing health and safety requirement, in addition to informing the provider, MERIT informs DCYF Licensing Division for further action, which takes place during health and safety monitoring.

c) In-home care:

Nonrelative FFN providers must complete at least two hours of health and safety training annually.

Emergency tempoary change: During the COVID-19 Outbreak and effective October 16, 2020 through September 30, 2021, DCYF suspended the requirement for these FFN providers to receive ongoing training because such training was to occur during monitoring visits that cannot take place due to social distancing. DCYF submitted a letter requesting waiver from the unannounced inspection requirement for this purpose and it was approved.

d) Variations for exempt provider settings:

As described above, Tribal certified for Payment Only center and family home programs meet ongoing CCDF training requirements by means documented in their CCDF plans that may vary from DCYF licensed or FFN training requirements. Military programs meet ongoing training requirements established by Department of Defense. Staff who work in license exempt centers and FCC homes are subject to DCYF licensed annual ongoing training hour requirements when the sites are certified by DCYF. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

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Sites participating in Washington's quality rating and improvement system, Early Achievers, may have additional staff training requirements depending on rated level.

Outdoor preschools participating in the pilot project are required to undertake ongoing health and safety training.

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).

Effective Date: 08/01/2019

- 1. Prevention and control of infectious diseases (including immunizations)
 - -- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0107 for licensed providers. WAC 110-16-0025(4) for nonrelative license exempt FFN providers.

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

Annually

Other

Describe:

DCYF Licensing Standards require licensed providers to take 10 hours of ongoing training. WAC 110-300-0107 states as follows:

- "(1) An early learning provider must complete ten hours of annual in-service training after twelve months of cumulative employment.
- (a) Family home licensees, center directors, assistant directors, program supervisors, lead teachers, and assistant teachers must complete the department enhancing quality of early learning (EQEL) in-service training within thirty-six months of being hired in a licensed facility, unless the provider has completed a department approved alternative training. EQEL hours may count towards the ten hours of annual in-service training.

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- (b) Every thirty-six months, following the completion of EQEL or a department approved alternative training, family home licensees, center directors, assistant directors, and program supervisors, must complete a minimum of ten hours of inservice training "child development" and a minimum of ten hours of inservice training on "leadership practices."
- (i) Child development training includes the following Washington state core competencies: Child growth and development, curriculum and learning environment, ongoing measurements of child progress, family and community partnerships, health, safety, nutrition, and interactions.
- (ii) Leadership practices training includes the following Washington state core competencies: Program planning and development, professional development, and leadership.
- (2) In-service training requirements of this chapter may be met by completing college courses that align with the Washington state core competencies. These courses must be delivered by a postsecondary institution and approved by the department.
- (3) Only five in-service training hours may be carried over from one fiscal year to the next fiscal year."

See 5.2.4 above for more information on how MERIT guides providers toward completion of at least one hour of annual ongoing health and safety training.

Regarding nonrelative FFN providers, WAC 110-300-0025(4) states "[a] provider not related to the child, as described in WAC 110-16-0015 (3)(c), must annually renew portions of the training required in subsection (1)(c) of this section, as determined by state or federal requirements."

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

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How often does the state/territory require that this training topic be completed to caregivers, teachers, and directors in licensed-exempt CCDF programs? ☐ Annually ☐ Other ☐ Describe:)y
Nonrelative FFN providers receive ongoing health and safety training as part of their annual health and safety visit. The ongoing training is based on health are safety topics that the provider requests more information on and areas of need determined by the annual visit.	nd
Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payr Only by DCYF, staff who work in these facilities are subject to ongoing health safety training requirements according to their governing body (Tribe, Military, office of superintendent of public instruction).	nent and
 Prevention of sudden infant death syndrome and the use of safe-sleep practices Provide the citation for this training requirement, including citations for both lice and license-exempt providers WAC 110-300-0107 for licensed providers. WAC 110-16-0025(4) for nonrelative license exempt FFN providers. 	ensed
How often does the state/territory require that this training topic be completed to caregivers, teachers, and directors in licensed CCDF programs? Annually Other Describe: DCYF Licensing Standards require licensed providers to take 10 hours of ong training. WAC 110-300-0107 states as follows:	
"(1) An early learning provider must complete ten hours of annual in-service tr	aining

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after twelve months of cumulative employment.

- (a) Family home licensees, center directors, assistant directors, program supervisors, lead teachers, and assistant teachers must complete the department enhancing quality of early learning (EQEL) in-service training within thirty-six months of being hired in a licensed facility, unless the provider has completed a department approved alternative training. EQEL hours may count towards the ten hours of annual in-service training.
- (b) Every thirty-six months, following the completion of EQEL or a department approved alternative training, family home licensees, center directors, assistant directors, and program supervisors, must complete a minimum of ten hours of inservice training "child development" and a minimum of ten hours of inservice training on "leadership practices."
- (i) Child development training includes the following Washington state core competencies: Child growth and development, curriculum and learning environment, ongoing measurements of child progress, family and community partnerships, health, safety, nutrition, and interactions.
- (ii) Leadership practices training includes the following Washington state core competencies: Program planning and development, professional development, and leadership.
- (2) In-service training requirements of this chapter may be met by completing college courses that align with the Washington state core competencies. These courses must be delivered by a postsecondary institution and approved by the department.
- (3) Only five in-service training hours may be carried over from one fiscal year to the next fiscal year."

See 5.2.4 above for more information on how MERIT guides providers toward completion of at least one hour of annual ongoing health and safety training.

Regarding nonrelative FFN providers, WAC 110-300-0025(4) states "[a] provider not related to the child, as described in WAC 110-16-0015 (3)(c), must annually renew portions of the training required in subsection (1)(c) of this section, as determined by state or federal requirements."

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training

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requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

How often does the state/territory require that this training topic be completed caregivers, teachers, and directors in licensed-exempt CCDF programs?	by
☐ Annually	
✓ Other	
Describe:	
Nonrelative FFN providers receive ongoing health and safety training as part their annual health and safety visit. The ongoing training is based on health a safety topics that the provider requests more information on and areas of nee determined by the annual visit.	nd
Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payl Only by DCYF, staff who work in these facilities are subject to ongoing health safety training requirements according to their governing body (Tribe, Military office of superintendent of public instruction).	ment and
Administration of medication, consistent with standards for parental consent Provide the citation for this training requirement, including citations for both lice and license-exempt providers WAC 110-300-0107 for licensed providers. WAC 110-16-0025(4) for nonrelative license exempt FFN providers.	
 How often does the state/territory require that this training topic be completed caregivers, teachers, and directors in licensed CCDF programs? Annually Other 	by

3.

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Describe:

DCYF Licensing Standards require licensed providers to take 10 hours of ongoing training. WAC 110-300-0107 states as follows:

- "(1) An early learning provider must complete ten hours of annual in-service training after twelve months of cumulative employment.
- (a) Family home licensees, center directors, assistant directors, program supervisors, lead teachers, and assistant teachers must complete the department enhancing quality of early learning (EQEL) in-service training within thirty-six months of being hired in a licensed facility, unless the provider has completed a department approved alternative training. EQEL hours may count towards the ten hours of annual in-service training.
- (b) Every thirty-six months, following the completion of EQEL or a department approved alternative training, family home licensees, center directors, assistant directors, and program supervisors, must complete a minimum of ten hours of inservice training "child development" and a minimum of ten hours of inservice training on "leadership practices."
- (i) Child development training includes the following Washington state core competencies: Child growth and development, curriculum and learning environment, ongoing measurements of child progress, family and community partnerships, health, safety, nutrition, and interactions.
- (ii) Leadership practices training includes the following Washington state core competencies: Program planning and development, professional development, and leadership.
- (2) In-service training requirements of this chapter may be met by completing college courses that align with the Washington state core competencies. These courses must be delivered by a postsecondary institution and approved by the department.
- (3) Only five in-service training hours may be carried over from one fiscal year to the next fiscal year."

See 5.2.4 above for more information on how MERIT guides providers toward completion of at least one hour of annual ongoing health and safety training.

Regarding nonrelative FFN providers, WAC 110-300-0025(4) states "[a] provider

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not related to the child, as described in WAC 110-16-0015 (3)(c), must annually renew portions of the training required in subsection (1)(c) of this section, as determined by state or federal requirements."

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

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

Annually

Other

Describe:

Nonrelative FFN providers receive ongoing health and safety training as part of their annual health and safety visit. The ongoing training is based on health and safety topics that the provider requests more information on and areas of need as determined by the annual visit.

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0107 for licensed providers. WAC 110-16-0025(4) for nonrelative license exempt FFN providers.

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

 □ Annually
 ☑ Other
 Describe:
 DCYF Licensing Standards require licensed providers to take 10 hours of ongoing training. WAC 110-300-0107 states as follows:

"(1) An early learning provider must complete ten hours of annual in-service training

after twelve months of cumulative employment.

- (a) Family home licensees, center directors, assistant directors, program supervisors, lead teachers, and assistant teachers must complete the department enhancing quality of early learning (EQEL) in-service training within thirty-six months of being hired in a licensed facility, unless the provider has completed a department approved alternative training. EQEL hours may count towards the ten hours of annual in-service training.
- (b) Every thirty-six months, following the completion of EQEL or a department approved alternative training, family home licensees, center directors, assistant directors, and program supervisors, must complete a minimum of ten hours of inservice training "child development" and a minimum of ten hours of inservice training on "leadership practices."
- (i) Child development training includes the following Washington state core competencies: Child growth and development, curriculum and learning environment, ongoing measurements of child progress, family and community partnerships, health, safety, nutrition, and interactions.
- (ii) Leadership practices training includes the following Washington state core competencies: Program planning and development, professional development, and leadership.
- (2) In-service training requirements of this chapter may be met by completing college courses that align with the Washington state core competencies. These courses must be delivered by a postsecondary institution and approved by the department.
- (3) Only five in-service training hours may be carried over from one fiscal year to

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the next fiscal year."

See 5.2.4 above for more information on how MERIT guides providers toward completion of at least one hour of annual ongoing health and safety training.

Regarding nonrelative FFN providers, WAC 110-300-0025(4) states "[a] provider not related to the child, as described in WAC 110-16-0015 (3)(c), must annually renew portions of the training required in subsection (1)(c) of this section, as determined by state or federal requirements."

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

How ofte	en does the	e state/territory	require that t	his training	topic be co	mpleted by
caregivers	. teachers.	and directors i	in licensed-ex	cempt CCDF	- programs	?

Annually

Other

Describe:

Nonrelative FFN providers receive ongoing health and safety training as part of their annual health and safety visit. The ongoing training is based on health and safety topics that the provider requests more information on and areas of need as determined by the annual visit.

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

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- 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, including citations for both licensed and license-exempt providers

WAC 110-300-0107 for licensed providers. WAC 110-16-0025(4) for nonrelative license exempt FFN providers.

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

- "(1) An early learning provider must complete ten hours of annual in-service training after twelve months of cumulative employment.
- (a) Family home licensees, center directors, assistant directors, program supervisors, lead teachers, and assistant teachers must complete the department enhancing quality of early learning (EQEL) in-service training within thirty-six months of being hired in a licensed facility, unless the provider has completed a department approved alternative training. EQEL hours may count towards the ten hours of annual in-service training.
- (b) Every thirty-six months, following the completion of EQEL or a department approved alternative training, family home licensees, center directors, assistant directors, and program supervisors, must complete a minimum of ten hours of inservice training "child development" and a minimum of ten hours of inservice training on "leadership practices."
- (i) Child development training includes the following Washington state core competencies: Child growth and development, curriculum and learning environment, ongoing measurements of child progress, family and community partnerships, health, safety, nutrition, and interactions.
- (ii) Leadership practices training includes the following Washington state core competencies: Program planning and development, professional development, and leadership.
- (2) In-service training requirements of this chapter may be met by completing

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college courses that align with the Washington state core competencies. These courses must be delivered by a postsecondary institution and approved by the department.

(3) Only five in-service training hours may be carried over from one fiscal year to the next fiscal year."

See 5.2.4 above for more information on how MERIT guides providers toward completion of at least one hour of annual ongoing health and safety training.

Regarding nonrelative FFN providers, WAC 110-300-0025(4) states "[a] provider not related to the child, as described in WAC 110-16-0015 (3)(c), must annually renew portions of the training required in subsection (1)(c) of this section, as determined by state or federal requirements."

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

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

Annually

Other

Describe:

Nonrelative FFN providers receive ongoing health and safety training as part of their annual health and safety visit. The ongoing training is based on health and safety topics that the provider requests more information on and areas of need as determined by the annual visit.

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment

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Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
-- Provide the citation for this training requirement, including citations for both licensed
and license-exempt providers

WAC 110-300-0107 for licensed providers. WAC 110-16-0025(4) for nonrelative license exempt FFN providers.

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

Annually

Other

Describe:

DCYF Licensing Standards require licensed providers to take 10 hours of ongoing training. WAC 110-300-0107 states as follows:

- "(1) An early learning provider must complete ten hours of annual in-service training after twelve months of cumulative employment.
- (a) Family home licensees, center directors, assistant directors, program supervisors, lead teachers, and assistant teachers must complete the department enhancing quality of early learning (EQEL) in-service training within thirty-six months of being hired in a licensed facility, unless the provider has completed a department approved alternative training. EQEL hours may count towards the ten hours of annual in-service training.
- (b) Every thirty-six months, following the completion of EQEL or a department approved alternative training, family home licensees, center directors, assistant directors, and program supervisors, must complete a minimum of ten hours of inservice training "child development" and a minimum of ten hours of inservice training on "leadership practices."
- (i) Child development training includes the following Washington state core competencies: Child growth and development, curriculum and learning

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environment, ongoing measurements of child progress, family and community partnerships, health, safety, nutrition, and interactions.

- (ii) Leadership practices training includes the following Washington state core competencies: Program planning and development, professional development, and leadership.
- (2) In-service training requirements of this chapter may be met by completing college courses that align with the Washington state core competencies. These courses must be delivered by a postsecondary institution and approved by the department.
- (3) Only five in-service training hours may be carried over from one fiscal year to the next fiscal year."

See 5.2.4 above for more information on how MERIT guides providers toward completion of at least one hour of annual ongoing health and safety training.

Regarding nonrelative FFN providers, WAC 110-300-0025(4) states "[a] provider not related to the child, as described in WAC 110-16-0015 (3)(c), must annually renew portions of the training required in subsection (1)(c) of this section, as determined by state or federal requirements."

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

	How often does the state/territory require that this training topic be completed by
Ca	aregivers, teachers, and directors in licensed-exempt CCDF programs?
	Annually
	✓ Other
	Describe:
	Nonrelative FFN providers receive ongoing health and safety training as part of

their annual health and safety visit. The ongoing training is based on health and

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safety topics that the provider requests more information on and areas of need as determined by the annual visit.

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

- 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, including citations for both licensed and license-exempt providers

WAC 110-300-0107 for licensed providers. WAC 110-16-0025(4) for nonrelative license exempt FFN providers.

How often does the state/territory require that this training topic be completed by
caregivers, teachers, and directors in licensed CCDF programs?
☐ Annually
✓ Other
Describe:
DCYF Licensing Standards require licensed providers to take 10 hours of ongoing
training. WAC 110-300-0107 states as follows:

- "(1) An early learning provider must complete ten hours of annual in-service training after twelve months of cumulative employment.
- (a) Family home licensees, center directors, assistant directors, program supervisors, lead teachers, and assistant teachers must complete the department enhancing quality of early learning (EQEL) in-service training within thirty-six months of being hired in a licensed facility, unless the provider has completed a department approved alternative training. EQEL hours may count towards the ten hours of annual in-service training.

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- (b) Every thirty-six months, following the completion of EQEL or a department approved alternative training, family home licensees, center directors, assistant directors, and program supervisors, must complete a minimum of ten hours of inservice training "child development" and a minimum of ten hours of inservice training on "leadership practices."
- (i) Child development training includes the following Washington state core competencies: Child growth and development, curriculum and learning environment, ongoing measurements of child progress, family and community partnerships, health, safety, nutrition, and interactions.
- (ii) Leadership practices training includes the following Washington state core competencies: Program planning and development, professional development, and leadership.
- (2) In-service training requirements of this chapter may be met by completing college courses that align with the Washington state core competencies. These courses must be delivered by a postsecondary institution and approved by the department.
- (3) Only five in-service training hours may be carried over from one fiscal year to the next fiscal year."

See 5.2.4 above for more information on how MERIT guides providers toward completion of at least one hour of annual ongoing health and safety training.

Regarding nonrelative FFN providers, WAC 110-300-0025(4) states "[a] provider not related to the child, as described in WAC 110-16-0015 (3)(c), must annually renew portions of the training required in subsection (1)(c) of this section, as determined by state or federal requirements."

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

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How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?
☐ Annually
✓ Other
Describe:
Nonrelative FFN providers receive ongoing health and safety training as part of their annual health and safety visit. The ongoing training is based on health and safety topics that the provider requests more information on and areas of need as determined by the annual visit.
Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment
Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).
safety training requirements according to their governing body (Tribe, Military, or
safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction). 8. Handling and storage of hazardous materials and the appropriate disposal of bio-
safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction). 8. Handling and storage of hazardous materials and the appropriate disposal of biocontaminants Provide the citation for this training requirement, including citations for both licensed
safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction). 8. Handling and storage of hazardous materials and the appropriate disposal of biocontaminants Provide the citation for this training requirement, including citations for both licensed and license-exempt providers WAC 110-300-0107 for licensed providers. WAC 110-16-0025(4) for nonrelative

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"(1) An early learning provider must complete ten hours of annual in-service training

after twelve months of cumulative employment.

- (a) Family home licensees, center directors, assistant directors, program supervisors, lead teachers, and assistant teachers must complete the department enhancing quality of early learning (EQEL) in-service training within thirty-six months of being hired in a licensed facility, unless the provider has completed a department approved alternative training. EQEL hours may count towards the ten hours of annual in-service training.
- (b) Every thirty-six months, following the completion of EQEL or a department approved alternative training, family home licensees, center directors, assistant directors, and program supervisors, must complete a minimum of ten hours of inservice training "child development" and a minimum of ten hours of inservice training on "leadership practices."
- (i) Child development training includes the following Washington state core competencies: Child growth and development, curriculum and learning environment, ongoing measurements of child progress, family and community partnerships, health, safety, nutrition, and interactions.
- (ii) Leadership practices training includes the following Washington state core competencies: Program planning and development, professional development, and leadership.
- (2) In-service training requirements of this chapter may be met by completing college courses that align with the Washington state core competencies. These courses must be delivered by a postsecondary institution and approved by the department.
- (3) Only five in-service training hours may be carried over from one fiscal year to the next fiscal year."

See 5.2.4 above for more information on how MERIT guides providers toward completion of at least one hour of annual ongoing health and safety training.

Regarding nonrelative FFN providers, WAC 110-300-0025(4) states "[a] provider not related to the child, as described in WAC 110-16-0015 (3)(c), must annually renew portions of the training required in subsection (1)(c) of this section, as determined by state or federal requirements."

Staff who work in license exempt centers and FCC homes that are certified by

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DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?
Annually
✓ Other
Describe:
Nonrelative FFN providers receive ongoing health and safety training as part of
their annual health and safety visit. The ongoing training is based on health and
safety topics that the provider requests more information on and areas of need as
determined by the annual visit.
Staff who work in license exempt centers and FCC homes that are certified by
DCYF are subject to DCYF licensed ongoing health and safety training
requirements. If license exempt centers and FCC homes are certified for Payment
Only by DCYF, staff who work in these facilities are subject to ongoing health and
safety training requirements according to their governing body (Tribe, Military, or
office of superintendent of public instruction).
Appropriate precautions in transporting children (if applicable)
Provide the citation for this training requirement, including citations for both licensed
and license-exempt providers
WAC 110-300-0107 for licensed providers. WAC 110-16-0025(4) for nonrelative
license exempt FFN providers.
How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
Annually

9.

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Other

Describe:

DCYF Licensing Standards require licensed providers to take 10 hours of ongoing training. WAC 110-300-0107 states as follows:

- "(1) An early learning provider must complete ten hours of annual in-service training after twelve months of cumulative employment.
- (a) Family home licensees, center directors, assistant directors, program supervisors, lead teachers, and assistant teachers must complete the department enhancing quality of early learning (EQEL) in-service training within thirty-six months of being hired in a licensed facility, unless the provider has completed a department approved alternative training. EQEL hours may count towards the ten hours of annual in-service training.
- (b) Every thirty-six months, following the completion of EQEL or a department approved alternative training, family home licensees, center directors, assistant directors, and program supervisors, must complete a minimum of ten hours of inservice training "child development" and a minimum of ten hours of inservice training on "leadership practices."
- (i) Child development training includes the following Washington state core competencies: Child growth and development, curriculum and learning environment, ongoing measurements of child progress, family and community partnerships, health, safety, nutrition, and interactions.
- (ii) Leadership practices training includes the following Washington state core competencies: Program planning and development, professional development, and leadership.
- (2) In-service training requirements of this chapter may be met by completing college courses that align with the Washington state core competencies. These courses must be delivered by a postsecondary institution and approved by the department.
- (3) Only five in-service training hours may be carried over from one fiscal year to the next fiscal year."

See 5.2.4 above for more information on how MERIT guides providers toward completion of at least one hour of annual ongoing health and safety training.

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Regarding nonrelative FFN providers, WAC 110-300-0025(4) states "[a] provider not related to the child, as described in WAC 110-16-0015 (3)(c), must annually renew portions of the training required in subsection (1)(c) of this section, as determined by state or federal requirements."

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

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

Annually

Other

Describe:

Nonrelative FFN providers receive ongoing health and safety training as part of their annual health and safety visit. The ongoing training is based on health and safety topics that the provider requests more information on and areas of need as determined by the annual visit.

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

10. Pediatric first aid and CPR certification

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0106(12) for licensed providers. WAC 110-16-0025(4) for license

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exempt nonrelative FFN providers.

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
Annually
✓ Other
Describe:
WAC 110-300-0106(12) states as follows:
"(12) Early learning providers must have a current first-aid and cardiopulmonary
resuscitation (CPR) certification prior to being alone with children. Early learning
providers must ensure that at least one staff person with a current first-aid and CPR
certificate is present with each group of children at all times.
(a) Proof of certification may be a card, certificate, or instructor letter.
(b) The first-aid and CPR training and certification must:
(i) Be delivered in person and include a hands-on component for first aid and CPR
demonstrated in front of an instructor certified by the American Red Cross,
American Heart Association, American Safety and Health Institute, or other
nationally recognized certification program;
(ii) Include child and adult CPR; and
(iii) Infant CPR, if applicable."
WAC 110-16-0025(4) states "(4) A provider not related to the child, as described in
WAC 110-16-0015 (3)(c), must annually renew portions of the training required in
subsection (1)(c) of this section, as determined by state or federal requirements."
How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?
☐ Annually
✓ Other
Describe:
Nonrelative FFN providers receive ongoing health and safety training as part of

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their annual health and safety visit. The ongoing training is based on health and safety topics that the provider requests more information on and areas of need as determined by the annual visit.

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

11. Recognition and reporting of child abuse and neglect

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

WAC 110-300-0107 for licensed providers. WAC 110-16-0025(4) for nonrelative license exempt FFN providers.

How often does the state/territory require that this training topic be completed by
caregivers, teachers, and directors in licensed CCDF programs?
☐ Annually
☑ Other
Describe:
DCYF Licensing Standards require licensed providers to take 10 hours of ongoing
training. WAC 110-300-0107 states as follows:

- "(1) An early learning provider must complete ten hours of annual in-service training after twelve months of cumulative employment.
- (a) Family home licensees, center directors, assistant directors, program supervisors, lead teachers, and assistant teachers must complete the department enhancing quality of early learning (EQEL) in-service training within thirty-six months of being hired in a licensed facility, unless the provider has completed a department approved alternative training. EQEL hours may count towards the ten hours of annual in-service training.

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- (b) Every thirty-six months, following the completion of EQEL or a department approved alternative training, family home licensees, center directors, assistant directors, and program supervisors, must complete a minimum of ten hours of inservice training "child development" and a minimum of ten hours of inservice training on "leadership practices."
- (i) Child development training includes the following Washington state core competencies: Child growth and development, curriculum and learning environment, ongoing measurements of child progress, family and community partnerships, health, safety, nutrition, and interactions.
- (ii) Leadership practices training includes the following Washington state core competencies: Program planning and development, professional development, and leadership.
- (2) In-service training requirements of this chapter may be met by completing college courses that align with the Washington state core competencies. These courses must be delivered by a postsecondary institution and approved by the department.
- (3) Only five in-service training hours may be carried over from one fiscal year to the next fiscal year."

See 5.2.4 above for more information on how MERIT guides providers toward completion of at least one hour of annual ongoing health and safety training.

Regarding nonrelative FFN providers, WAC 110-300-0025(4) states "[a] provider not related to the child, as described in WAC 110-16-0015 (3)(c), must annually renew portions of the training required in subsection (1)(c) of this section, as determined by state or federal requirements."

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).

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How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?
Annually
✓ Other
Describe:
Nonrelative FFN providers receive ongoing health and safety training as part of
their annual health and safety visit. The ongoing training is based on health and
safety topics that the provider requests more information on and areas of need as
determined by the annual visit.
Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).
12. Child development (98.44(b)(1)(iii))
Provide the citation for this training requirement, including citations for both licensed
and license-exempt providers
WAC 110-300-0107 for licensed providers. WAC 110-16-0025(4) for nonrelative
license exempt FFN providers.
How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
Annually
✓ Other
Describe:
DCYF Licensing Standards require licensed providers to take 10 hours of ongoing
training. WAC 110-300-0107 states as follows:
"(1) An early learning provider must complete ten hours of annual in-service training

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after twelve months of cumulative employment.

- (a) Family home licensees, center directors, assistant directors, program supervisors, lead teachers, and assistant teachers must complete the department enhancing quality of early learning (EQEL) in-service training within thirty-six months of being hired in a licensed facility, unless the provider has completed a department approved alternative training. EQEL hours may count towards the ten hours of annual in-service training.
- (b) Every thirty-six months, following the completion of EQEL or a department approved alternative training, family home licensees, center directors, assistant directors, and program supervisors, must complete a minimum of ten hours of inservice training "child development" and a minimum of ten hours of inservice training on "leadership practices."
- (i) Child development training includes the following Washington state core competencies: Child growth and development, curriculum and learning environment, ongoing measurements of child progress, family and community partnerships, health, safety, nutrition, and interactions.
- (ii) Leadership practices training includes the following Washington state core competencies: Program planning and development, professional development, and leadership.
- (2) In-service training requirements of this chapter may be met by completing college courses that align with the Washington state core competencies. These courses must be delivered by a postsecondary institution and approved by the department.
- (3) Only five in-service training hours may be carried over from one fiscal year to the next fiscal year."

Regarding nonrelative FFN providers, WAC 110-300-0025(4) states "[a] provider not related to the child, as described in WAC 110-16-0015 (3)(c), must annually renew portions of the training required in subsection (1)(c) of this section, as determined by state or federal requirements."

Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or

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office of superintendent of public instruction).

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs? ☐ Annually ☐ Other
Describe: Nonrelative FFN providers receive ongoing health and safety training as part of their annual health and safety visit. The ongoing training is based on health and safety topics that the provider requests more information on and areas of need as determined by the annual visit.
Staff who work in license exempt centers and FCC homes that are certified by DCYF are subject to DCYF licensed ongoing health and safety training requirements. If license exempt centers and FCC homes are certified for Payment Only by DCYF, staff who work in these facilities are subject to ongoing health and safety training requirements according to their governing body (Tribe, Military, or office of superintendent of public instruction).
13. Describe other requirements such as nutrition, physical activities, caring for children with special needs, etc NA
Provide the citation for other training requirements, including citations for both licensed and license-exempt providers NA
How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs? ☐ Annually ☐ Other Describe: NA

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How often does the state/territory require that this training topic	be completed by
caregivers, teachers, and directors in licensed-exempt CCDF p	rograms?
Annually	
✓ Other	
Describe:	
NA	

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

Regarding licensed providers, DCYF's approach to licensing emphasizes supporting them to meet standards, so licensors provide facilities coaching and technical assistance where enforcement is not required to achieve compliance. DCYF requires annual unannouncedmonitoring visits using checklists that address rule requirements. All violations of the licensing standards are documented on a Facility Licensing Compliance Agreement (FLCA). Health and safety violations require a health and safety follow-up visit or specified method of confirmation that the violations have been corrected, e.g., pictures or signed documents, within 10 days of the initial visit. Part of the annual monitoring visit includes the licensor verifying whether the licensee is current with required ongoing training. If a licensee shows a history of noncompliance with the rules and has already received all support DCYF offers, the agency can impose civil penalties or suspend/revoke the license. DCYF also has the ability to offer the licensee a probationary license in order for the licensee to demonstrate

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compliance with rules.

Regarding license exempt non-relative FFN providers, DCYF's approach to monitoring again emphasizes support, coaching, and technical assistance. DCYF requires annual visits using checklists corresponding to Chapter 110-16 WAC. DCYF inspectors document compliance issues and, in the case of issues that do not represent an immediate threat to child health and safety, coordinate with providers and parents to address them. In the event that repeated attempts to achieve compliance through support, coaching, and technical assistance fail, and a threat to child health and safety results, DCYF terminates the authorization.

For both licensed providers and license exempt non-relative FFN providers, DCYF uses its MERIT system to track provider progress on training requirements. In the event a provider has not met training requirements, the MERIT system notifies DCYF, and staff take appropriate action.

Emergency temporary change: Effective starting the effective date of Proclamation 20-05 on February 29, 2020 and continuing through September 30, 2021, DCYF received a waiver of the requirement that annual inspections be unannounced. This supports practices to minimize face to face contact between agency staff and providers, including remote, virtual health and safety visits.

Effective Date: 2/29/2020

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

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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.

Effective Date: 02/29/2020

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
Before licensing a child care center, DCYF requires a state fire marshal inspection in addition to a health and safety inspection by the agency's health specialist and the licensor. The provider must use aWashington State certified water laboratory accrdited by the Department of Ecology to anlayze program drinking water and test the water supply for lead and copper prior to licensing. If the provider faciltiy uses a septic system, it must be approved by the local helath department prior to licensure.

Emergency temporary change: During the COVID-19 Outbreak effective February 29, 2020 through September 30, 2021 DCYF instituted an emergency child care licensing process. Providers licensed through this process receive an abbreviated virtual inspection. DCYF submitted a letter requesting waiver from the inspection requirement for this purpose and it was approved. The waiver was requested to help reduce person-to-person transmissions of Covid-19.

Effective February 29, 2020 through September 30, 2021 DCYF recieved a waiver approval to not conduct pre-licensure inspection for all licensed providers. In order to maintain our process and onboard new providers to bolster the depleted supply of providers DCYF will utilyze a virtual inspection. DCYF's virtual inspection process provides for a baseline of health and safety standards. In addition, providers are still required to take training on all of the required topics, and the phone and virtual inspection processes enable us to communicate critical health and safety information to new providers and view their licensed space for potential issues.

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2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers

DCYF policy and procedure directs licensors to conduct annual unannounced monitoring visits. DCYF defines "annual" to mean once per fiscal year (July 1 through June 30) in order to prevent a provider anticipating the date of an unnanounced visit, so as a result visits my be more than 12 months apart. Monitoring visits can be conducted more than once a year if a facility's licensing history indicates a need or if the agency determines that the facility needs to be placed on a probationary license.

Emergency tempoary change:During the COVID-19 Outbreak effective February 29,2020 through September 30, 2021, DCYF suspended the requirement that these inspections be unannounced to support virtual monitoring, which requires visits to be announced. DCYFsubmitted a letter requesting waiver from the unannounced inspection requirement for this purpose and it was approved. DCYF is currently conducting virtual monitoring inspections.

3. Identify the frequency of unannounced inspections:	
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.

Licensors use a standardized full checklist when the facility is first licensed and when a facility is cited for a specified Fienne indicator. A full checklist must be completed once every three years. The full checklist addresses all CCDF health and safety standards and fire safety as established in state licensing standards at Chapter 110-300 WAC. An abbreviated checklist is used when a full checklist is not required, but the abbreivated checklist still addresses all CCDF health and safety and fire safety standards as established in WAC.

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5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers

Monitoring visit practice is per agency <u>policy</u> and <u>procedure</u> 10.1.8.Licesning rules require providers to follow other regulations or have other inspections as required by state, county, or city ordinances. See WACs 110-300-0170, -0250, -0465, and -0415.

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
Before licensing a family care provider, DCYF requires licensorinspection of the home per WAC as to health and safety and fire requirements. DCYF also requires that the local health department inspect septic systems and test water quality pre-licensure. It is the provider's responsibility to arrange fire department inspection and this is not required pre-licensure.

Emergency temporary change: During the COVID-19 Outbreak effective February 29, 2020 through September 30, 2021, DCYF instituted an emergency child care licensing process. Providers licensed through this process receive an abbreviated virtual inspection. DCYF submitted a letter requesting waiver from the pre-licensure inspection requirement for this purpose and it was approved. The waiver was requested to help reduce person-to-person transmissions of Covid-19.

Effective February 29, 2020 through September 30, 2021 DCYF recieved a waiver approval to not conduct pre-licensure inspection for all licensed providers. In order to maintain our process and onboard new providers to bolster the depleted supply of providers DCYF will utilyze a virtual inspection. DCYF's virtual inspection process provides for a baseline of health and safety standards. In addition, providers are still required to take training on all of the required topics, and the phone and virtual inspection processes enable us to communicate critical health and safety information to new providers and view their licensed space for potential issues.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF family child care providers

DCYF policy and procedure directs licensors to conduct annual unannounced monitoring visits. DCYF defines "annual" to mean once per calendar year in order to

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prevent a provider anticipating the date of an unnanounced visit, so as a result visits my be more than 12 months apart. Monitoring visits can be conducted more than once a year if a facility's licensing history indicates a need or if the agency determines that the facility needs to be placed on a probationary license.

Emergency tempoary change:During the COVID-19 Outbreak effective February 29,2020 through September 30, 2021, DCYF suspended the requirement that these inspections be unannounced to support virtual monitoring, which requires visits to be announced. DCYFsubmitted a letter requesting waiver from the unannounced inspection requirement for this purpose and it was approved. DCYF is currently conducting virtual monitoring inspections.

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.

Licensors use a standardized full checklist when the facility is first licensed and when a facility is cited for a specified Fienne indicator. A full checklist must be completed once every three years. The full checklist addresses all CCDF health and safety standards and fire safety as established in state licensing standards at Chapter 110-300 WAC. An abbreviated checklist is used when a full checklist is not required, but the abbreivated checklist still addresses all CCDF health and safety and fire safety standards as established in WAC.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers

Monitoring visit practice is per agency <u>policy</u> and <u>procedure</u> 10.1.8.Licensed family home rules require providers to follow other regulations or have other inspections as required by state, county, or city ordinances. See WACs 110-300-0170, -0250, -0465, and -0415.

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- c) Licensed in-home CCDF child care
 - N/A. In-home CCDF child care (care in the child's own home) is not licensed in the State/Territory. Skip to 5.3.2 (d).
 - 1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards
 - 2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF in-home child providers

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.
- 5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers
- d) List the entity(ies) in your state/territory that are responsible for conducting prelicensure inspections and unannounced inspections of licensed CCDF providers DCYF, local health departments and the FIre Marshal are responsiable for pre-licensure inspections of child care centers, while DCFY is responsible for

unannouncedinspections.

DCYF and local health departments are responsible for pre-licensure inspections of family child care programs, while DCYF is responsible for unnanounced inspections.

Emergency temporary change: During the COVID-19 Outbreak effective February 29,2020 through September 30, 2021, DCYF suspended the requirement that these

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inspections be unannounced to support virtual monitoring, which requires visits to be announced. DCYFsubmitted a letter requesting waiver from the unannounced inspection requirement for this purpose and it was approved. DCYF is currently conducting virtual monitoring inspections. The waiver was requested to help reduce person-to-person transmissions of Covid-19.

Effective February 29, 2020 through September 30, 2021 DCYF recieved a waiver approval to not conduct pre-licensure inspection for all licensed providers. In order to maintain our process and onboard new providers to bolster the depleted supply of providers DCYF will utilyze a virtual inspection. DCYF's virtual inspection process provides for a baseline of health and safety standards. In addition, providers are still required to take training on all of the required topics, and the phone and virtual inspection processes enable us to communicate critical health and safety information to new providers and view their licensed space for potential issues.

5.3.3 Inspections for license-exempt CCDF providers

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:

Effective Date: 02/29/2020

a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

A certified license exempt Center, is held to all current DCYF licensing standards with regards to health, safety, fire, background check, and training. The site is monitored by a DCYF licensor; visits are annual and unannounced. A differential monitoring checklist may be utilized for annual visits. Certified centers include, for example, certified programs on Tribal land, or programs operated by OSPI.

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A certified for Payment Only license exempt Center is monitored by a separate entity to ensure it initially meets and maintains standards prescribed by its governing body: the federal military; a local, state or federal government; or the federally-recognized tribe. DCYF reviews to see that the governing body has standards related to health, safety, and fire.

Outdoor preschools participating in the pilot project are required to have at least one unannounced monitoring visit annually. DCYF's pilot program manager will inspect all sites for the outdoor preschool pilot program. In addition, these outdoor preschools must have an inspection by the state fire marshal if that preschool uses a built, physical facility for program use. Lastly, the local health department must test the water quality of such a facility prior to operation.

Emergency tempoary change: During the COVID-19 Outbreak effective February 29,2020 through September 30, 2021, the inspection requirement is waived and virtual visits are instead taking place.

Provide the citation(s) for this policy or procedure See <u>policy</u> and <u>procedure</u> 10.1.9.

b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

A certified license exempt family child care provider is held to all current DCYF licensing standards with regards to health, safety, fire, background check, and training. The site is monitored by a DCYF licensor and visits are annual and unannounced. A differential monitoring checklist may be utilized for annual visits. A certified for Payment Only license exempt family child care provider is monitored by a separate entitiy to ensure it initially meets and maintains standards prescribed by its governing body: the federal military; a local, state or federal government; or the federally-recognized tribe. DCYF reviews to see that the governing body has standards related to health, safety, and fire.

Emergency tempoary change: During the COVID-19 Outbreak effective February 29,2020 through September 30, 2021, the inspection requirement is waived and virtual

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visits are instead taking place.

Provide the citation(s) for this policy or procedure See policy and procedure 10.1.9.

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

Nonrelative FFN providers are required to receive announced monitoring annually on all health and safety and fire safety topics described in this Plan. DCYF License Exempt Specialists perform monitoring and provide coaching and technical assistance when they observe noncompliance with standards. Where compliance issues are noted and technical assistance is required, providers may receive follow up monitoring more frequently than the annual cycle. Relative FFN providers are exempt from monitoring requirements.

DCYF's pilot program manager conducts annual, unannounced inspections of all sites for the outdoor preschool pilot program.

Emegency Temporary Change: DCYF submitted a letter requesting waiver from the yearly monitoring inspection requirement for nonrelative FFN providers and it was approved. The waiver and this temporary change iseffective February 29, 2020 through September 30, 2021.

Provide the citation(s) for this policy or procedure WAC 110-16-0030 and WAC 110-16-0035.

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

■ No

Yes. If yes,

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decsibe:

Annual monitoring of non-relative FFN providers in the child's home focus on coaching and technical assistance to facilitate compliance with standards and training requirements. The standards adopted for this form of care, and the checklist used to monitor to them, are abbreviated in comparison to their licensed counterpart, and compliance with many standards is demonstrated through an Agreement between parent and provider documenting means of meeting requirements.

e) List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers

DCYF

5.3.4 Licensing inspectors.

Effective Date: 07/01/2019

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

a) To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers and that those inspectors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

Licensor candidates are required to have either of the following in order to become licnensors:

- A master's degree or higher in social work, a health or social science, public administration or a related field, and two years of professional experience in planning, administering, developing, or delivering social, financial, helath or chemical dependency treatment services programs; or

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- A bachelor's degree in social work, a health or social science, public administration or a related field, and three years of professional experience in planning, administering, developing, or delivering social, financial, health or chemical dependency treatment services programs; or
- One year of experience as a Social and Health Program Consultant 1

Licensors are required to complete all licensing basic training modules in the agency's Learning Management System in addition to four modules of training through the National Association of Regulatory Agencies (NARA). Additionally, new licensors receive hands on training from established licensors and work one on one with their supervisor on their individual progress. All licensors are required to review and acknowledge administrative and program policies and procedures. Licensors are also required to take Ethics in State Government training, Sexual Harassment training, and Diversity training.

b) Provide the citation(s) for this policy or procedure

The qualifications requirements for the licensor position are described in the DCYF Human Resources internal Position Description document (OFM 12-0002).

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

Effective Date: 3/1/2021

a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

Licensor ratios vary based on variables including travel time, travel distance, facility capacity, the provider types in a given licensing region, and language needs of providers. Licensors have a blended caseload of family child homes, centers, and school age programs with an average of 65 cases per licensor. In one licensing region, a not

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unusual licensor caseload might consist of 40 centers, 20 family homes, and 5 school age programs. DCYF licensing offices carefully assemble each licensor's caseload to achieve an equitable distribution of work, based on the above variables, that best assures child health and safety.

DCYF Policy and Procedure regarding assignment of licensor caseloads requires supervisors, where possible, not to assign caseloads exceeding 65 providers for each licensor.

For the first and second year of the outdoor preschool pilot project, the ratio of monitoring staff to outdoor preschools is 1:5. This ratio may increase in the third and fourth year of the pilot project, but would not increase beyond 1:20.

Emergency Temporary Change: DCYF submitted a letter requesting waiver from the health and safety monitoring requirements for providers who meet the state's definition of a Seasonal Camp as described in emergency licensing rules, WAC 110-310-0005. The same letter requested a waiver from monitoring requirements for non-relative Family, Friends, and Neighbors providers and from initial inspection requirements for emergency licensed providers. The waivers were approved. The waiver and a temporary change whereby monitoring is not required, and therefore ratio requirements for these provider types are waived, are effective February 29, 2020 through September 30, 2021. The state will maintain a baseline of health and safety for these providers by providing health and safety training, and, if such provider receives state subsidy, by prescribing health and safety standards in subsidy contracts for these providers.

b) Provide the policy citation and state/territory ratio of licensing inspectors
See Policy and Procedure 10.1.18 Maintaining Equitable and Effective Child Care
Licensing Caseloads here.

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

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state/territory exempt relatives from the inspection requirements listed in 5.3.3?

Effective Date: 10/01/2018

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.

DCYF exempts FFN providers who are relatives of the children they care for from all inspection requirements. However, these providers are subject to the same background check requirement as non-relative FFN providers, ensuring health and safety of children in relative care. Further, in the event of a parental complaint or abuse/neglect report about a relative FFN provider, DCYF will perform a complaint inspection according to the complaint process described in Section 2.

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.

5.4 Criminal Background Checks

No, relatives are not exempt from inspection requirements.

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

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

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

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check require+J514ments, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

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

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

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

Components	New (Prospective) Staff	Existing Staff
1. Criminal registry or repository using	Milestone/Prerequisite	Possible Time Limited

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fingerprints in the current state of residency	for Waiver Waiver for current (existing) staff		
2. Sex offender registry or repository check in the current state of residency	Milestone/Prerequisite for Waiver waiver Possible Time Limited Waiver for current (existing) staff		
3. Child abuse and neglect registry and database check in the current state of residency	Milestone/Prerequisite for Waiver Milestone/Prerequisite Waiver for current (existing) staff		
4. FBI fingerprint check	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff	
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)	Possible Time Limited Waiver for:Establishing requirements and procedures and/orConducting checks on all new (prospective) staff and/orConducting checks on current (existing) staff		
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional	Possible Time Limited Waiver for:Establishing requirements and procedures and/orConducting checks on all new (prospective) staff and/orConducting checks on current (existing) staff		
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for:Establishing requirements and procedures and/orConducting checks on all new (prospective) staff and/orConducting checks on current (existing) staff		
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for:Establishing requirements and procedures and/orConducting checks on all new (prospective) staff and/orConducting checks on current (existing) staff		

Use the questions below to describe the status of the requirements, policies and procedures for background check requirements. These descriptions must provide sufficient information to demonstrate how the milestone prerequisites are being met and the status of the other components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form, for components not included in the milestones. Approval of these waiver requests will be subject to verification that the milestone components have been met as part of the CCDF Plan review and approval process.

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In-state Background Check Requirements

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

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

Effective Date: 03/1/2021

- a) Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

DCYF requires all new licensed or regulated providers to receive a check of the Washington state criminal registry with fingerprints.

RCW 43.216.270, Chapter 110-06 WAC

Emergency Temporary Change: DCYF submitted a letter requesting waiver from certain background check requirements, including all fingerprint elements. The waiver was approved. The waiver and a temporary change whereby fingerprint background checks are temporarily not required are effective February 29, 2020 through September 30, 2021. The state will maintain a baseline of health and safety by administering a name/date of birth background check that includes a search of the state's criminal, sex offender, and abuse/neglect registries.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

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WCCC rules state that license exempt FFN providers are eligible to receive subsidy payments. WAC 110-15-0125. DCYF requires all new license-exempt CCDF eligible FFN providers to receive a check of the Washington state criminal registry with fingerprints. RCW 43.216.270, Chapter 110-06 WAC.

WAC 110-15-0125 also indicates that license exempt certifed American Indian programs, military programs, and child care facilities operated on public school property by a school district, are eligible to deliver CCDF services. DCYF policy and procedure governs approval of these programs.

Certified American Indian programs that do not use DCYF's background check process follow the background check process described in their approved CCDF plans. DCYF reviews documentation provided by these programs to determine if they meet state CCDF requirements before certifying them to receive state CCDF funds.

Certified military providers receiving state CCDF funds follow their established Department of Defense background check process which includes the national FBI fingerprint check along with the three in-state background check provisions: Washington state criminal registry, state sex offender registry, and Washington state abuse and neglect registry.

Certified child care facilities operated on public school property by a school district are subject to the same background check requirements and processes as licensed child care providers. DCYF's Portable Background Check unit processes these background checks in the same manner as for licensed providers.

Emergency Temporary Change: DCYF submitted a letter requesting waiver from certain background check requirements, including all fingerprint elements. The waiver was approved. The waiver and a temporary change whereby fingerprint background checks are temporarily not required are effective February 29, 2020 through the duration of the state-declared emergency period, not to exceed one year initially. The state will maintain a baseline of health and safety by administering a name/date of birth background check that includes a search of the state's criminal, sex offender, and abuse/neglect registries.

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b) Has the search of the in-state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

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

Describe:

- Effective October 1, 2018, DCYF implemented administrative rules requiring all new license exempt FFN providers to receive the in-state criminal background check with fingerprints. Existing FFN providers received the in-state criminal background check without fingerprints. Existing FFN providers will have one year, from October 1, 2018, to receive the in-state criminal background check with fingerprints. DCYF made the new background check free to providers and other subject individuals living in their homes (in cases where care takes place in the provider's home).
- DCYF is addressing the backlog of existing (as of October 1, 2018) FFN providers by requiring them to receive a background check with the milestone elements when their next background clearance is due, or by October 1, 2019, whichever comes first. Those FFN providers who received background clearance prior to October 1, 2018 will be subject to the new background check requirement. DCYF's Portable Background Check (PBC) unit will process these checks over the course of the year. DCYF is confident that it has sufficient resources to process all the required background checks within the 12 month timeframe.
- A key challenge in implementing the requirement is in the continued coordination between DCYF and DSHS, which authorizes payment to providers who meet background check (and all other) requirements. Prior to October 1,2018, DSHS conducted a less comprehensive FFN background check and approved FFNs to receive payment authorization. Given that DCYF conducts the more comprehensive background check with the required milestone elements, and also provides health and safety training and monitoring, the process of FFN approval has shifted from

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- DSHS to DCYF. Another critical challenge is in communicating the new requirement to providers.
- This shift in approval from DSHS to DCYF presents multiple coordination challenges. DCYF prioritizes a seamless transition for families and providers that minimizes background check processing times in order to ensure a successful transition. DCYF and DSHS developed an automated process for exchanging information about an FFN's background clearance status, timelines for background check renewal, and authorization termination in cases where background clearance is not received or lapses.

Emergency Temporary Change: DCYF submitted a letter requesting waiver from certain background check requirements, including all fingerprint elements. The waiver was approved. The waiver and a temporary change whereby fingerprint background checks are temporarily not required are effective February 29, 2020 through the duration of the state-declared emergency period, not to exceed one year initially. The state will maintain a baseline of health and safety by administering a name/date of birth background check that includes a search of the state's criminal, sex offender, and abuse/neglect registries.

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

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

Effective Date: 10/01/2018

- a) Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state sex offender registry.
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

When DCYF sends a fingerprint based background check application to Washington State Patrol (WSP), WSP will search the state sex offender registry and electronically return the results to DCYF for processing.

These requirements, policies, and procedures apply to all licensed or regulated

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providers, who submit an application for processing to DCYF as defined in both RCW 43.216.270 and WAC Chapter 110-06.

Individuals in early learning programs and individuals providing other department approved services who may have access to children in care must complete the comprehensive DCYF background check.

RCW 43.216.270, Chapter 110-06 WAC

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations When DCYF sends a fingerprint based background check application to WSP,WSP will search the state sex offender registry and electronically return the results to DCYF for processing.

WCCC rules state that license exempt FFN providers are eligible to receive subsidy payments. WAC 110-15-0125. DCYF requires all new license-exempt CCDF eligible FFN providers to receive a check of the Washington state criminal registry with fingerprints. RCW 43.216.270, Chapter 110-06 WAC.

WAC 110-15-0125 also indicates that license exempt certifed American Indian programs, military programs, and child care facilities operated on public school property by a school district, are eligible to deliver CCDF services. DCYF <u>policy</u> and <u>procedure</u> governs approval of these programs.

Certified American Indian programs that do not use DCYF's background check process follow the background check process described in their approved CCDF plans. DCYF reviews documentation provided by these programs to determine if they meet state CCDF requirements before certifying them to receive state CCDF funds.

Certified military providers receiving state CCDF funds follow their established

Department of Defense background check process which includes the national FBI
fingerprint check along with the three in-state background check provisions: Washington
state criminal registry, state sex offender registry, and Washington state abuse and

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neglect registry.

Certified child care facilities operated on public school property by a school district are subject to the same background check requirements and processes as licensed child care providers. DCYF's Portable Background Check unit processes these background checks in the same manner as for licensed providers.

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

✓ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

NA

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

Describe:

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

Note: This is a name-based search.

Effective Date: 07/01/2019

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- a) Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state child abuse and neglect registry.
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

When DCYF processes an application, it is electronically sent to DSHS/Background Check Central Unit (DSHS/BCCU). DSHS/BCCU searches and sends information from several sources which includes negative actions from Child Protective services, Aging and Long-Term Support Administration and Department of Health regarding professional license status. When the results are returned to DCYF, the DCYF background check team member assigned verifies the information received.

These requirements, policies, and procedures apply to all licensed and license exempt providers as required by RCW 43.216.270 and chapter 110-06 WAC. Individuals in early learning programs and individuals providing other department approved services who may have access to children in care must complete the comprehensive DCYF background check.

RCW 43.216.270 and chapter 110-06 WAC.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations When DCYF processes an application, it is electronically sent to DSHS/Background Check Central Unit (DSHS/BCCU). DSHS/BCCU searches and sends information from several sources which includes negative actions from Child Protective services, Aging and Long-Term Support Administration and Department of Health regarding professional license status. When the results are returned to DCYF, the DCYF background check team member assigned verifies the information received.

These requirements, policies, and procedures apply to all licensed and license exempt providers as required by RCW 43.216.270 and chapter 110-06 WAC. Individuals in early learning programs and individuals providing other department approved services who

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may have access to children in care must complete the comprehensive DCYF background check.

WCCC rules state that license exempt FFN providers are eligible to receive subsidy payments. WAC 110-15-0125. DCYF requires all new license-exempt CCDF eligible FFN providers to receive a background check which includes an in-state abuse and neglect registry check as described above. RCW 43.216.270, Chapter 110-06 WAC.

WAC 110-15-0125 also indicates that license exempt certifed American Indian programs, military programs, and child care facilities operated on public school property by a school district, are eligible to deliver CCDF services. DCYF policyand procedure governs approval of these programs.

Certified American Indian programs that do not use DCYF's background check process follow the background check process described in their approved CCDF plans. DCYF reviews documentation provided by these programs to determine if they meet state CCDF requirements before certifying them to receive state CCDF funds.

Certified military providers receiving state CCDF funds follow their established Department of Defense background check process which includes the national FBI fingerprint check along with the three in-state background check provisions: Washington state criminal registry, state sex offender registry, and Washington state abuse and neglect registry.

Certified child care facilities operated on public school property by a school district are subject to the same background check requirements and processes as licensed child care providers. DCYF's Portable Background Check unit processes these background checks in the same manner as for licensed providers.

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



Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

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NA

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

Describe:

National Background Check Requirements

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

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

Effective Date: 03/01/2021

- a) Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies and procedures for the search of the National FBI fingerprint check.
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

DCYF requires all new licensed or regulated providers to receive a national FBI

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fingerprint check.

When an application is submitted to DCYF, DCYF background check staff process it. DCYF sends the provider a fingerprint appointment form instructing them to schedule a fingerprint appointment with the contracted fingerprint vendor. The provider completes the appointment and the vendor electronically sends the fingerprints through for processing by WSP and FBI using Next Generation Identification.

RCW 43.216.270 and chapter 110-06 WAC

Emergency Temporary Change: DCYF submitted a letter requesting waiver from certain background check requirements, including all fingerprint elements. The waiver was approved. The waiver and a temporary change whereby fingerprint background checks are temporarily not required are effective February 29, 2020 through September 30, 2021. The state will maintain a baseline of health and safety by administering a name/date of birth background check that includes a search of the state's criminal, sex offender, and abuse/neglect registries.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations WCCC rules state that license exempt FFN providers are eligible to receive subsidy payments. WAC 110-15-0125. DCYF requires all new license-exempt CCDF eligible FFN providers to receive a check of the Washington state criminal registry with fingerprints and national FBI fingerprint check. RCW 43.216.270, Chapter 110-06 WAC. When an application is submitted to DCYF, DCYF background check staff process it. DCYF sends the provider a fingerprint appointment form instructing them to schedule a fingerprint appointment with the contracted fingerprint vendor. The provider completes the appointment and the vendor electronically sends the fingerprints through for processing by WSP and FBI using Next Generation Identification.

WAC 110-15-0125 also indicates that license exempt certifed American Indian programs, military programs, and child care facilities operated on public school property by a school district, are eligible to deliver CCDF services. DCYF policy and procedure governs approval of these programs.

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Emergency Temporary Change: DCYF submitted a letter requesting waiver from certain background check requirements, including all fingerprint elements. The waiver was approved. The waiver and a temporary change whereby fingerprint background checks are temporarily notrequired are effective February 29, 2020 through September 30, 2021. The state will maintain a baseline of health and safety by administering a name/date of birth background check that includes a search of the state's criminal, sex offender, and abuse/neglect registries.

Certified American Indian programs that do not use DCYF's background check process follow the background check process described in their approved CCDF plans.

Certified military providers receiving state CCDF funds follow their established Department of Defense background check process which includes the national FBI fingerprint check along with the three in-state background check provisions: Washington state criminal registry, state sex offender registry, and Washington state abuse and neglect registry.

Certified child care facilities operated on public school property by a school district are subject to the same background check requirements and processes as licensed child care providers. DCYF's Portable Background Check unit processes these background checks in the same manner as for licensed providers.

b) For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:

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

Describe:

- Effective October 1, 2018, DCYF implemented administrative rules requiring all new license exempt FFN providers to receive the FBI fingerprint criminal background check. Existing FFN providers did not receive the FBI fingerprint criminal background check. Existing FFN providers will have one year, from October 1, 2018, to receive the FBI criminal background check with fingerprints. DCYF made the new background check free to providers and other subject individuals living in their homes (in cases where care takes place in the provider's home).
- DCYF is addressing the backlog of existing (as of October 1, 2018) FFN providers by requiring them to receive a background check with the milestone elements when their next background clearance is due, or by October 1, 2019, whichever comes first. Those FFN providers who received background clearance prior to October 1, 2018 will be subject to the new background check requirement. DCYF's PBC unit will process these checks over the course of the year. DCYF is confident that it has sufficient resources to process all the required background checks within the 12 month timeframe.
- A key challenge in implementing the requirement is in the continued coordination between DCYF and DSHS, which authorizes payment to providers who meet background check (and all other) requirements. Prior to October 1,2018, DSHS conducted a less comprehensive FFN background check and approved FFNs to receive payment authorization. Given that DCYF conducts the more comprehensive background check with the required milestone elements, and also provides health and safety training and monitoring, the process of FFN approval has shifted from DSHS to DCYF. Another critical challenge is in communicating the new requirement to providers.
- This shift in approval from DSHS to DCYF presents multiple coordination challenges. DCYF prioritizes a seamless transition for families and providers that minimizes background check processing times in order to ensure a successful transition. DCYF and DSHS developed an automated process for exchanging information about an FFN's background clearance status, timelines for background check renewal, and authorization termination in cases where background clearance is not received or lapses.

Emergency Temporary Change: DCYF submitted a letter requesting waiver from certain background check requirements, including all fingerprint elements. The waiver was

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approved. The waiver and a temporary change whereby fingerprint background checks are temporarily not required are effective February 29, 2020 through September 30, 2021. The state will maintain a baseline of health and safety by administering a name/date of birth background check that includes a search of the state's criminal, sex offender, and abuse/neglect registries.

National Background Check Requirements

5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).

Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the instate (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

Effective Date: 10/01/2018

a) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

DCYF requires all new licensed or regulated providers to receive an NCIC NSOR check.

When an application is submitted to DCYF, DCYF background check staff process it. DCYF sends the provider a fingerprint appointment form instructing them to schedule a fingerprint appointment with the contracted fingerprint vendor. The provider completes the appointment and the vendor electronically sends the fingerprints through for processing by WSP and FBI using Next Generation Identification.

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RCW 43.216.270 and chapter 110-06 WAC

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

DCYF requires all new license exempt FFN providers to receive an NCIC NSOR check.

When an application is submitted to DCYF, DCYF background check staff process it. DCYF sends the provider a fingerprint appointment form instructing them to schedule a fingerprint appointment with the contracted fingerprint vendor. The provider completes the appointment and the vendor electronically sends the fingerprints through for processing by WSP and FBI using Next Generation Identification.

RCW 43.216.270 and chapter 110-06 WAC

- No. (Waiver request allowed. See Appendix A). Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:
- -- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- -- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)
- -- Key challenges to fully implementing this requirements
- -- Strategies used to address these challenges

Describe:

b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?

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Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

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- No. (Waiver request allowed. See Appendix A). Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:
- -- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- -- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
- -- Key challenges to fully implementing this requirements
- -- Strategies used to address these challenges

Describe:

- Effective October 1, 2018, DCYF implemented administrative rules requiring all new license exempt FFN providers to receive the NCIC NSOR check. Existing FFN providers do not receive the NCIC NSOR check. Existing FFN providers will have one year, from October 1, 2018, to receive the NCIC NSOR check. DCYF made the new background check free to providers and other subject individuals living in their homes (in cases where care takes place in the provider's home).
- DCYF is addressing the backlog of existing (as of October 1, 2018) FFN providers by requiring them to receive a background check with the NCIC NSOR check when their next background clearance is due, or by October 1, 2019, whichever comes first. Those FFN providers who received background clearance prior to October 1, 2018 will be subject to the new background check requirement. DCYF's PBC unit will process these checks over the course of the year. DCYF is confident that it has sufficient resources to process all the required background checks within the 12 month timeframe.
- A key challenge in implementing the requirement is in the continued coordination between DCYF and DSHS, which authorizes payment to providers who meet background check (and all other) requirements. Prior to October 1,2018, DSHS conducted a less comprehensive FFN background check and approved FFNs to receive payment authorization. Given that DCYF conducts the more comprehensive background check, and also provides health and safety training and monitoring, the process of FFN approval has shifted from DSHS to DCYF. Another critical challenge is in communicating the new requirement to providers.
- This shift in approval from DSHS to DCYF presents multiple coordination challenges. DCYF prioritizes a seamless transition for families and providers that minimizes background check processing times in order to ensure a successful transition. DCYF and DSHS developed an automated process for exchanging information about an FFN's background clearance status, timelines for background check renewal, and authorization termination in cases where background clearance is not received or lapses.

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Inter-state Background Check Requirements

Checking a potential employee's history in any state other than that in which the provider's services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43(b)(3). For example, an inter-state check would include situations when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resided during the previous 5 years. Background checks in the state where the staff member is employed may be advisable, but are not strictly required.

5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check (5.4.4 above) to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

Effective Date: 10/1/2020

a) Has the interstate criminal reg	stry or repositor	y check been	put in place	for all new
(prospective) child care staff?				

- Yes. If yes,
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations
 - ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations
- No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the interstate criminal registry or repository check for new

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(prospective) child care staff including:

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

Describe:

- DCYF is currently updating the web based system for background check processing to identify those providers that have an out of state address during the preceding five years. The requirements have been identified and DCYF IT staff are currently designing the upgrades to the system to provide for an efficient tracking of the identified applications.
- DCYF's web-based system can provide a report that identifies the current providers that have an out of state address during the preceding five years. Using this report DCYF background check staff members will implement the expanded search to the specific states using the search criteria provided by the individual states.
- A major challenge to successfully fulfill this requirement is creating a process that identifies the specific request criteria for each state. Since each state has its own method or criteria that must be used to successfully obtain the required information.
- The strategy used to address this challenge is contacting each state to obtain their criteria to fulfill the requests. DCYF will then update the web-based system for background checks that will house the individual state criteria and method of tracking the requests to bring as much efficiency to the process as possible.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

b) Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?

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Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

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

Describe:

- DCYF is currently updating the web based system for background check processing to identify thoseproviders that have an out of state address during the preceding five years. The requirements have been identified and DCYF IT staff are currently designing the upgrades to the system to provide for an efficient tracking of the identified applications.
- DCYF's web-based system can provide a report that identifies the current providers that have an out of state address during the preceding five years. Using this report DCYF background check staff members will implement the expanded search to the specific states using the search criteria provided by the individual states.
- A major challenge to successfully fulfill this requirement is creating a process that identifies the specific request criteria for each state. Since each state has its own method or criteria that must be used to successfully obtain the required information.
- The strategy used to address this challenge is contacting each state to obtain their criteria to fulfill the requests. DCYF will then update the web-based system for background checks that will house the individual state criteria and method of tracking the requests to bring as much efficiency to the process as possible.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

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5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

Effective Date: 02/03/2021

- a) Has the interstate sex offender registry or repository check been put in place for all new (prospective) child care staff?
 - Yes. If yes,
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations
 - ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations
 - No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:
 - -- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
 - -- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)
 - -- Key challenges to fully implementing this requirements
 - -- Strategies used to address these challenges

Describe:

- DCYF is currently updating the web based system for background check processing to identify thoseproviders that have an out of state address during the preceding five years. The requirements have been identified and DCYF IT staff are currently designing the upgrades to the system to provide for an efficient tracking of the

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identified applications.

- DCYF's web-based system can provide a report that identifies the current providers that have an out of state address during the preceding five years. Using this report DCYF background check staff members will implement the expanded search to the specific states using the search criteria provided by the individual states.
- A major challenge to successfully fulfill this requirement is creating a process that identifies the specific request criteria for each state. Since each state has its own method or criteria that must be used to successfully obtain the required information.
- The strategy used to address this challenge is contacting each state to obtain their criteria to fulfill the requests. DCYF will then update the web-based system for background checks that will house the individual state criteria and method of tracking the requests to bring as much efficiency to the process as possible.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been waived via an approved waiver, dated November 24, 2020. DCYF requested an extension of the waiver through Sepetember 30, 2021, which was also approved.

 b) Has the interstate sex offender registry or repository check been put in place for all curr 	en
(existing) child care staff?	
Describe, if applicable, any differences in the process for existing staff than what wa	as

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

described for new staff and provide citations.

Describe:

- DCYF is currently updating the web based system for background check processing to identify thoseproviders that have an out of state address during the preceding five years. The requirements have been identified and DCYF IT staff are currently

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- designing the upgrades to the system to provide for an efficient tracking of the identified applications.
- DCYF's web-based system can provide a report that identifies the current providers that have an out of state address during the preceding five years. Using this report DCYF background check staff members will implement the expanded search to the specific states using the search criteria provided by the individual states.
- A major challenge to successfully fulfill this requirement is creating a process that identifies the specific request criteria for each state. Since each state has its own method or criteria that must be used to successfully obtain the required information.
- The strategy used to address this challenge is contacting each state to obtain their criteria to fulfill the requests. DCYF will then update the web-based system for background checks that will house the individual state criteria and method of tracking the requests to bring as much efficiency to the process as possible.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been waived via an approved waiver, dated November 24, 2020. DCYF requested an extension of the waiver through Sepetember 30, 2021, which was also approved.

5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).

Note: This is a name-based search.

Effective Date: 10/1/2019

a) Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Under WAC 110-06-0070, all prospective child care staff, including licensed or regulated providers, are required to obtain background check clearance, including clearance as to abuse and neglect registries in states they have lived in the past five years.

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ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Under WACs 110-06-0070 and 110-16-0010, these requirements apply to all other providers eligible to deliver CCDF services, including license exempt FFN providers, among others.

- No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:
- -- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- -- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)
- -- Key challenges to fully implementing this requirements
- -- Strategies used to address these challenges

Describe:

b) Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

NA

- No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:
- -- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- --- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
- -- Key challenges to fully implementing this requirements

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-- Strategies used to address these challenges Describe:

Provisional Employment

The CCDF final rule states a child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2). A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF final rule, OCC will allow states and territories to request time-limited waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

- 1. the state requires the provider to submit the background check requests before the staff person begins working; and
- 2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below. (Waiver request allowed. See Appendix A). Check all that apply.

The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Describe and include a citation:
 The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but

Effective Date: 10/1/2020

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before receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A).

Describe and include a citation:

Current rules allow staff to care for children while awaiting background clearance, so long as they do not have unsupervised access to children. See WAC 110-06-0040(4). Providers must apply for the background check prior to beginning work. See WAC 110-06-0041.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

Other.	
Describe:	

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

Effective Date: 07/01/2019

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)).

When other states, territories, and tribes request criminal background and sex offender registry information from Washington, they are required to submit a request to through Washington State Patrol's Washington Access to Criminal History (WATCH) system. While no law or policy requires response within a certain timeframe, typical turnaround is two days. Further, Washington is a member of the Western Identification Network (WIN)

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comprised of 8 states that share fingerprint results. When a WIN state requests an FBI criminal background check they will receive Washington criminal information by virtue of WIN.

Regarding interstate abuse and neglect registry checks, requesting states, territories, and tribes are required to submit a form requesting this information and provide payment (see https://www.dshs.wa.gov/ca/child-safety-and-protection/child-abuse-and-neglect-can-founded-findings-requests-external-requestors). There is no law or policy dictating response timelines, but once completed forms are submitted to DCYF fiscal, they are logged and scanned the day received and processed within 7 business days. DCYF informs the requester whether there are founded findings, and providesinformation on how to request details through public disclosure. Most programs in other states, territories, and tribes disqualify on the basis of founded findings information without details.

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

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

Effective Date: 07/01/2019

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

■ No

Yes.

Describe other disqualifying crimes and provide citation:

DCYF rules include a list of disqualifying crimes that either permanently disqualify an individual or disqualify the individual for 5 years from date of conviction. This list includes various crimes other than those specifically listed in 98.43(c)(i) and is codified in WAC 110-06-0120 as the DCYF Directors's list of disqualifying crimes.

The following are crimes in the list that may not fall into the categories of crimes in 45 CFE 98.43(c)(i), starting with permanently disqualifying crimes, followed by those that disqualify for five years:

Permanent:

Controlled Substances Homicide

RCW 69.50.415

Drive-by shooting

RCW 9A.36.045

Extortion 1

RCW 9A.56.120

Homicide by Abuse

RCW 9A.32.055

Homicide by Watercraft

RCW 79A.60.050

Incendiary Devices

RCW 9.40.120

Incest 1 or 2

RCW 9A.64.020

Indecent Exposure (felony)

RCW 9A.88.010

Indecent Liberties

RCW 9A.44.100

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Indecent Liberties - Criminal Attempt

RCW 9A.28.020

Robbery 1

RCW 9A.56.20

Robbery 2

RCW 9A.56.210

Vehicular Assault

RCW 46.61.522

5-year:

Promoting Pornography

RCW 9.68.140

Promoting Prostitution 1

RCW 9A.88.070

Promoting Prostitution 2

RCW 9A.88.080

Promoting suicide attempt

RCW 9A.36.060

Prostitution

RCW 9A.88.030

Reckless Endangerment

RCW 9A.36.050

Residential Burglary

RCW 9A.52.025

Stalking

RCW 9A.46.110

Unlawful Imprisonment

RCW 9A.40.040

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5.4.12 The state/territory has a process for a child care staff member to appeal the the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3).

Effective Date: 07/01/2019

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)).

DCYF processes background checks using a secured web service that is accessed only by authorized department staff. The disqualification process is defined by WAC 110-06-0080 through 110-06-0115. The steps taken include notifying theprovider regarding the potentially disqualifying information, giving the provider time to provide new information, and processing and sending to the provider only, the disqualification letter through certified mail. The letter details options for the provider to challenge the department decision through administrative hearing as defined in chapter 110-03 WAC or a department reconsideration process.

5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)).

Effective Date: 10/01/2018

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)).

DCYF charges a \$12 application fee and the provider is charged \$43.50 for the fingerprint process. The \$12 fee covers only the cost for submission of the application, not the cost of processing the application. The fingerprint processing fee covers the cost set forth by the fingerprint vendor, WSP and FBI. Note that the background check is free for FFN

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providers and subject individuals in their households.

5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider.

Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

Effective Date: 10/01/2018

V	No, relatives are not exempt from background check requirements.
Г	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.
	NA

6 Recruit and Retain a Qualified and Effective Child Care Workforce

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

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers

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(658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

6.1 Professional Development Framework

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

Effective Date: 07/01/2019

- a) Describe how the state/territory's framework for training and professional development addresses the following required elements:
 - -- State/territory professional standards and competencies. Describe:

Washington State has professional standards and competencies for those who work in the areas listed below. The competencies are embedded within DCYF's professional development system and all Early Childhood Education (ECE) coursework, including state recognized training, higher education ECE certificates and degrees.

- Early care and education
- Children and youth
- Relationship based professional development
- Adult education and training
- Culturally responsive guidelines

-- Career pathways. Describe:

The ECE workforce career pathway begins with a comprehensive 30 hour pre-service

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training called Child Care Basics that can be completed in the community with a stateapproved trainer or as the first class in the college pathway to work towards an ECE state certificate.

In Washington, early learning professionals follow a career pathway requiring a progression through education credentials. Providers begin with stackable certificates as required by licensing regulation and offered by colleges across the state. This includes common courses and student outcomes. All courses are aligned with the Washington State Core Competencies for Early Care and Education Professionals. The courses that students are required to take will build on one another in a sequential manner and deepen levels of applied learning along the way. Washington is exploring alternative pathways built on competency demonstration to support workforce recruitment and retention.

For more information see here:

https://www.dcyf.wa.gov/sites/default/files/pdf/Stackable_Certificates.pdf

-- Advisory structure. Describe:

In 2017, Washington updated the advisory structure by launching the Early Childhood Education Workforce Council (Workforce Council). The Workforce Council's mission is as follows:

"The Early Childhood Education Workforce Council supports the development of Washington's qualified, diverse and competitively compensated educators across all early learning settings. The council focuses on ensuring that the degrees, certificates, and endorsements for early learning are progressive, valued, and transferable."

The Workforce Council is a cross-sector advisory body with representatives from community organizations, provider representatives, colleges and universities as well as state and federal agencies.

In addition to the Workforce Council, Washington has a well-established college and university advisory body with the Early Childhood Teacher Preparation Council (ECTPC). This council focuses on the quality outcomes for educators, ensuring alignment and consistency across the state for ECE degrees and certificates with a focus on quality and

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articulation. Washington State is a part of this group as an active stakeholder.

-- Articulation. Describe:

The state's stackable certificates serve as a critical beginning point of our state's success with articulation. Twenty-nine community and technical colleges offer the state's ECE Certificates that accumulate to a total of 47 credits. The state has articulation agreements for students who are completing Associate's degrees in ECE to continue on through their Bachelor's degree. The system is continually evolving to increase the number of articulation agreements from AAS degrees to Bachelor's degrees.

Over the past few years, Washington has experienced an increase in Bachelors of Applied Science being offered through the Community and Technical Colleges, increasing the number of options students have to go from an associate's degree in ECE through a bachelor's. State and locally implemented policy allows for recognition of the CDA as ECE credits within the college system.

-- Workforce information. Describe:

Washington's workforce registry, MERIT,holds information about the ECE workforce. This includes a personal profile, education, employment history, professional development and more. Providers are required to use the workforce registry to apply for and complete backgtround check but maintaining information such as education and employment is currently voluntary. Maintaining education and employment in MERIT will be required for all providers starting Fall 2019.

-- Financing. Describe:

The professional development system is financed by state and federal dollars. Example services funded include support resources such as scholarships, training reimbursements, and education awards, and other expenses such as contracting for training delivery, maintaining the workforce registry, and hosting a learning management system.

DCYF will be recommending strategies for addressing early childhood educator compensation by the end of calendar year 2019 to continue to explore options for expanding the existing quality framework to ensure financing of the workforce.

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- b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.
 - Continuing education unit trainings and credit-bearing professional development to the extent practicable

Describe:

Washington has a fully operationalized system for encouraging and recognizing creditbearing courses as continuing education.

Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework

Describe:

Washington has a history and current practice of engaging higher education and others in developing, defining, and aligning training and educational opportunities. The curriculum design process applied within DCYF includes intentional steps for stakeholder feedback. Ongoing partnerships with providers including higher education focus on aligning opportunities with the Core Competencies as an organizing framework.

Other
Describe:

6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.

The development of professional development requirements has evolved over the years. The original structure that created the early care and education competencies as well as the framework for the stackable certificates was a legislatively mandated group. Although that group has come to an end, the same partners sit at the table in both the Workforce Council and the Early Childhood Teacher Preparation Council. Although these two groups are different than the state's Advisory Council, representation that also sits on the state's advisory council is part of these groups and coordination for feedback occurs.

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Effective Date: 10/01/2018

6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).

The following aspects of the framework improve stability retention of caregivers, teachers and directors: Scholarships are available to support professionals to complete credentials and degrees; education awards are available and can be earned for certificates and degrees; and partnership with the Career and Technical Education division of our state's high school system and community and technical colleges allows high school students to complete the 30 hour pre-service requirement as a high school course, gain field experience, and in some areas complete credit-bearing coursework that counts towards the state's ECE Stackable Certificates. To improve quality, the state's QRIS program provides quality improvement awards and tiered subsidy reimbursement that can be applied to compensation improvements incentivizing progression through Early Achievers; Further, promoting retention, stability, and quality, professional development opportunities exist for providers to complete self-care courses independently or can work with developing their skills with their QRIS coach. Washington is further developing Instructional Leadership within the professional development framework to continue to expand the knowledge and skills of onsite leaders to provide reflective supervision and support as well as practices in mindfulness and reflection.

The following aspects of the framework improve diversity of caregivers, teachers, and directors: Stackable cerrtificates in languages other than English (including Spanish and Somali), training available English, Spanish, and Somali, with interpreters available for other language needs, and scholarship policy covering individuals without Washington State residency. Finally, DCYF is in the midst of preparing a report to the Legislature discussing diversity in the workforce with a focus on funding a compensation and benefits package for the ECE workforce comparable to K-3 educators.

Effective Date: 10/01/2018

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6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for preservice or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development framework (98.44(b)).

The Early Learning Guidelines (ELG) are an embedded part of the professional development system. Content developed by the agency and delivered by contracted professional development trainers follows a design process that incorporates a crosswalk to the ELGs.

State-approved trainers that deliver training in the community that are independent providers, must complete required training on the ELGs and incorporate these into their developed content.

DCYF's quality assurance program randomly observes trainers delivering training to ensure state expectations are followed.

Trainings are available that cover social emotional and mental health, such as trauma informed care, executive function and child development, provided by DCYF or identified contractors, also incorporating the ELGs. DCYF also weaves content for all of these topics

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into the 30 hour pre-service training, Child Care Basics, which also incorporates DCYF health and safety standards.

Outdoor preschools participating in the state's pilot project are required to follow all of the same requirements as licensed center child care providers and are therefore also aligned with the ELGs.

Effective Date: 10/01/2018

6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).

Washington's professional development system is designed to allow for personalization across communities. All training and higher education coursework aligns back to the state's competencies, allowing providers to develop professional development plans grounded in a progressive set of knowledge and skills while personalizing to meet the unique needs for each provider. Higher education partners serving tribal communities have provided outreach to tribal Head Start programs and Northwest Indian College has taken the initiative to modify the Stackable Certificates to embed content focused on native culture and traditions.

MERIT, the state's professional development registry, allows all child care providers, including those from tribal child care, to search for available professional learning opportunities in their communities, and access the trainings that are available through the learning management system. DCYF values having state-approved trainers who represent the communities they serve. Tribal state-approved trainers are able to deliver professional learning experiences specifically catering to the learning needs of their communities. Additionally, DCYF contracts with several professional development partners (Child Care Aware of Washington, Schools out Washington, Imagine Institute, Whatcom Community College, and Voices of Tomorrow) to deliver community-based training to child care providers across the state. These organizations advertise all of their learning opportunities online and via newsletters, and share information regarding other learning opportunities that are available with licensed and license-exempt providers and providers associated with the

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Tribes.

Effective Date: 10/01/2018

6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers:

Effective Date: 07/01/2019

a) with limited English proficiency

DCYF facilitates participation of providers with limited English proficiency by offering translation of important subsidy provider documents like Subsidy Billing Guides, subsidy notices to providers, and subsidy billing training for family child care providers. Subsidy providers can also contact DCYF Provider Line for information about their subsidy authorization, and DCYF workers have access to language link translation and interpreter services.

Further, DCYF offers professional development delivery for in-person training primarily in two ways: 1) provided by organizations through contract; and 2) provided by independent business owners who deliver state-approved training. DCYF offers training and resources to all state-approved trainers to enhance their ability to design content focused on competencies and with best practice for adult learners. Independent state-approved trainers are often located in communities, with many speaking the languages found within the region. For contracted training delivery, DCYF uses workforce data to define the scope of contract deliverables including location and language for training. This includes continuing education through community based training and delivery of the state's ECE Stackable Certificates offered by higher education institutions. The languages provided align with Washington's workforce data demographics. In order of prevalence, the languages are English, Spanish, and Somali. In addition to these languages offered, the state meets additional needs through on-site interpreters for in-person training.

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b) who have disabilities

All online subsidy information for provideers, and all training, including online subsidy billing training for family child care providers, follows ADA guidelines. In-person trainings, including subsidy billing trainings for family child care providers, are held in locations that offer access for persons with disabilities, such as at colleges, libraries and other community organizations. DCYF also makes available ASL intrperpretation at in-person trainings.

6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii--iv)).

All child care providers in Washington must complete Child Care Basics, a 30-hour preservice training that addresses the foundational concepts of working with children who have developmental disabilities. This training also provides information on the developmental continuum and offers providers theoretical information and practical skills to employ when working with different age groups of children. All DCYF-required trainings are developed in multiple languages.

Professional development requirements align with both best practice for children and best practice for educators of children, youth and their families. State early learning guidelines and professional competencies are embedded to guide the development of content and delivery of learning opportunities for professionals working with a variety of age groups.

The state adheres to a set of Professional Development Culturally Responsive Guidelines for the development of content and delivery and incorporates the state's racial equity framework. This includes the use of reflective questions to guide policy development, community focus groups to inform content and community based delivery models for training.

Training opportunities have been developed by the state and in partnership with other agencies to offer a menu of training topics for providers that serve children birth through age

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- 12 years. The goal is to provide reliable content that is culturally responsive and intentional about connecting the professional development offerings with community populations. Below are examples of curriculum Washington has designed and delivers focused on leveraging the knowledge and wisdom of communities:
- Since Time Immemorial Tribal Sovereignty Early Learning Curriculum: Focuses on embedding and honoring Native American culture and traditions in the early childhood learning environment, with lessons on tribal sovereignty, local tribal history, and contemporary issues as related to Tribes of Washington State. The Since Time and Immemorial training is developed and is under review for recommendations to scale statewide within tribal communities.
- Dual Language Learners Curriculum and Communities of Practice: Six hours of training content plus a community of practice model to engage educators and coaches in preserving home language while preparing children to become bilingual and honoring native languages for language retention.
- Washington's ECE Stackable Certificates offer a series of three certificates that serve as a starting point for an early childhood educator's career.

 Initial Certificate (1st certificate): Students can earn this certificate as the starting point of their career or to continue their professional development. The courses in this certificate provides a foundation of information and includes a 5-credit Introduction to Early Childhood Education; a 5-credit Health, Safety and Nutrition course, and a 2-credit practicum to apply learning.
- Short Certificate of Specialization (2nd certificate): This certificate builds on the Initial Certificate (for a total of 20 credits). At this point, professionals can choose one of five specializations: ECE general, infant-toddler care, school-age care, family child care, and ECE administration. For each specialization, students must take a 5-credit Child Development course, plus a course aligned with the specific specialization.
- ECE State Certificate (3rd certificate): This final "stackable certificate" includes Language and Literacy Development; Observation and Assessment; Child, Family and Community; Guiding Behavior; Environments for Young Children; and Curriculum Development. It also requires college-level math and English to prepare students for the next step: an associate degree in ECE. With all three certificates, the total number of credits earned by the student is 47.

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Effective Date: 07/01/2019

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

Effective Date: 07/01/2019

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).

Through DCYF's coaching framework, providers serving children receiving subsidy have access to an Early Achievers coach. The state's pre-service requirement Child Care Basics incorporates an intro to serving homeless children and their families and the content is also available in an online standalone module for all to access. This allows for providers and coaches to both be trained on serving children experiencing homelessness and for that learning and implementation of practice to happen within the coaching framework of the state's QRIS system.

b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.2.2).

All DCYF licensing staff are required to take the CCDF-related trainings on the Learning Management System (LMS), including a two-hour homelessness and trauma module. Further, the training opportunities for providers are also open to staff. The LMS hosts trainings for agency staff to learn about the same practices and content that providers learn about for serving children and families experiencing homelessness.

6.2.6 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply Effective Date: 07/01/2019

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

Providers receive annual monitoring visits where training history is reviewed. Inspectors are aware of CCDF requirements as expressed through subsidy rules and work with providers on comliance issues.

Other

Describe:

Subsidy providers are required to use DCYF's electronic attendance system or another, third party vendor DCYF-approved electronic attendance system. Providers using DCYF's system are required to attend system training in-person, online, or via self-paced materials. Training and the system functionality are both aligned to CCDF requirements as expressed in subsidy rules, and training and use of the system reinforce attendance requirements and the necessity to document attendance in order to receive payment. Providers can also use system reports from data sored in the cloud to assist them in claiming payment, instead of paper documentation that can be easily lost or misplaced.

DCYF also issues and updates Subsidy Billing Guides, tailored to each provider type, with information on compliant billing practices. DCYF keeps providers informed more broadly through social media (Facebook, Twitter, the DCYF blog, Youtube, and partner social media), email newsletter, webinars, flyers, postcards, community conversation events, and community partnerships.

6.2.7 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's

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business practices, which can include training and/or TA efforts.

Effective Date: 10/01/2018

a) Describe the strategies that the state/territory is developing and implementing for training and TA.

The state is in the process of updating licensing regulations to address business practice training for directors, lead teachers and family home licensees. Previous requirements indicated only center directors needed annual training in business practice. For all licensed providers, an initial licensing orientation includes information about basic business practice such as program operation and policies. Updated licensing regulations will further indicate which staff are required to receive this orientation.

The state contracts with community colleges to offer subsidy billing training to licensed family homes and FFN providers. The state is also collaborating with PD Contractors and local organizations to develop business practice training that will include policy development, business and fiscal management, recruitment, retention, leadership and creating a healthy work environment.

Finally, DCYF is working to make billing rules easier to understand and follow. DCYF changed the rules in July 2017 to allow authorizations to be automatically changed for summer break changes. The automation reduced the error rate and the amount of time needed to process the change. Further, all providers receiving subsidy were required to use electronic attendance starting July 2018. All providers using DCYF's electronic attendance system receive electronic attendance training prior to receiving the new software.

- 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

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- Marketing and public relations
- Parent-provider communications, including who delivers the training, education, and/or technical assistance
- **Other**

Describe:

The state's strategies also include a topic on creating a healthy work environment, including self-reflection, reflective supervision and developing resilience.

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.

Effective Date: 07/01/2019

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 ELGs were established in 2005 and updated in 2012. They range from birth through Grade 3 and are grounded in research and completed in partnership with community and provider representation. A DCYF team revised and updated these guidelines with thorough review from participants from higher education, community based organizations, and state agencies. The guidelines were aligned with other states as well as national frameworks such as the National Association for the Education of Young

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Children to ensure alignment with research. DCYF revised the ELGs in 2012 with a deliberate equity and cultural relevance lens.

The Early Learning and Development Guidelines were designed in conjunction with the Office of Superintendent of Public Instruction, and address the needs of children birth through age eight. The ELGs align with the kindergarten through third grade expectations, including Common Core Standards, and also address social and emotional development. The Office of Superintendent of Public Instruction has also implemented the Washington Kindergarten Inventory of Developing Skills (WaKIDS) that has an Early Learning Collaboration component to promote a shared understanding of kindergarten readiness between early learning providers and the k-12 system.

b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry.

DCYF developed the revised ELGs to be appropriate for children birth through third grade, consulting current research and recognized standards by child age group. Further, when DCYF revised the ELGs in 2012, it consulted with an equity team that guided the workgroup and its revision process, producing an ELG with an inclusive, strengths-based approach.

c) Verify by checking the domains included in the state/territory's early learning and
developmental guidelines. Responses for "other" is optional

Cognition,	including	language	arts and	mathematics

Social 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 similar coordinating body.

The ELGs are an embedded part of the professional development system, serving our

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QRIS, training, trainer quality assurance, and curriculum development, and informing the common coursework in the ECE certificates offered at community colleges around the state. The advisory bodies for the state and for each effort listed above are all familiar with the ELGs and recognize the value they bring to the early learning community.

The Early learning and Development Guidelines are reviewed by the Early Learning Advisory Council in the development and implementation phases. This group will be involved in any revisions planed for the future. OSPI has played an instrumental role in the development of the guidelines by ensuring alignment with kindergarten through third grade academic expectations.

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 ELGs were established in 2005 and updated in 2012. They are now scheduled to be

reviewed/revised every five years and will be revisited again by the beginning of 2020.

f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards

In 2012, the ELGs were revised to address out-of-school time standards. DCYF participated in a 51-member Guidelines Development Committee that included representatives from the State OSPI. Through a process of mutual agreement, the committee developed the school age aspects of the ELGs along Guiding Principles established by the committee and published in the ELGs, including "Us[ing] a reflective process to update the Guidelines, incorporating feedback based on the experiences of families, caregivers, providers, teachers, other early learning professionals, and current and culturally inclusive research."

g) Provide the Web link to the state/territory's early learning and developmental guidelines.

https://del.wa.gov/sites/default/files/imported/publications/development/docs/guidelines.p

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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 ELGs are used throughout the professional development system, serving our QRIS, training and trainer quality assurance, and curriculum development, and informing the common coursework in the ECE certificates offered at community colleges around the state. In addition to the system integration, providers use the ELGs to communicate with families about various milestones and child development. Included in the ELGs are age ranges, guidance on determining a child's stage of development, and ideas for scaffolding child learning and interest. The ELGs clearly call out that they should not be used as a child development checklist, program eligibility criteria, or to assess children.

Effective Date: 10/01/2018

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

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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

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kindergarten entry are possible.

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

This section covers the quality activities needs assessment 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)).

DCYF quality activities are integrated into Early Achievers, Washington's QRIS framework. DCYF currently assesses the needs of early learning providers using a comprehensive selection of reports, resources, and stakeholder engagement strategies. Partners meet monthly to discuss progress and challenges within the Early Achievers system. This information informs policy and practice changes. The Early Achievers Review Subcommittee meets quarterly. This group addresses barriers, reviews proposals to improve Early Achievers, and provides recommendations to DCYF. DCYF is currently developing a continuous quality improvement framework for the QRIS system so that changes occur on a more defined cycle. This framework will include the timeline that defines when analysis or system reflection will occur, when planning for system changes will happen, the minimum selection of data sources to consider, and the steps DCYF will take to engage stakeholders.

Statewide data that is continuously collected in Early Achievers is reported to DCYF and forms the basis of reports that are outlined below. DCYF reviews these reports with stakeholder input and this forms the assessment process. Each report listed below will clarify the frequency of review and participants involved. The reports and resources DCYF uses

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include the following:

Early Achievers Participant Monitoring Report: this includes all providers that have a mandated timeline related to Early Achievers. A version of this report, the Early Achievers Participant Monitoring and Private Pay Report, includes all licensed and certified providers that may serve children birth to five (school-age only sites do not display on this report). This report includes private pay providers that can choose to participate in Early Achievers as well as the sites that are mandated to participate.

All pertinent data points are presented in both versions of the report including but not limited to the provider ID, Early Achievers Registration deadlines and the actual date of registration, contact information, rating outcome, language, and race/ethnicity data.

The data in these reports are updated daily, which ensures the ability to track incremental progress, on demand.

Both versions of the participant monitoring reports are available in the agency's MERIT data system. All DCYF staff, CCA QRIS staff, and UW QRIS staff have access to the two versions of the monitoring report. These tools inform many elements of Early Achievers including coaching, professional development, and data collection cohort planning.

The Early Achievers Data Dashboard: this document provides a high-level overview of the entire landscape of eligible providers and helps us track participation and rating data. This document is accessible on the DCYF website, here:

https://www.dcyf.wa.gov/sites/default/files/pdf/reports/2018_04%20EA_Dashboard.pdf

The Early Start Act Annual Report: the Early Achievers Review Subcommittee and DCYF staff review key Early Achievers data each year as directed by RCW 43.215.102, which is linked here: http://app.leg.wa.gov/rcw/default.aspx?cite=43.215.102. The 2016 Annual Report is linked here:

https://www.dcyf.wa.gov/sites/default/files/pdf/reports/2017_Early_Start_Act_Report.pdf

In addition to the birth to five QRIS, DCYF and the Office of the Superintendent of Public Instruction and community partners are currently engaged in a school-age and youth QRIS pilot called the Expanded Learning Opportunities Quality Initiative and Sparkwind Movement:

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https://www.youtube.com/watch?v=QQN2MdVZKOw&feature=youtu.be. This pilot includes 50 sites in four counties across the state. Participants include Licensed Family Home Child Care sites, Licensed Child Care Centers, Youth Development Programs, Licensed School-Age Child Care and 21st Century Community Learning Centers. Approximately 1,100 youth have participated in this initiative thus far. The University of Washington is engaged in an evaluation of the Out of School Time Quality Initiative. Initial findings and recommendations were submitted to the Washington's State Legislature in the fall of 2017. You can access that report here: https://www.dcyf.wa.gov/sites/default/files/pdf/reports/expanded-learning-opportunities-quality-initiative.pdf. These findings will inform DCYF's decision to take the pilot to scale and incorporate the program into DCYF's portfolio of quality investments.

Effective Date: 07/01/2019

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.

DCYF quality activities are integrated into Early Achievers, Washington's QRIS framework. Based on feedback from partners, participants, the Early Achievers Review Subcommittee, and participation data, DCYF has noted several areas for improvement for Early Achievers, summarized as follows:

Key Findings and Goals for 2017: Identify and correct barriers to Early Achievers enrollment and participation.

- Finding: Taking an orientation course prior to enrolling in Early Achievers was a barrier to participation. Goal: Remove mandatory orientation prior to enrollment
- Finding: There were barriers to the Early Achievers Application process. Providers were required to complete an environment self- assessment as part of the application process. This required an effort of time and often conflicted with coach feedback which led to delay of continuous quality improvement. Goal: Remove mandatory self-assessment from the application process.
- Finding: There were barriers to the Early Achievers Application process. Providers were required to fill out a facility profile with detailed information about their facility which was

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shown to be an additional barrier. Goal: Remove the requirement to fill out a facility profile in the application process.

- Finding: New facilities needed to receive a Full License in order to receive Level 2 status in Early Achievers. This could take up to 6 months and delayed the entry of new facilities into QRIS. Goal: Allow facilities to begin Level 2 activities upon receiving an Initial License to streamline the process.

Key Findings and Goals for 2018:

- 1) Streamline and align Early Achievers Standards with new Licensing regulations.
- Finding: Duplication existed between Licensing, Early Achievers, and State Preschool Standards. Goal: Eliminate duplication and create a progression of quality between Licensing, Early Achievers and State Preschool.
- Finding: Some standards were not linked with positive child outcomes. Goal: Streamline standards to those that show promise related to positive child outcomes.
- 2) Provide more transparency for Early Achievers participants around the data that is collected which results in a rating.
- Finding: ECE providers need more information about the "why" behind the rating. Goal: Increase access to rating data through an appeal process to provide more information to participants.
- Finding: Providers do not receive information about their ratings in our current data system. Goal: Build a "provider portal" in the new data system so that providers and all support personnel can have access to a high level of information about the data
- 3) Commit to promote racial equity, supporting linguistically and culturally diverse providers and work to ensure access to high quality care for all children regardless of race, income, or ability.
- Finding: QRIS was not developed with a specific equity lens. Goal: QRIS Team Equity Work Group developed a Theory of Change to ensure ongoing stakeholder engagement and feedback loops for issues of equity within Early Achievers.
- Finding: Early Achievers Review Subcommittee members were not representative of many

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communities. Goal: Increased outreach and participation for members from more diverse communities and stakeholder groups.

Effective Date: 07/01/2019

7.2 Use of Quality Funds

7.2.1 Check the quality improvement activities in which the state/territory is investing Effective Date: 05/16/2020

- Supporting the training and professional development of the child care workforce If checked, respond to section 7.3 and indicate which funds will be used for this activity. Check all that apply.
 - CCDF funds
 - Other funds

Describe:

General fund-state dollars.

- Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity. Check all that apply.
 - CCDF funds
 - Other funds

Describe:

General fund-state dollars.

- 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

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	✓ Other funds
	Describe:
	General fund-state dollars.
V	Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply
	▼ CCDF funds
	☑ Other funds
	Describe:
	General fund-state dollars.
V	Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.
	▼ CCDF funds
	✓ Other funds
	Describe:
	General fund-state dollars.
V	Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.
	▼ CCDF funds
	▼ Other funds
	Describe:
	General fund-state dollars.
	Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.
	▼ CCDF funds
	▼ Other funds
	Describe:

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General fund-state dollars.

	Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.
	CCDF funds
	Cother funds
	Describe:
V	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.
	✓ Other funds
	Describe:
	General fund-state dollars.
	Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply
	☑ Other funds
	Describe:

In May, 2020, DCYF offered support to licensed child care providers as part of its COVID-19 response in the form of a grant to any licensed child care provider in Washington State thatwas open on the date of the grant release and providing child care. This supported family access to high quality care during a time when many providers had been forced to close, or were in danger of closing, due to COVID-19 and social distancing requirements.

General fund-state dollars.

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7.3 Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds

Lead Agencies can invest in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 in addition to the following (98.53(a)(1)).

7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce

Effective Date: 07/01/2019

- a) Check and describe which content is included in training and professional development activities and describe who or how an entity is funded to address this topic. Check all that apply.
 - Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies

Describe:

DCYF funded the development of Early childhood training in Child Care Basics and in stand-alone training modules focused on the state's competencies. DCYF hosts these trainings through a Learning Management System (LMS). DCYF also funds Child Care Aware of Washington to develop and deliver no cost training to child care providers in community settings or online. DCYF funds the University of Washington to deliver minimal cost Early Achievers Institutes for participants with training focused on the ERS And CLASS tools. DCYF funds scholarships for professionals to attend college focusing on stackable certificates that lead to an AA or BA in ECE. Staff at DCYF provide free training for state preschool staff. Training adheres to state guidelines for culturally responsive professional development and other professional development standards such as the state's core competencies. Training is available in multiple languages and modalities. DCYF designed its quality assurance model to observe and monitor state-approved training for content quality and adherence to adult learning principles.

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Child Care Basics and stand-alone training modules cover attachment, serve and return interactions, responsive caregiving, Promoting First Relationships, identifying emotions, Pyramid Model modules, Filming Interactions to Nurture Development (FIND), and developing mindfulness practices training. DCYF hosts these trainings through an LMS. The course work for the state early childhood education stackable certificates also includes these topics. Additionally, contracted community based organizations deliver training that addresses the content. QRIS coaches further support providers to implement the new skills and information they learned from training and professional development. Further training to increase nutrition and physical activity is under development. Resources and training for coaches in this topic area is in the implementation phase. DCYF coordinates with the Coalition for Safety and Health in Early Learning, University of Washington and CCA.

Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.5.)

Describe:

Executive function, trauma informed care, Flip It-challenging behaviors, equity focused positive behavior support, toddler behavior challenges, bullying, and building resilience training are allincluded in Child Care Basics. DCYF hosts these trainings through an LMS. The course work for the state early childhood education stackable certificates also addresses these topics. Additionally, contracted community based organizations deliver training that addresses the content. QRIS coaches further support providers to implement the new skills and information they learned from training and professional development.

Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development

Describe:

Families Moving Forward, Strengthening Families, welcoming LGBTQ families, cultural responsiveness, developing policies and handbooks, and family conferences trainings are allincluded in Child Care Basics. DCYF hosts these trainings through an LMS. The course work for the state early childhood education stackable certificates

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also addresses these topics. Additionally, contracted community based organizations deliver training that addresses the content. QRIS coaches further support providers to implement the new skills and information they learned from training and professional development. Early Achievers participants are required to attend a six-hour training on the Strengthening Families Framework and the Five Protective Factors. The Five Protective Factors are (1) Parental Resilience, (2) Social Connections, (3) Concrete Support in Time of Need, (4) Knowledge of Parenting and Child Development, and (5) Social and Emotional Competence of Children. More information about Strengthening Families and the Five Protective Factors is accessible here:

https://www.cssp.org/reform/strengthening-families/basic-one-pagers/Strengthening-Families-Protective-Factors.pdf. Coaching for Early Achievers participants helps them implement family engagement strategies with a focus on cultural responsiveness and the Strengthening Families framework.

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:

Training adheres to state guidelines for culturally responsive professional development and other professional development standards such as the state's core competencies and covers developmentally appropriate practice, classroom assessment, child assessment, project based learning, Teaching Strategies Gold, Creative Curriculum, Since Time Immemorial, Deep Dive Environment Rating Scales, supporting dual language learners, and room arrangement to maximize engagement. Training is available in multiple languages and modalities. DCYF designed it's quality assurance model to observe and monitor state-approved training for content quality and adherence to adult learning principles. Early Achievers participants, as well as participants in the Expanded Learning Opportunities pilot and the Outdoor Preschool Pilot, have access to low cost, high quality training on a range of topics at Early Achievers and Expanded Learning Opportunities Institutes. Training sessions include topics such as supporting dual language learners, supporting children with challenging behaviors, deep dive sessions on the Environment Rating Scales, room arrangement to maximize child engagement, curriculum implementation on curricula such as Creative Curriculum and High Scope, and several other sessions. DCYF offers Early

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Achievers and Expanded Learning Opportunities Institutes two to three times per year. Institutes occur on both sides of the state and include sessions in Spanish and Somali as well as English. Participants who speak other languages can participate in sessions using headset translation/interpretation devices. In 2017, DCYF offered an Institute in Central Washington where all sessions, including the keynote address, were in Spanish with translation and interpretation offered in other languages. This institute was a great success given that the majority of early learning providers in that region identify Spanish as their primary language.

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:

These are included in Child Care Basics, Strengthening Families, and Early Learning Guidelines. DCYF hosts these trainings through an LMS. The course work for the state early childhood education stackable certificates also addresses these topics. Additionally, contracted community based organizations deliver training that addresses the content. QRIS coaches further support providers to implement the new skills and information they learned from training and professional development.

DCYF also funds ECEAP contractors to provide comprehensive services to children including health screening, developmental screening, family advocacy, mental health consultation. Families are also connected to resources in the community for supports such as food disparity, basic education attainment, medical home, mental health or developmental interventions.

✓ Using data to guide program evaluation to ensure continuous improvement

Describe:

DCYF hosts these trainings through an LMS. The course work for the state early childhood education stackable certificates also includes these topics. Additionally, contracted community based organizations deliver training that addresses the content. QRIS coaches further support providers to implement the new skills and information they learned from training and professional development. Early Achievers coaching is data driven. Providers use their facility rating data to develop quality improvement

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goals. Coaches facilitate communities of practice as well as offer training or connect providers to training to support their data driven quality improvement efforts.

☑ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment

Describe:

This is included in Child Care Basics, Trauma Informed Care, Strengthening Families, and Mobility Mentoring/Executive Function trainings. These trainings are offered through our LMS. Training content is also embedded within the state's ECE Stackable certificates and community based training that is delivered through contracted community based organizations. Content is reinforced by our QRIS coaches.

Caring for and supporting the development of children with disabilities and developmental delays

Describe:

This content is included in Child Care Basics. DCYF hosts these trainings through an LMS. The course work for the state early childhood education stackable certificates also addresses these topics. Additionally, contracted community based organizations deliver training that addresses the content. QRIS coaches further support providers to implement the new skills and information they learned from training and professional development.

Supporting the positive development of school-age children Describe:

An array of trainingsis available at the Early Achievers and Expanded Learning Opportunities Institutes that target practical skills development for staff who work with school age children and youth. Trainings complement Youth Program Quality Assessment and the Youth Work Methods Series, both available through the David P. Weikart Center for Youth Program Quality. More information about the Youth Work Methods Series is accessible here:

http://www.cypq.org/products and services/training/YWM.

Other	
Describe:	

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state/t	erritory financial aid or other resources to pursue post-secondary education nt 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
Des	scribe:

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

DCYF measures CCA's progress in improving the quality of child care programs and services by provider volume in the QRIS system – both the number of programs rated and those that have requested onsite evaluation. Providers in the system receive relationship based professional development services such as coaching and training. Progress is further quantified by the quality rating level achieved by individual child care and early learning programs. DCYF usesits Data Dashboard to show that coaching and training is having an impact on participant volume as well as program quality improvement.

Further, DCYF designed its quality assurance model to observe and monitor state-approved training for content quality and adherence to adult learning principles. DCYF uses MERIT, a state registered training system to record training content and completion for professionals, programs and trainers. Review of state approved training for all professionals is completed during the rating cycle as well as during licensing monitor visits.

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Effective Date: 10/01/2018

7.4 Quality Rating and Improvement System (QRIS)

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

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

7.4.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement? Effective Date: 07/01/2019

	No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.
	No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.
V	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.
	DCYF administers Washington's QRIS, Early Achievers. Early Achievers focuses on
	children from birth through age five, though DCYF is engaged in a QRIS pilot for
	school-age children and youth, as discussed in section 7.1 above. CCA provides
	relationship based professional development such as coaching and training.

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Regionally located teams from the University of Washington conduct data collection

and on-site evaluation. More information about Early Achievers is found here:

https://www.dcyf.wa.gov/services/early-learning-providers/early-achievers.

Yes, the state/territory has a QRIS initiative operating as a pilot-test in a

few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.
Provide a link, if available.
Yes, the state/territory has another system of quality improvement
If the response is yes to any of the above, describe the measureable indicators of
progress relevant to this use of funds that the state/territory will use to evaluate its
progress in improving the quality of child care programs and services within the
state/territory and the data on the extent to which the state or territory has met these
measures.

DCYF measures the quality of child care and early learning programs and services through the overall facility rating outcomes as well as subcomponent scores in the rating such as the facility average ERS and CLASS score. In addition to facility rating information, DCYF completes an annual comprehensive report on the progress of quality improvement.

7.4.2 QRIS participation

Effective Date: 02/29/2020

- 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).

All providers that receive subsidy must enroll in Early Achievers within thirty days of receiving their first subsidy payment. These providers must rate at a Level 3 or higher within thirty months of registering for Early Achievers or they will lose their subsidy eligibility. As of 2018, Participating sites receive a 2% tiered subsidy incentive for up to thirty months. Once a provider rates at Level 3 or higher, they have access to higher levels of tiered reimbursement.

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According to the Early Achievers Operating Guidelines, facilities that receive a Level 3 through 5 rating and serve children receiving subsidies are eligible to earn a higher incentive added to the base rate as follows. The following reflect the 2019 rates:

- Family home child care programs*:

Level 3: 12% above the base rate

Level 4: 17% above the base rate

Level 5: 20% above the base rate

*Family home child care tiered reimbursement rates are negotiated with SEIU 925.

- Center-based providers:

Level 3: 8% above the base rate

Level 4: 15% above the base rate

Level 5: 20% above the base rate.

The tiered reimbursement rates are a percentage increase over the base rate at any given time. Any time the base rate increases, the reimbursement incentive is applied to the higher base rate. Tiered reimbursements are paid for the full month and based on the facility rated level on the first day of the month of service. Tiered reimbursement payments will be received the month after the base subsidy rate payment for the same time period.

DCYF is also administering a voluntary QRIS pilot for sites that serve school-age and youth. This pilot is known as the Expanded Learning Opportunities Quality Initiative.

Emergency Temporary Change: Effective starting the effective date of Proclamation 20-05 on February 29, 2020 and continuing through up to 60 days after its end date, DCYF suspended the requirement that providers receiving subsidy payments, or participating in ECEAP must participate in Early Achievers while social distancing requirements made in-person assessment impossible. For this period, participation and rating timelines are waived, and providers are held harmless as to those timelines if they timely requested a rating such that the could have met the timelines requirements were it not for the the outbreak preventing assessment. These providers continue to receive tiered reimbursement and quality improvement awards

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commensurate with their current rating. In person coaching was temporarily repalced
with virtual coaching during this period.
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
✓ Head Start programs
✓ State prekindergarten or preschool programs
Local district-supported prekindergarten programs
✓ Programs serving infants and toddlers
✓ Programs serving school-age children
▼ Tribally operated programs
Other
Describe:

7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

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

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□ No
Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system).
Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
Programs that meet all or part of state/territory school-age quality standards.
Other.
Describe:
DCYF created a process in partnership with the Early Achievers Review
Subcommittee (EARS) to award five points in Early Achievers for providers who have
a current national accreditation certificate from defined agencies: American Montessori Society, National Association for the Education of Young Children, the
National Association of Family Child Care, the National Accreditation Commission for
Early Care and Education Programs, and AdvancED. DCYF also developed an application process so that providers and/or national accreditation agencies can
request a review by DCYF for consideration in Early Achiever. DCYF processes them
on a quarterly basis. DCYF does not provide funds or resources to support providers
who wish to become nationally accredited.
.4.4 Do the state/territory's quality standards build on its licensing requirements and
ther regulatory requirements?
Effective Date: 10/01/2018

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■ No

Total Control of the	es, check any links between the state/territnsing requirements	tory's quality standards
	ires that a provider meet basic licensing rease level of the QRIS.	equirements to qualify for
☑ Embe	eds licensing into the QRIS	
☐ State/	/territory license is a "rated" license	
Other.		
Describe:	:	
7.4.5 Does the sta	ate/territory provide financial incentives	and other supports designed to
expand the full div	iversity of child care options and help c	hild care providers improve the
quality of services	s that are provided through the QRIS	F((): D / 10/04/0040
		Effective Date: 10/01/2018
□ No		
-	es, check all that apply	
- Indiana	ime grants, awards, or bonuses.	
	ing or periodic quality stipends	
-	er subsidy payments	
✓ Trainir	ing or technical assistance related to QRIS	3.
Coach	hing/mentoring.	
Schola	arships, bonuses, or increased compensat	tion for degrees/certificates
interest.	rials and supplies	-
☑ Priority		
▼ Tax cr	ty access for other grants or programs	
Browned.	ty access for other grants or programs redits (providers or parents)	
	redits (providers or parents) ent of fees (e.g., licensing, accreditation)	
Payme	redits (providers or parents) ent of fees (e.g., licensing, accreditation)	

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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

DCYF uses a variety of sources to measure progress. The Early Achievers data dashboard provides a month-by-month snapshot of participant data including rating outcomes. DCYF looks for increases in the conversion rate for providers with a quality rating—this means that more providers are rating at Level 3 or higher and fewer are rating at Level 2. DCYF reviews cohort data reports to see where providers scored on the subcomponents of the quality standards. DCYF looks for increases in scores in the standards as well as growth on the Environmental Rating Scale (ERS) and Classroom Learning Assessment Scoring System (CLASS) scores. Each summer, DCYF reflects on the previous fiscal year and evaluates the successes and challenges within Early Achievers. DCYF assembles this information in the Early Start Act Annual Report.

Effective Date: 10/01/2018

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

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs. Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

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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

Effective Date: 07/01/2019

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:

☑ Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers

Describe:

To improve the quality of center-based and family home infant/toddler child care, DCYF supports the provision of comprehensive services through partnerships between child care providers and Early Head Start. The Consortium for High Quality infant/toddler care was established to support Early Head Start-Child Care Partnership grantees.

Consortium partners agreed to contribute resources and develop policy supports that prioritize services for programs that participate in the Consortium. In turn, programs contribute to statewide understanding about what resources, practices and strategies infant/toddler programs need to implement high quality care and services. DCYF convened a cross-sector professional development consortium to establish formal connections between higher education, state partners, and the early learning workforce.

Further, DCYF funded an infant-toddler workforce initiative which included qualitative research analysis of the number of specialized higher education courses, related field experiences and ongoing professional development opportunities with a sole focus on the prenatal and/or birth to age three age group and their families within the Washington

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higher education system to include infant mental health. Gaps were identified in the content areas of specialized coursework in general ECE classes related to infant and toddler development. In addition, there is a gap in knowledge among the higher education community related to topics of infant toddler development that may affect the the design and delivery of specialized coursework. This analysis resulted in recommendations which include:

- -Supporting 2 and 4 year higher education institutes in increasing breadth and depth of content focused on prenatal to three
- -Aligning content with critical competencies for the infant-toddler workforce
- -Infusing Washington Association for Infant Mental Health endorsement preparation in infant-toddler coursework.
- 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:

DCYF provides interdisciplinary infant/toddler early learning coaching through a regionally-based, statewide network of qualified infant-toddler specialists. Coaching is provided to licensed child care centers and family child care homes serving children on state subsidy within the state QRIS to improve the quality of care for infants and toddlers. DCYF funds a statewide network of infant mental health consultants that provide consultation or training within the state QRIS to include the following focus areas: child development, developmental screening, reducing expulsion, connecting families with referral resources, and strategies for inclusion. They also provide training and mentoring on developmental screening and include strategies for engaging families in screening, sharing results of screening and resources for further assessment or services if necessary. The infant/toddler specialist network also delivers training and mentoring to increase positive adult-child interactions and classroom quality through the intervention of Filming Interactions to Nuture Development (FIND). This video coaching program for parents and other caregivers employs video to reinforce naturally occurring, developmentally supportive interactions between caregivers and young children. This simple, practical approach emphasizes caregivers' strengths and capabilities. DCYF implements FIND statewide. Training to support implementation of universal developmental screenings occurs statewide. Child care providers receive free training,

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are supported in implementing a family night to inform parents of the importance of screening and partner with them in obtaining developmental screening, and are provided with the ASQ-3 and ASQ-SE materials to promote sustainable, ongoing screening after initial training and coaching.

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:

The DCYF professional development team consults with the Early Support for Infants and Toddlers (ESIT) team in the development of trainings and technical assistance materials for child care providers related to developmental screening and referral for early intervention services.

✓ Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments

Describe:

DCYF includes infant and toddler standards within the context of the Infant Toddlers Environmental Rating Scale (ITERS-R) and Infant/Toddler Classroom Assessment Scoring System (CLASS). The remaining standards within Child Outcomes, Curriculum and Staff Supports and Family engagement require early learning providers to serve each child in the program from birth through five years old in order to receive credit for meeting the standard. A DCYF work group explores specific coursework to enhance the professional development of the infant-toddler workforce. QRIS standard updates include review of incentives and standards to supporting the care and education of infants and toddlers and their teachers within the Early Achievers quality framework.

Developing infant and toddler components within the state/territory's child care licensing regulations

Describe:

DCYF has aligned standards across licensing, the state preschool program Early Childhood Education Assistance Program (ECEAP), and Early Achievers, including information from ITERS-R and Infant/Toddler CLASS. A section has been added in the proposed licensing standards expected to go into effect in Fall 2019 related to infants and toddlers. Caring for our Children is the guideline used in this review. New proposed

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Licensing standards now include sections related to promoting infant and toddler development such as promoting social and emotional health, active physical play, promoting language development, and promoting serve and return interactions.

☑ Developing infant and toddler components within the early learning and developmental guidelines

Describe:

Infant and toddler components are integrated within the Early Learning and Development Guidelines. The Early Learning and Developmental Guidelines have three chapters focused on infants/toddler they are: Young Infants (Birth to 11 months), Older Infants (9-18 months), and Toddlers (16 to 36 months). Each chapter covers six topics from "About me and my family" to "Communicating" and "Learning about the World Around Me", DCYF also includes a section on "Differences in Development" in each chapter. DCYF also included a section on Early Intervention Services in the infant/toddler chapters.

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:

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:

DCYF has implemented Filming Interactions to Nurture Development (FIND), an intervention to support social-emotional development. FIND uses video coaching and brief, filmed clips of teachers interacting with young children to help caregivers identify and reinforce actions that support healthy development of our youngest learners. FIND is implemented statewide through the network of infant-toddler specialists within QRIS.

Describe:

In partnership with the network of infant/toddler specialists and DOH Project LAUNCH (Linking Actions to Unmet Needs in Children's Health), three communities have

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implemented a training and mentoring project related to developmental screening through the infant-toddler resource network. DOH's goals for Project LAUNCH include increasing developmental screening for children, integrating behavioral health training and services into early care and education systems, improving family strength and local parent support opportunities, and enhancing local services to at least 100 child care and early learning providers and 1,500 children/families over the course of the grant. This project is in an expansion phase with seven additional communities delivering training and supports through the infant/toddler resource network to family child care homes and child care centers in order to help them implement developmental screening. As an additional expansion of this work, three of the communities also include a direct service partnership with health consultants to provide on-site consultation in toddler classrooms or in family child care homes.

Coordinating with mental health consultants.

Describe:

DCYF funds a statewide network of infant mental health consultants that provide consultation or training within the state QRIS to include the following focus areas: child development, developmental screening, reducing expulsion, connecting families with referral resources, and strategies for inclusion. They also provide training and mentoring on developmental screening and include strategies for engaging families in screening, sharing results of screening and resources for further assessment or services if necessary.

Other

Describe:

Several communities have family child care cohorts which meet regularly to provide support and training for child care providers. In three communities, coaches and consultants from the infant-toddler consultation network expand this work and attend these meetings providing training or information about infant-toddler development, classroom supports and available coaching and consultation.

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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

DCYF funded the University of Washington to conduct a quantitative evaluation study of FIND. In a randomized wait list control research evaluation study, classrooms received data collection both pre and post FIND on the CLASS. Significant results were recorded with increased CLASS scores as a result of FIND. Data collection was also done using the Language Environment Analysis (LENA) which resulted in a significant finding related to an increase in conversational turns pre and post FIND. The Serve and Return inventory was also used to measure the number of interactions between children and caregivers pre and post FIND. The results indicate a significant increase in serve and return interactions as a result of FIND. A qualitative case study on FIND was also funded with interviews with participants and coaches involved in FIND. In their own words, participants relate how FIND has improved their competence and confidence related to working with infants and toddler and helped them make changes to their practice with children and families.

ITERS-3 and CLASS scores of programs are recorded and the data system allows this to be correlated with coaching/training that participants receive.

Effective Date: 10/01/2018

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.

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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

DCYF measures CCA's progress in improving the quality of child care programs and services by provider volume in the QRIS system – both the number of programs rated and those that have requested onsite evaluation. Providers in the system receive relationship based professional development services such as coaching and training. Progress is further quantified by the quality rating level achieved by individual child care and early learning programs.

Effective Date: 10/01/2018

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:

Licensing standards and agency procedures ensure DCYF completes yearly monitoring visits. Yearly licensing monitoring visits check provider compliance with licensing rules including, but not limited to staff qualification, child to staff ratios, supervision, training requirements, safe food handling and preparation, safe storage of medicine, cleaning supplies and other toxins, and all required health and safety topics. Licensors document noncompliance issues, and DCYF promptly follows-up to confirm timely correction of deficiency has been achieved. These Licensing rules are the foundation of Early Achievers. Relationship based professional development and training are embedded within Early Achievers and aim to reinforce licensing standards and help providers reach higher levels of quality in order to improve outcomes for children. Further, professional development and training opportunities on Early Achievers standards including the ERS and CLASS are

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available at Early Achievers Institutes. Additionally, partners at CCA provide enhanced training through their Professional Development Academy. These trainings support best practice as outlined in the foundational quality standards of licensing and the Early Achievers Quality Standards. Both these licensing activities and Early Achievers professional development and training use CCDF quality funds.

Effective Date: 10/01/2018

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

Effective Date: 10/01/2018

Y	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

Each summer, DCYF reviews the previous fiscal year and evaluates the successes and challenges within Early Achievers. DCYF assembles this information in the Early Start Act Annual Report, referenced in 7.1. The 2017 report indicates, among other things, that by the August 1, 2017 Early Achievers Level 2 deadline, 97.3 percent of all required providers had met Level 2 requirements – those nonschoolage providers taking subsidy or with ECEAP funding in the past year who had a required enrollment date no later than August 1, 2016.

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This includes 100 percent of all required ECEAP providers, 97.8 percent of all required child care centers, and 97.1 percent of all required family child care homes. These providers cared for 99.0 percent of the over 37,000 children under age 5 who received subsidy care with a licensed provider in FY 2017.

Additionally, subsidy providers representing racial/ethnic/language diversity generally enrolled in Early Achievers by the August 1, 2017 deadline at rates higher than other providers, preserving important access for subsidy care in communities of color and non English speaking communities. For example, among required family child care homes, 100 percent of Spanishspeaking, 98.7 percent of Somalispeaking, 100 percent of American Indian/Alaska Native, and 96.7 percent of Asian providers met their Early Achievers Level 2 requirements by August 1, 2017.

DCYF funds Needs Based Grants for facilities to improve child care quality. Child care providers and coaches work together to apply for grant funds which can be used to enhance materials or facilities that improve quality and relate to "best practice" rather than minimum licensing standards. For example, adding an extra sink provides better opportunities for hand hygiene and health promotion which is a measured indicator in both licensing and the ERS, but could be cost prohibitive without a grant. Purchases with grant funds are tracked in the system and facility improvements noted in the licensing system notes. Improved practice is noted in ERS data collection.

Effective Date: 07/01/2019

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

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7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services in both child care centers and family child care homes currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children

Early Achievers is a comprehensive QRIS that uses the ERS-R and CLASS to assess the quality of the early learning environment and adult-child interactions. Early Achievers includes other quality standard areas such as child outcomes, curriculum and staff supports, professional development of staff, and family engagement and partnerships including the Strengthening Families framework. DCYF evaluates rating outcomes and data points such as the Early Achievers Participant Monitoring Report and Data Dashboard to evaluate and assess the quality and effectiveness of child care programs and services. Additional data DCYF reviews related to child outcomes include Teaching Strategies GOLD® (TSG) and Washington Kindergarten Inventory of Developing Skills (WaKIDS) results.

Effective Date: 10/01/2018

7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures

DCYF looks for increased scores in each of the Early Achievers Quality Standard areas.

DCYF looks for increased ERS-R and CLASS scores. DCYF also uses WaKIDS scores of children entering kindergarten indicating kindergarten readiness in six out of six domains as a measure progress.

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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? Effective Date: 10/01/2018 Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers. Describe: Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care Describe: Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide Focused on child care centers Describe: Focused on family child care homes Describe: No, but the state/territory is in the accreditation development phase

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Focused on child care centers

	Describe:
	Focused on family child care homes Describe:
V	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

NA

Effective Date: 10/01/2018

7.10 Program Standards

7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children

In 2018 DCYF revised licensing standards incorporating quality elements. New standards become mandatory for providers in Fall 2019 and address health promotion in early learning programs such as inclusion of dental health education, lead testing for drinking water, and medication management training for staff who administer medication.

Regarding child mental health, the new licensing standards further address the following:

- Child expulsion;
- Promoting infant-toddler social and emotional development through positive, nurturing interactions:

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- Using positive, consistent guidance techniques such as modeling and teaching cooperation, waiting, self-control, conflict resolution; offering choices; redirecting; distraction; and setting clear and consistent expectations; and
- Creating a climate for healthy development by, e.g., validating children's feelings, using warm, responsive tones of voice, modeling and teaching emotional skills, and helping children understand the feelings of others.

The new licensing standards further address nutrition, including the following:

- Meal and snack patterns;
- Serving fruits and vegetables;
- Holding and talking to infants and toddlers during bottle feeding;
- Serving fruit juice;
- Serving processed foods; and
- Serving pre-fried foods.

Regarding physical health, based on national best practice guidelines, DCYF added standards addressing active physical play for all ages birth to five.

Regarding physical development, the new licensing standards address the following:

- Discussing child development and individual child strengths and needs with families; and
- Discussing with parents the importance of developmental screening. An introductory free training on developmental milestones for all child care providers is available.

Washington further develops high quality program standards through its Early Achievers standards: Participating child care providers may demonstrate quality by modeling and promoting hand hygiene as evidenced in the Environment Rating Scale-Revised (ERS-R). Further, in Fall 2017, DCYF conducted a pilot with Early Achievers participants to implement family style dining. DCYF provided child sized bowls, pitchers, serving utensils, and tongs to support implementation. After the pilot, child care providers reported that the equipment was key to a change in behavior and implementation of family style dining. DCYF also conducted trainings for Early Achievers coaches in three communities across the state. The training addressed the alignment of healthy eating and physical activity best practice standards with the ERS and CLASS assessment tools used in Early Achievers. Finally, Early Achievers

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participants demonstrate quality by developing and implementing a developmental screening plan to ensure that all children receive developmental screening within 45 days of attendance, that families are part of the process, and that culture and language are considered when conducting screening or discussing results with families.

Early Achievers participants can demonstrate mental health quality standards through:

- Developmental screenings;
- Activities to promote parental resilience, social connections for families, and social and emotional competence of children;
- Providing an environment of emotional support through warm interactions, encouraging curiosity and promoting resilience as demonstrated in classroom observation using the Classroom Assessment Scoring System (CLASS); and
- Supporting children with developmental needs and challenging behavior through family partnership, staff training and consultation.

Effective Date: 07/01/2019

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

Within its QRIS, DCYF looks for increased scores in each of the Early Achievers Quality Standard areas. DCYF looks for increased ERS-R and CLASS scores. DCYF also uses WaKIDS scores of children entering kindergarten indicating kindergarten readiness in six out of six domains as a measure of progress.

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7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities

7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).

The Washington State Early Learning and Development Guidelines inform state licensing and QRIS standards. Within its QRIS, DCYF looks for increased scores in each of the Early Achievers Quality Standard areas. DCYF looks for increased ERS-R and CLASS scores. DCYF also uses WaKIDS scores of children entering kindergarten indicating kindergarten readiness in six out of six domains as a measure of progress.

Effective Date: 10/01/2018

7.11.2 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities, and also describe the measureable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. Describe:

Providers who care for infants can have a Child Care Health Consultant help provide improved care through monthly consults. There are several Local Health Jurisdictions that also provide specific consultation on topics in Health and Safety (infectious disease prevention, safe drinking water, environmental surveys, etc.). The impact of these services can be measured through improved Early Achievers ratings.

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8 Ensure Grantee Program Integrity and Accountability

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

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity and accountability apply to:

- -- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF
- -- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF
- -- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities
- -- Internal processes for conducting child care provider subsidy
- 8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity
- 8.1.1 Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity. Check all that apply:

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▼ Train on policy manual

Describe:

Depending on the complexity of the topic, DCYF delivers staff trainings by memo, WebEx, online training, or in-person training. All DCYF CCSP staff go through a two-week child care core training in addition to onboarding online courses. A child care phase 2 core training was developed to enhance worker understanding of more complex program requirements such as overpayment processing, eligibility interviewing skills, and advanced system training in SSPS. The first class convened 2/1/18.

▼ Train on policy change notices

Describe:

Depending on the complexity of the topic, DCYF delivers staff trainings by memo, WebEx, online training, or in-person training. All DCYF CCSP staff go through a two-week child care core training in addition to onboarding online courses. A child care phase 2 core training was developed to enhance worker understanding of more complex program requirements such as overpayment processing, eligibility interviewing skills, and advanced system training in SSPS. The first class convened 2/1/18.

Ongoing monitoring and assessment of policy implementation Describe:

CCSP quality assurance staff meet monthly with subsidy policy staff to receive and provide feedback on implementation of new policies and to incorporate the policy changes into audits. DCYF uses desk aids and policy clarification documents to guide staff as to policy improvements being made.

Other

Describe:

DCYF convenes a Coordination Workgroup that meets biweekly to discuss emergent issues and field training and implementation. This interdepartment collaboration promotes alignment and ensures strong communication about significant changes to program administration.

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8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:

Effective Date: 07/01/2020

✓ Verifying and processing billing records to ensure timely payments to providers Describe:

DCYF processes payments monthly based on invoices submitted by providers. Providers have up tosix months to bill for services. Providers are required to keep attendance records to support their billing and to submit those records in the event they are audited. An electronic time and attendance system maintains electronic copies of provider attendance records and assists to reduce provider billing errors. This system also enables DCYF to perform data analysis and audit all payments to significantly increase improper payment, program violation, and fraud detection and referral. DCYF requested additional funding from the Legislature in order to replace the 40-year-old mainframe-based Social Services Payment System. The new payment system will provide a robust provider interface and a rules engine solution that validates authorizations with attendance and billing data. Once the payment processing project is complete, the combined systems will be able to generate more accurate invoices and payments to providers.

Fiscal oversight of grants and contracts Describe:

DCYF has internal control policies in place to ensure separation of duties to safeguard its assets and check the accuracy and reliability of its accounting data. Washington State's Agency Financial Reporting System (AFRS) is the accounting system of record and has IT security built in to ensure separation of duties, e.g., a unit supervisor reviews and approves invoices and federal draw down of funds staff members process.DCYF has multiple approvals built in to the contracts, budgeting, and expenditure systems to ensure proper levels of approval.

All contracts that contain federal funds have Federal Certifications and Assurance

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attached to the contract that contain grant requirements in accordance with the Code of Federal Regulations and the grant application. DCYF has a sub-recipient monitoring plan supported by the agency's Contract and Procurement System. The agency Contracts and Procurement Manager meets with agency contract managers on a monthly basis to provide regular training on state and federal requirements. Contract managers are required to conduct a risk assessment for each contract, set deliverables for contracts, and monitor the contract according to the risk rating. To assist in ensuring the DCYF subrecipient contract contains the required monitoring elements, the Grants Manager completes the Sub-recipient Monitoring Worksheet with the Contract Manager. The monitoring worksheet contains standard administrative and fiscal requirements, while the programmatic section is tailored to capture specific monitoring elements based on the federal program grant requirements. All sub-recipient contracts contain language on roles and responsibilities and assurances of compliance with grant requirements. All contracts and agreements go through a chain of reviews by the Program Manager, Contracts Office, Chief Financial Officer, Budget Director, and Assistant Director for approval prior to execution. Once the contract is fully executed, the services are monitored by the Contract Manager and Fiscal Review Team and may include the following control items determined by the contract risk assessment: periodic reporting, on-site reviews and observations, invoice and audit report reviews, customer surveys, and other periodic contact.

DCYF Fiscal compares all approved invoices to the contract budgets to ensure funds are available and payments are not duplicated. After payments have been processed through AFRS the expenditure reports are reviewed by Budget, Grants Manager and Program staff on a monthly basis. DCYF further has a service level agreement with DSHS that sets out the requirements they will follow regarding CCDF grant funds and their interaction with TANF funds. The State Auditor's Office annually audits the CCDF grant in detail to ensure accuracy and accountability.

Errors and (intentional and unintentional) program violations result in overpayments to clients or providers. DSHS Office of Financial Recovery collects these amounts and reports to DCYF. DCYF works with DSHS to ensure that funds are returned to DCYF and recorded to the proper grant award. For closed award periods the Lead Agency transmits the funds back to the granting agency.

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☑ Tracking systems to ensure reasonable and allowable costs Describe:

Provider Payments: The Lead Agency tracks fiscal data and conducts monthly provider audits to identify patterns of inappropriate payments. These patterns are further delineated in determining areas of potential program weaknesses and likely violations. A policy and reporting process for program violations has been developed where violations, intentional and unintentional, are defined and repercussions are proposed. Proper grant expenditures: The Subsidy Budget and Analytics Manager prepares monthly reports based off the financial data in the Agency Financial Reporting System to ensure that all charges to the CCDF grant are properly accounted for in Mandatory, Matching, and Discretionary. In addition, these staff review expenditures to ensure that the proper period of performance is charged for the funding source and the services are allowable. DCYF's Grants Manager also processes reports to ensure that expenditures are properly reported to the grant and uploads all federal data to the designated systems by the deadlines outlined in the grant to ensure transparency and accountability to our grants reporting.

In addition, DCYF monitors all contracted services through its Contracts and Procurement System (CAPS) to ensure reasonable and allowable costs.

Other
Describe:

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:

Effective Date: 07/01/2019

Conduct a risk assessment of policies and procedures Describe:

The DCYF Quality Assurance (QA) team analyzes data obtained from the electronic attendance system to determine risk exposure and develop rules and procedures to minimize risk.

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Establish checks and balances to ensure program integrity Describe:

The DCYF QA team audits providers for program integrity compliance. DCYF typically audits 2% of the caseload on average, and combines random audits with targeted audits. Both of these audits are designed to increase program integrity by informing providers and workers of billing issues and correct billing procedures and by recouping funds. These audits are random, and any targeted approaches DCYF takes are first carefully analyzed for disparate impact as to protected classes outlined in state and federal anti-discrimination law.

✓ Use supervisory reviews to ensure accuracy in eligibility determination Describe:

DCYF eligibility supervisors and leads review eligibility determinations of all newly employed eligibility staff until the new staff demonstrate 95 percent accuracy in all their determinations. Thereafter supervisors and leads continue to randomly spot check staff determinations.

Other

Describe:

In cases where a family's activity schedule requires authorization of care units in excess of full-time care, DCYF supervisors review eligibility worker authorization determinations to ensure their accuracy.

8.1.4 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

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- a) Check and describe all activities that the Lead Agency conducts to identify and prevent fraud or intentional program violations. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations. Include a description of the results of such activity.
 - Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

Describe

The subsidy eligibility determination system has interfaces with TANF, SNAP, Medical Assistance, PARIS, Employment Security, Department of Child Support, and the Department of Licensing so that information between the programs is shared to assist in the identification and prevention of fraud and intentional program violations.

Run system reports that flag errors (include types).

Describe:

DCYFproduces a monthly report to identify any authorizations that exceed full-time care without receiving supervisory review. DCYF statewide auditors use various reports to identify high risk case actions and target different areas monthly. When the auditors find patterns or areas of deficiency they work with supervisors and trainers to increase staff competency and program integrity.

DCYF allows newly employed families 60 days to provide verification of their employment. If the verification has not been received by the 60th day the case is automatically closed via barcode automation.

Review enrollment documents and attendance or billing records Describe:

Fraud and program violations are identified in DCFY audits by field and quality assurance staff. DCYF'squality assurance unit consists of six staff supervised by a quality assurance manager who reports to the quality administrator. The manager assigns regions of the state to these staff, who audit providers in the region, requesting enrollment documents and attendance records for review. DCYF has a number of field audit personnel including a specialized unit of centralized auditors that focus on eligibility worker procedural adherence. Field supervisors and lead workers

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also conduct program integrity audits. Improper payments discovered result in overpayments or underpayments to clients and providers are corrected. Any suspected fraud is referred to the Office of Fraud and Accountability.

Describe:

DCYF conducts quality assurance reviews on provider payments as described above. In addition, DCYF supervisors or leads review all subsidy determinations by new eligibility staff until those staff are able to conduct full determinations without error.

Audit provider records.

Describe:

Fraud and program violations are identified in audits by field staff and quality assurance staff. DCYF's quality assurance unit consists of six staff supervised by a quality assurance manager who reports to the quality administrator The manager assigns regions of the state to these staff, who audit providers in the region, requesting enrollment documents and attendance records for review. DCYF has a number of audit personnel including a specialized unit of centralized auditors that focus on eligibility worker procedural adherence. Field supervisors and lead workers also conduct program integrity audits. Improper payments discovered result in overpayments or underpayments to clients and providers are corrected. Any suspected fraud is referred to the Office of Fraud and Accountability.

▼ Train staff on policy and/or audits.

Describe:

DCYF conducts training on policy and procedure for licensing staff who identify fraud in the course of their work, including instructions on how to make a proper internal referral for potential final referral to OFA. These materials are also provided to DCYF quality assurance staff. New DCYF quality assurance staff also receive training from the Quality Assurance Manager, including review of DCYF's fraud reporting policy and procedure.

Other

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Describe:

In addition to establishing program and system cross-checking processes, DCYF tracks fiscal data and conducts monthly provider audits to identify patterns of improper payments made through program violations and potential fraud. DCYF further delineates these patterns to determine areas of potential program weakness and likely violations. DCYF developed a policy and reporting process for program violations describing reporting processes, and describing repercussions. Further, DCYF auditors complete audits on more than 2% of the caseload per month, on average. These audits focus not only on DCYF worker actions, but also areas related to provider and client program integrity such as proper billing, correct eligibility determinations, and correct provider authorizations.

- b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.
 - Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

The subsidy eligibility determination system has interfaces with TANF, SNAP, Medical Assistance, PARIS, Employment Security, Department of Child Support, and the Department of Licensing so that information between the programs is shared to assist in the identification and prevention of unintentional program violations.

Run system reports that flag errors (include types).

Describe:

DCYFproduces a monthly report to identify any authorizations that exceed full-time care without receiving supervisory review. DCYF statewide auditors use various reports to identify high risk case actions and target different areas monthly. When the auditors find patterns or areas of deficiency they work with supervisors and trainers to increase staff competency and program integrity.

Review enrollment documents and attendance or billing records

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Describe:

Program violations are identified in DCYF audits. DCYF's unit consists of six quality assurance staff supervised by a quality assurance manager who reports to the quality administrator. The manager assigns regions of the state to these staff, who audit providers in the region, requesting enrollment documents and attendance records for review. DCYF has a number of audit personnel including a specialized unit of centralized auditors that focus on eligibility worker procedural adherence. Field supervisors and lead workers also conduct program integrity audits for DCYF. Improper payments discovered result in overpayments or underpayments to clients and providers are corrected.

DCYF conducts quality assurance reviews on provider payments as described above. In addition, DCYF supervisors or leadsreview all subsidy determinations by new eligibility staff until those staff are able to conduct full determinations without error.

Audit provider records.

Describe:

Program violations are identified in audits by DCYF. DCYF's quality assurance unit consists of six quality assurance staff supervised by a quality assurance manager who reports to the quality administrator. The manager assigns regions of the state to these staff, who audit providers in the region, requesting enrollment documents and attendance records for review. DCYF has a number of audit personnel including a specialized unit of centralized auditors that focus on eligibility worker procedural adherence. Field supervisors and lead workers also conduct program integrity audits. Improper payments discovered result in overpayments or underpayments to clients and providers are corrected.

Train staff on policy and/or audits.

Describe:

New quality assurance staff atDCYF receive training on related audit procedure. Staff at both agencies receive ongoing training as needed when relevant policy or process changes, and DCYF staff receive additional training as part of the Improper Payment Information Act audit.

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Other

Describe:

In addition to establishing program and system cross-checking processes, DCYF tracks fiscal data and conducts monthly provider audits to identify patterns of improper payments made through program violations and potential fraud. DCYF further delineates these patterns to determine areas of potential program weakness and likely violations. DCYF developed a policy and reporting process for program violations, defining intentional and unintentional types, describing reporting processes, and describing repercussions. Further, DCYF auditors complete audits on more than 2% of the caseload per month, on average. These audits focus not only on DCYF worker actions, but also areas related to provider and client program integrity such as proper billing, correct eligibility determinations, and correct provider authorizations.

- c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.
 - Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

The subsidy eligibility determination system has interfaces with TANF, SNAP, Medical Assistance, PARIS, Employment Security, Department of Child Support, and the Department of Licensing so that information between the programs is shared to assist in the identification and prevention of agency errors.

Run system reports that flag errors (include types).

Describe:

HCA runs algorithms that identify payment errors, such as duplicate payments, duplicate social security numbers, and overbilling. HCA produces a monthly report to identify any authorizations that exceed full-time care without receiving supervisory review.DCYF statewide auditors use various reports to identify high risk case actions and target different areas monthly. When the auditors find patterns or areas of deficiency they work with supervisors and trainers to increase staff competency and program integrity.

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Review enrollment documents and attendance or billing records Describe:

Agency errors are identified in audits by DCYF. DCYF's quality assurance unit consists of six staff supervised by a quality assurance manager who reports to the quality administrator. The manager assigns regions of the state to these staff, who audit providers in the region, requesting enrollment documents and attendance records for review. DCYF has a number of audit personnel including a specialized unit of centralized auditors that focus on eligibility worker procedural adherence. Field supervisors and lead workers also conduct program integrity audits. Errors discovered result in overpayments or underpayments to clients.

Describe:

DCYF conducts quality assurance reviews on provider payments as described above. In addition, DCYF supervisors or leadsreview all subsidy determinations by new eligibility staff until those staff are able to conduct full determinations without error.

Audit provider records.

Describe:

Program violations are identified in audits by DCYF. DCYF's quality assurance unit consists of six quality assurance staff supervised by a quality assurance manager who reports to the quality administrator. The manager assigns regions of the state to these staff, who audit providers in the region, requesting enrollment documents and attendance records for review. DCYF has a number of audit personnel including a specialized unit of centralized auditors that focus on eligibility worker procedural adherence. Field supervisors and lead workers also conduct program integrity audits. Improper payments discovered result in overpayments or underpayments to clients and providers are corrected.

▼ Train staff on policy and/or audits.

Describe:

New quality assurance staff at DCYF receive training on audit procedure, including identification of agency error.

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Other

Describe:

In addition to establishing program and system cross-checking processes, DCYF tracks fiscal data and conducts monthly provider audits to identify patterns of improper payments made through program violations and potential fraud. DCYF further delineates these patterns to determine areas of potential program weakness and likely violations. DCYF developed a policy and reporting process for program violations, defining intentional and unintentional types, describing reporting processes, and describing repercussions. Further, DCYF auditors complete audits on more than 2% of the caseload per month, on average. These audits focus not only on DCYF worker actions, but also areas related to provider and client program integrity such as proper billing, correct eligibility determinations, and correct provider authorizations.

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.

Effective Date: 07/01/2021

- a) Check and describe all activities that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:
 - Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

DSHS Office of Financial Recovery (OFR) sends a collection notice for overpayments of any amount. If the overpayment amount exceeds \$250, OFR collection staff engage in formal debt collection.

Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

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Describe:

DCYF refers suspected client and provider criminal fraud to the DSHS Office of Fraud and Accountability (OFA), which investigates and refers for criminal prosecution. In cases where evidence of provider criminal fraud is insufficient for OFA referral but DCYF reasonably suspects a program violation, providers are subject to progressive penalties and possible disqualification from receiving CCSP funds. In cases of criminal fraud conviction, the client or provider is subject to repayment of funds in question and disqualification from receiving CCSP funds.

Recover through repayment plans.

Describe:

OFR establishes repayment plans with providers and clients, with the goal of ensuring repayment monthly amounts do not exceed 10 percent of income, where possible.

■ Reduce payments in subsequent months.

Describe:

OFR has authority to reduce provider subsidy reimbursement in subsequent months in order to satisfy any overpayment debt established and exercises that authority as needed to ensure timely satisfaction of the debt.

Recover through state/territory tax intercepts	
Describe:	
Recover through other means.	
Describe:	

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

Throughits quality assurance audit processes, DCYF identifies fraud and program violations. It refers suspected fraud to OFA. Overpayments are written to clients and providers as described in WAC 110-15-0268 and 110-15-0271 and are subject to appeal through an administrative hearing under WAC 110-15-0280.

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☐ Other
Describe:
b) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:
Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount
Describe:
DSHS/OFR sends a collection notice for overpayments of any amount. If the
overpayment amount exceeds \$250, OFR collection staff engage in formal debt
collection.
Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency). Describe:
DCYF refers client and provider overpayments to OFR for recovery.
Recover through repayment plans. Describe:
OFR establishes repayment plans with providers and clients, with the goal of ensuring repayment monthly amounts do not exceed 10 percent of income, where possible.
Reduce payments in subsequent months. Describe:
OFR has authority to reduce provider subsidy reimbursement in subsequent months in order to satisfy any overpayment debt established and exercises that authority as needed to ensure timely satisfaction of the debt.
Recover through state/territory tax intercepts. Describe:

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Recover through other means.
Describe:

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

DCYF's Quality Assurance Unit identifies errors. Unit staff write overpayments to clients and providers as described in WAC 110-15-0268 and 110-15-0271. Overpayments are subject to appeal through an administrative hearing under WAC 110-15-0280. DSHS Office of Financial Recovery (OFR) is responsible for overpayment collection.

Other

Describe:

DCYF's focus is on preventing incorrect payments through training and technical assistance. Administrative errors and program violations are also identified in audits. DCYF's quality assurance unit consists of six quality assurance staff supervised by a quality assurance manager who reports to the quality administrator. The manager assigns regions of the state to these staff, who audit providers in the region. DCYF has a number of audit personnel including a specialized unit of centralized auditors that focus on eligibility worker procedural adherence. Field supervisors and lead workers also conduct program integrity audits. Improper payments discovered resulting in overpayments or underpayments to clients and providers are corrected. OFR collects overpayments as described in this subsection.

[HJ(1]insert

- c) Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.
 - Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

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Describe:

DSHS/OFR sends a collection notice for overpayments of any amount. If the overpayment amount exceeds \$250, OFR collection staff engage in formal debt collection.

Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

DCYF refers client and provider overpayments to OFR for recovery.

Recover through repayment plans.

Establish a unit to investigate and collect improper payments.

OFR establishes repayment plans with providers and clients, with the goal of ensuring repayment monthly amounts do not exceed 10 percent of income, where possible.

Reduce payments in subsequent months.

Describe:

OFR has authority to reduce provider subsidy reimbursement in subsequent months in order to satisfy any overpayment debt established and exercises that authority as needed to ensure timely satisfaction of the debt.

Recover	imough sta	terterniory	tax intercepts.
Describe:			

Recover through other means.

Describe:

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

DCYF Quality Assurance Units identify errors. Unit staff write overpayments to clients and providers as described in WAC 110-15-0268 and 110-15- 0271. Overpayments are subject to appeal through an administrative hearing under WAC 110-15-0280. DSHS Office of Financial Recovery (OFR) is responsible for overpayment collection.

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Other

Describe:

DCYF's focus is on preventing incorrect payments through training and technical assistance. Administrative errors and program violations are also identified in audits. DCYF's quality assurance unit consists of six quality assurance staff supervised by a quality assurance manager who reports to the quality administrator. The manager assigns regions of the state to these staff, who audit providers in the region. DCYF has a number of audit personnel including a specialized unit of centralized auditors that focus on eligibility worker procedural adherence. Field supervisors and lead workers also conduct program integrity audits. Improper payments discovered resulting in overpayments or underpayments to clients and providers are corrected. OFR collects overpayments as described in this subsection.

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

Effective Date: 07/01/2020

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

Describe:

Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified.

Describe:

In the event DCYF quality assurance audits indicate a provider received an improper payment due to a program violation, staff establish overpayments and provide coaching and technical assistance to the provider to prevent future program violations. In the event the provider repeatedly commits program violations after receiving this assistance, they are subject to disqualification. See WAC 110-15-0277. Providers may appeal overpayments, and disqualification through the administrative hearing process described

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Prosecute criminally.

Describe:

in WAC 110-15-0280.

DCYF refers suspected client and provider criminal fraud to the DSHS Office of Fraud and Accountability (OFA), which investigates and refers for criminal prosecution. In cases where evidence of provider criminal fraud is insufficient for OFA referral but the provider has committed a program violation, providers are subject to progressive penalties and possible disqualification from receiving CCSP funds. In cases of criminal fraud conviction, the provider is subject to repayment of funds in question and disqualification from receiving CCSP funds.

Other.	
Describe:	

Appendix A: Background Check Waiver Request Form

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers will be considered "transitional and legislative waivers" to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)) These waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 -- 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019. If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

Overview of Background Check Implementation deadlines

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Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017

Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018

One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019

Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting a time-limited waiver extension.

Appendix A.1: In-state criminal registry or repository checks with fingerprints requirements for existing staff. (See related question at 5.4.1 (b))

Describe the provision from which the state/territory seeks relief.

DCYF seeks relief from the requirement that all existing FFN providers receive a fingerprint in-state criminal background check. Currently, existing license exempt FFN providers receive an in-state criminal background check without a fingerprint component.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver will allow DCYF additional time to shift existing FFN providers to the new Portable Background check system, which includes a fingerprint component. The gradual transition of these providers to the new system will mitigate potential loss of FFN providers.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

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All licensed providers already meet this requirement. Further, DCYF will require all new FFN providers (as of October 1, 2018) to receive a Portable Background Check which meets this requirement. Currently, existing license exempt FFN providers receive an instate criminal background check without a fingerprint component, so child well-being is not compromised.

■ Appendix A.4: National FBI fingerprint search requirements for existing staff. (See related question at 5.4.4 (b))

Describe the provision from which the state/territory seeks relief.

DCYF seeks relief from the requirement that existing FFN providers receive an FBI fingerprint background check. Currently, existing license exempt FFN providers receive a background check without a national FBI component.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver will allow DCYF additional time to shift existing FFN providers to the new Portable Background check system, which includes a national FBI fingerprint background check. The gradual transition of these providers to the new system will mitigate potential loss of FFN providers.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

All licensed providers already meet this requirement. Further, DCYF will require all new FFN providers (as of October 1, 2018) to receive a Portable Background Checkthat meets this requirement. Currently, existing license exempt FFN providers receive an instate criminal background check without a fingerprint component, so child well-being is not compromised.

Appendix A.6: National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for existing staff. (See related question at 5.4.5 (b))

Describe the provision from which the state/territory seeks relief.

DCYF seeks relief from the requirement that existing FFN providers receive an NCIC NSOR check. Currently, existing license exempt FFN providers receive a background check without an NCIC NSOR component.

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Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver will allow DCYF additional time to shift existing FFN providers to the new Portable Background check system, which includes an NCIC NSOR check. The gradual transition of these providers to the new system will mitigate potential loss of FFN providers.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. All licensed providers already meet this requirement. Further, DCYF will require all new FFN providers (as of October 1, 2018) to receive a Portable Background Check which meets this requirement. Currently, existing license exempt FFN providers receive an instate sex offender registry check, so child well-being is not compromised.

Appendix A.7: Interstate criminal registry or repository check for new or prospective staff. (See related question at 5.4.6 (a))

Describe the provision from which the state/territory seeks relief.

DCYF seeks relief from the requirement that new staff must receive a background check that includes a search of the interstate criminal registry. DCYF seeks extension of the waiver for the period October 1, 2020 through September 30, 2021.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver will allow DCYF additional time to establish the interstate criminal registry search within its Portable Background check system which currently does not support this search. A major challenge to successfully fulfilling this requirement is creating a process that identifies the specific request criteria for each state, since each state has its own method or criteria that must be used to successfully obtain the required information. The waiver is necessary to ensure continuation of child care services, and absent the waiver the state faces the risk of substantial numbers of children in unregulated child care settings or without care.

Extension of the waiver will, by itself, improve delivery of child care services for children by facilitating timely background check approval during the COVID-19 when demand for

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child care, and therefore child care staff, is high in some areas of the state. Time and cost to complete interstate criminal history checks is still prohibitive for providers. 25 states are not National Fingerprint File or Western Identification Network states, and others are closed record states that DCYF must request additional criminal history from directly. Many states charge fees and require applicants to pay them directly. Some states have online processes while others require specific forms in different formats. For all these reasons the interstate criminal registry check is cost- and time- prohibitive during the economic downturn caused by the pandemic and when providers need staff to meet demand quickly.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. All licensed providers, and all FFN providers currently meet the in-state and FBI criminal background check with fingerprints, NCIC NSOR, in-state sex offender registry, and instate and interstateabuse and neglect registry check requirements. While the addition of an interstate criminal registry search is ideal, the existing background check process establishes a strong, timely, and cost effective safeguard for child well-being during the pandemic and until the background check process can be enhanced with an interstate criminal registry search component.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

Appendix A.8: Interstate criminal registry or repository check for existing staff. (See related question at 5.4.6 (b))

Describe the provision from which the state/territory seeks relief.

DCYF seeks relief from the requirement that existing staff must receive a background check that includes a search of the interstate criminal registry. DCYF seeks extension of the waiver for the period October 1, 2020 through September 30, 2021.

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Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver will allow DCYF additional time to establish the interstate criminal registry search within its Portable Background check system which currently does not support this search. A major challenge to successfully fulfilling this requirement is creating a process that identifies the specific request criteria for each state, since each state has its own method or criteria that must be used to successfully obtain the required information. The waiver is necessary to ensure continuation of child care services, and absent the waiver the state faces the risk of substantial numbers of children in unregulated child care settings or without care.

Extension of the waiver will, by itself, improve delivery of child care services for children by facilitating timely background check approval during the COVID-19 when demand for child care, and therefore child care staff, is high in some areas of the state. Time and cost to complete interstate criminal history checks is still prohibitive for providers. 25 states are not National Fingerprint File or Western Identification Network states, and others are closed record states that DCYF must request additional criminal history from directly. Many states charge fees and require applicants to pay them directly. Some states have online processes while others require specific forms in different formats. For all these reasons the interstate criminal registry check is cost- and time- prohibitive during the economic downturn caused by the pandemic and when providers need staff to meet demand quickly.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

All licensed providers, and all FFN providers currently meet the in-state and FBI criminal background check with fingerprints, NCIC NSOR, in-state sex offender registry, and instate and interstateabuse and neglect registry check requirements. While the addition of an interstate criminal registry search is ideal, the existing background check process establishes a strong, timely, and cost effect safeguard for child well-being during the pandemic and until the background check process can be enhanced with an interstate

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criminal registry search component.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

Appendix A.9: Interstate sex offender registry or repository check for new or prospective staff. (See related question at 5.4.7 (a))

Describe the provision from which the state/territory seeks relief.

DCYF seeks relief from the requirement that new staff must receive a background check that includes a search of the interstate sex offender registry. DCYF seeks extension of the waiver for the period October 1, 2020 through September 30, 2021.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver will allow DCYF additional time to establish the interstate sex offender registry search within its Portable Background check system which currently does not support this search. A major challenge to successfully fulfilling this requirement is creating a process that identifies the specific request criteria for each state, since each state has its own method or criteria that must be used to successfully obtain the required information. The waiver is necessary to ensure continuation of child care services, and absent the waiver the state faces the risk of substantial numbers of children in unregulated child care settings or without care.

Extension of the waiver will, by itself, improve delivery of child care services for children by facilitating timely background check approval during the COVID-19 when demand for child care, and therefore child care staff, is high in some areas of the state. Time and cost to complete interstate sex offender registry checks is still prohibitive for providers. 25 states are not National Fingerprint File or Western Identification Network states, and others are closed record states that DCYF must request additional sex offender information from directly. Many states charge fees and require applicants to pay them directly. Some states have online processes while others require specific forms in different formats. For all these reasons the interstate sex offender registry check is cost-and time- prohibitive during the economic downturn caused by the pandemic and when providers need staff to meet demand quickly.

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Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

All licensed providers, and all FFN providers currently meet the in-state and FBI criminal background check with fingerprints, NCIC NSOR, in-state sex offender registry, and instate and interstateabuse and neglect registry check requirements. While the addition of an interstate sex offender registry search is ideal, the existing background check process establishes a strong, timely, and cost effective safeguard for child well-being during the pandemic and until the background check process can be enhanced with an interstate registry search component.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

Appendix A.10: Interstate sex offender registry or repository check for existing staff. (See related question at 5.4.7 (b))

Describe the provision from which the state/territory seeks relief.

DCYF seeks relief from the requirement that existing staff must receive a background check that includes a search of the interstate sex offender registry. DCYF seeks extension of the waiver for the period October 1, 2020 through September 30, 2021.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver will allow DCYF additional time to establish the interstate sex offender registry search within its Portable Background check system which currently does not support this search. A major challenge to successfully fulfilling this requirement is creating a process that identifies the specific request criteria for each state, since each state has its own method or criteria that must be used to successfully obtain the required information. The waiver is necessary to support child care services because the state cannot otherwise comply with the requirement by October 1, 2018 due to this challenge.

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Extension of the waiver will, by itself, improve delivery of child care services for children by facilitating timely background check approval during the COVID-19 when demand for child care, and therefore child care staff, is high in some areas of the state. Time and cost to complete interstate sex offender registry checks is still prohibitive for providers. 25 states are not National Fingerprint File or Western Identification Network states, and others are closed record states that DCYF must request additional sex offender information from directly. Many states charge fees and require applicants to pay them directly. Some states have online processes while others require specific forms in different formats. For all these reasons the interstate sex offender registry check is cost-and time- prohibitive during the economic downturn caused by the pandemic and when providers need staff to meet demand quickly.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. All licensed providers, and all FFN providers currently meet the in-state and FBI criminal background check with fingerprints, NCIC NSOR, in-state sex offender registry, and instate and interstateabuse and neglect registry check requirements. While the addition of an interstate sex offender registry search is ideal, the existing background check process establishes a strong, timely, and cost effective safeguard for child well-being during the pandemic and until the background check process can be enhanced with an interstate

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

registry search component.

Appendix A.11: Interstate child abuse and neglect registry check for new or prospective staff. (See related question at 5.4.8 (a))

Describe the provision from which the state/territory seeks relief.

DCYF seeks relief from the requirement that new staff must receive a background check

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that includes a search of the interstate abuse and neglect registry.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver will allow DCYF additional time to establish the interstate abuse and neglect registry search within its Portable Background Check system which currently does not support this search. A major challenge to successfully fulfilling this requirement is creating a process that identifies the specific request criteria for each state, since each state has its own method or criteria that must be used to successfully obtain the required information. The waiver is necessary to support child care services because the state cannot otherwise comply with the requirement by October 1, 2018 due to this challenge.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. All licensed providers, and all new FFN providers currently meet the in-state and FBI criminal background check with fingerprints, NCIC NSOR, in-state sex offender registry, and in-state abuse and neglect registry check requirements. Existing FFN providers receive an in-state criminal background check without fingerprints, in-state sex offender registry check, and an in-state abuse and neglect registry check. While the addition of an interstate abuse and neglect registry search is ideal, the existing background check process establishes a strong safeguard for child well-being until the background check process can be enhanced with an interstate registry search component.

Appendix A.12: Interstate child abuse and neglect registry check for existing staff. (See related question at 5.4.8 (b))

Describe the provision from which the state/territory seeks relief.

DCYF seeks relief from the requirement that existing staff must receive a background check that includes a search of the interstate abuse and neglect registry.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver will allow DCYF additional time to establish the interstate abuse and neglect registry search within its Portable Background check system which currently does not support this search. A major challenge to successfully fulfilling this requirement is creating a process that identifies the specific request criteria for each state, since each

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state has its own method or criteria that must be used to successfully obtain the required information. The waiver is necessary to support child care services because the state cannot otherwise comply with the requirement by October 1, 2018 due to this challenge.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

All licensed providers, and all new FFN providers currently meet the in-state and FBI criminal background check with fingerprints, NCIC NSOR, in-state sex offender registry, and in-state abuse and neglect registry check requirements. Existing FFN providers receive an in-state criminal background check without fingerprints, in-state sex offender registry check, and an in-state abuse and neglect registry check. While the addition of an interstate abuse and neglect registry search is ideal, the existing background check process establishes a strong safeguard for child well-being until the background check process can be enhanced with an interstate registry search component.

Appendix A. 13: New staff hired to work provisionally until background checks are completed. (See related question at 5.4.9)

Describe the provision from which the state/territory seeks relief.

DCYF seeks relief from the requirement that new staff hired to work provisionally must at least receive a background check that includes a fingerprint state or fingerprint federal criminal registry check prior to beginning work. DCYF seeks extension of the waiver for the period October 1, 2020 through September 30, 2021.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

DCYF's current rules allow providers to work provisionally under supervision while awaiting the results of their background check. DCYF's portable background check system is not currently designed to support separate processing of state or federal criminal registry search from its other background check components, so providers cannot avail themselves of the option to work provisionally after receiving criminal registry clearance while awaiting clearance on other components. The waiver will improve delivery of child care by allowing providers to continue the practice of hiring provisional staff, which is a core necessity of their business models, while DCYF enhances its background check system to accommodate a separate criminal registry clearance or transitions all providers to a system requiring background clearance prior to

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beginning work. This maintains Washington's capacity to serve children and families.

The imperative to respond to urgent needs during COVID-19, and the economic downturn caused by the pandemic, have added further lead time to any technical solution to allow separate processing or policy shift to require clearance prior to work. Further, budget limitations caused by the downturn also inhibit this work. Extension of the waiver will improve delivery of child care by allowing providers to continue the practice of hiring provisional staff, a core necessity due to reduced groups sizes and the increased demand in some areas during COVID-19. DCYF will meanwhile continue looking to either enhance its background check system to accommodate a separate criminal registry clearance or transition all providers to a system requiring background clearance prior to starting work.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. Washington complies with the requirement that provisional child care staff apply for their background check prior to beginning work and the requirement to process checks within 45 days, thereby ensuring that provisional work is short term. Further, Washington complies with the requirement that provisional staff work under supervision. Given the above, the waiver supports the highest degree of protection for child health and safety short of requiring in-state criminal registry clearance prior to beginning provisional work.

Given the above, extension of the waiver supports the highest degree of protection for child health and safety possible during the COVID-19 pandemic.

Due to the COVID-19 pandemic, effective October 1, 2020, compliance with this background check requirement has been extended via with the approved waiver, dated November 24, 2020.

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