

Child Care and Development Fund (CCDF) Plan For Vermont 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)).

Effective Date: 07/15/2020

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Vermont Department for Children and Families

Street Address: 280 State Drive, NoB 1 North

City: Waterbury

State: Vermont

ZIP Code: 05671

Web Address for Lead Agency: <http://dcf.vermont.gov/>

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Steven

Lead Agency Official Last Name: Berbeco

Title: Deputy Commissioner, Child Development Division, Department of Children and Families

Phone Number: 802-241-0819

Email Address: Steven.Berbeco@vermont.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.

Effective Date: 10/01/2018

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Melissa

CCDF Administrator Last Name: Riegel-Garrett

Title of the CCDF Administrator: Policy Director

Phone Number: 802-989-9865

Email Address: melissa.riegel-garrett@vermont.gov

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

Street Address: 280 State Drive, NOB 1 North

City: Waterbury

State: Vermont

ZIP Code: 05671

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

CCDF Co-Administrator First Name: Anne

CCDF Co-Administrator Last Name: Rada

Title of the CCDF Co-Administrator: Child Care Benefits Administrator

Description of the role of the Co-Administrator: Plan coordination and maintenance

Phone Number: 802-777-4720

Email Address: anne.rada@vermont.gov

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

Street Address: 280 State Drive, NOB 1 North

City: Waterbury

State: Vermont

ZIP Code: 05671

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.

Effective Date: 10/01/2018

- 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 all that apply.

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

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.

Other.

Describe:

2. Sliding-fee scale is set by the:

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.

Other.

Describe:

3. Payment rates are set by the:

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.

Other.

Describe:

4. Other. List and describe other program rules and policies and describe (e.g., quality rating and improvement systems [QRIS], payment practices):

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

Effective Date: 10/01/2018

a) Who conducts eligibility determinations?

- CCDF Lead Agency
- Temporary Assistance for Needy Families (TANF) agency

- Other state or territory agency
- Local government agencies, such as county welfare or social services departments
- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe

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

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

Describe

c) Who issues payments?

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

Describe

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)).

Effective Date: 10/01/2018

Twelve Community Child Care Support Agencies (CCCSA) receive grants to provide child care financial assistance eligibility determination and referral services to families.

Performance measures are written into the grant specifications and the Child Development Division monitors these measures for compliance through BFIS data extracts and on-site case file audits. Performance measures include:

Referral:

1. 80% of referral clients have been offered information about quality care indicators.
2. 80% of referral clients surveyed indicate that the service was helpful to them.
3. 75% of regulated child care programs with referral information updated in 3 months in BFIS.

Child Care Financial Assistance:

1. 10% maximum improper payment rating for Subrecipient, as determined by the CDD's annual case review process.
2. 75% of CCFAP applications are initiated within 7 business days of receipt.
3. 75% of CCFAP eligibility will be determined (or the applications closed) within 30 days of initial application.

1.2.4 Lead Agencies must assure that, to the extent practicable and appropriate, any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop must be made available on request to other public agencies, including public agencies in other States, for their use in administering child care or related programs (98.15(a)(11)).

Assure by describing how the Lead Agency makes child care information systems available to public agencies in other states to the extent practicable and appropriate.

When requested division staff meet with other states to share the child care information system created for Vermont, Bright Futures Information System (BFIS). Multiple states have requested tours of the software, however most would like customized options for their state, which is not easily accomplished with BFIS and states have opted out of receiving any additional information.

Effective Date: 10/01/2018

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)).

Effective Date: 10/01/2018

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

CDD grants and contracts related to CCDF assistance contain the following safeguards:

- Protected Health Information: The Grantee shall maintain the privacy and security of all individually identifiable health information acquired by or provided to it as a part of the performance of this grant. The Grantee shall follow federal and state law relating to privacy and security of individually identifiable health information as applicable, including the Health Insurance Portability and Accountability Act (HIPAA) and its federal regulations.
- Other Confidential Consumer Information: The Grantee agrees to comply with the requirements of AHS Rule No. 08-048 concerning access to information. The Grantee agrees to comply with any applicable Vermont State Statute, including but not limited to 12 VSA §1612 and any applicable Board of Health confidentiality regulations. The Grantee shall ensure that all its employees and subgrantees performing services under this agreement understand the sensitive nature of the information that they may have access to and sign an affirmation of understanding regarding the information's

confidential and non-public nature.

- Social Security numbers: The Grantee agrees to comply with all applicable Vermont State Statutes to assure protection and security of personal information, including protection from identity theft as outlined in Title 9, Vermont Statutes Annotated, Ch. 62.

Effective Date: 10/01/2018

1.3 Consultation in the Development of the CCDF Plan

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

(1) Appropriate representatives of units of general purpose local government-(658D(b)(2); 98.10(c); 98.12(b); 98.14(b)). General purpose local governments are defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf.

(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.

Effective Date: 10/01/2018

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

The Child Development Division in the Department for Children and Families (DCF/CDD) state co-administrator met with leadership from the Vermont Association of Planning and Development Agencies (VAPDA) to obtain their input in the development of Vermont's CCDF Plan. The CCDF preprint was shared ahead of the meeting and the meeting included an orientation to the plan, the ongoing implementation work of the lead agency and gathering their input on the development of the plan. VAPDA is a non-profit corporation composed of the eleven Regional Planning Commissions of Vermont created and operating under the provisions of the [Municipal and Regional Planning and Development Act](#). The mission of VAPDA is to increase the effectiveness of Vermont's Regional Planning Commissions, and public and private planning by the Municipalities, Regions and the State of Vermont. Vermont's Municipal and Regional Planning and Development Act includes [Planning Goal 13](#): To ensure the availability of safe and affordable child care and to integrate child care issues into the planning process, including child care financing, infrastructure, business assistance for child care providers, and child care work force development.

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

The Lead Agency's Deputy Commissioner represents DCF as the Commissioner's Designee on the Building Bright Futures Statewide Advisory Council (BBF SAC). She serves on the Executive Committee of the BBF SAC and is currently a Co-Chair. The SAC received a brief presentation of information about the CCDF Plan under development and designated their Early Learning and Development (ELD) Committee to consult on the plan development. In January of 2018, the CCDF co-administrator presented to the ELD on the information contained in the preprint, discussed the timeline and activities for developing the Plan and committee members provided input. In June of 2018, the ELD reviewed and provided final input to the final draft of the Plan (following the incorporation of feedback through the public hearing and comment period).

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.

N/A

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

The Early Childhood Interagency Collaboration Team (ECICT) acts as an interagency coordinating body to address issues and programs of shared concern and to coordinate services and supports for children and families to advance positive educational outcomes from the earliest years. The CCDF State Plan has been a topic on their shared agenda. The ECICT meets bi-monthly and includes representatives from the Governor's Office, the Agency of Education, the Agency of Human Services Secretary's Office, the Vermont Department of Health (maternal Child Health), the Department for Children and Families (Child Development Division), and the Building Bright Futures Council (Executive Director).

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:

Effective Date: 10/01/2018

a) Date of the public hearing. 05/23/2018

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).
05/02/2018

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.

The notice was posted on the division's blog (<http://dcf.vermont.gov/cdd-blog/child-care-and-development-fund-ccdf-state-plan-public-hearing>) which is a fully compliant website tool. In addition, an email announcement was sent to anyone that is interested in receiving information from the division, which includes advocacy groups, parents, legislators and the general public. An email announcement went to all regulated child care programs, center based, afterschool and family child care homes, and was sent to Child Care Financial Assistance eligibility agencies, referral agencies and parent child centers.

d) Hearing site or method, including how geographic regions of the state or territory were addressed. Individuals could attend in person in Waterbury, VT, which is a central location easily accessible off the interstate. The meeting location was in a fully accessible meeting space. Also, individuals could attend the hearing using Skype for Business technology on their computers or call in to a phone number. In addition, comments could be submitted by SurveyMonkey

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.)

The plan was made available to the public on 05/16/2018 on the division's website which is a fully compliant website tool. The plan was also emailed out to anyone that is interested in receiving information from the division, which includes advocacy groups, parents, legislators and the general public. An email announcement went to all regulated child care programs, center based, afterschool and family child care homes, and was sent to Child Care Financial Assistance eligibility agencies, referral agencies and parent child centers.

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? Information provided by the public was taken into consideration regarding the provision of child care services in the following

ways: 1. Changes made to the plan: 4.6.2.b: added info about state's collaboration on the Stalled at the Start Report; Changes to approach/procedures under consideration: 4.2 Assessing Market Rates and Child Care costs, 4.4 Payment rates assure equal access; 7.2 Use of Quality funds (post how and amount of funds spent) Not accepted: The "Make Way for Kids" grant has not been included in the plan as the program will not be state funded after Oct 1, 2018.

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>)

Effective Date: 10/01/2018

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.

<http://dcf.vermont.gov/cdd/reports>

b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe the strategies below, including any relevant website links as examples.

Working with advisory committees.

Describe:

Working with child care resource and referral agencies.

Describe:

Providing translation in other languages.

Describe:

Sharing through social media (e.g., Twitter, Facebook, Instagram, email).

Describe:

- Providing notification to stakeholders (e.g., provider groups, parent groups).

Describe:

Once the plan is approved provider groups, and others interested in division reports who opt into email are notified by email announcement.

- Other.

Describe:

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

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

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

This list includes 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 school-age 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.

Effective Date: 10/01/2018

(REQUIRED) Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns.

Describe the coordination goals and process:

The Vermont Association of Planning and Development Agencies (VAPDA). The mission of VAPDA is to increase the effectiveness of Vermont's Regional Planning Commissions, and public and private planning by the Municipalities, Regions and the State of Vermont. Vermont's Municipal and Regional Planning and Development Act includes Planning Goal 13: To ensure the availability of safe and affordable child care and to integrate child care issues into the planning process, including child care financing, infrastructure, business assistance for child care providers, and child care work force development. Regina Mahony, from the Chittenden County Regional Planning Commission is engaged with the lead agency and its partners in the development and deployment of a Vermont Child care Supply & Demand Study. Work with VAPDA during the 2019-2021 plan cycle will include identifying and providing the support needed by regional and local planning commissions to effectively realize Planning Goal 13.

(REQUIRED) State Advisory Council on Early Childhood Education and Care (or similar coordinating body) (pursuant to 642B(b)(1)(A)(i) of the Head Start Act).

Describe the coordination goals and process:

Building Bright Futures (BBF) is Vermont's Governor designated State-wide Advisory Council (SAC) charged with creating an integrated system of services for Vermont children and families, from the prenatal period through age eight. BBF has a statewide network of Regional Councils that link community-based planning and program development with the SAC. BBF also has a committee structure to ensure full engagement of stakeholders in planning, development and implementation of statewide priorities. BBF's committee structure is a central strategy for plan coordination and implementation and to that end Lead Agency Staff serve and lead on each of these committees. In addition, we engage with BBF's Regional Council

leadership regularly by participating in monthly coordination calls and attending their regional meetings as needed/requested. The goals of this coordination include: aligning the quality of services; promoting constructive partnerships across sectors; providing high quality full day-full year Early Learning and Development (ELD) and out of school time settings programs that meet the needs of children and families; linking comprehensive services to children in ELD and out of school time settings; ensuring continuity of care; smoothing transitions for children between programs and as they age into school; and building the capacity for high quality ELD and out of school time opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in

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:

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:

DCF/CDD is responsible for IDEA Part C. We co-administer this program with the Agency of Education who is responsible for IDEA Section 619 under an Interagency Agreement that has been approved by the Federal Department of Education. In Vermont Early Intervention (IDEA Pat C) is embedded in Children's Integrated Services (CIS) within DCF/CDD. CIS is a unique model for integrating early childhood health, mental health, evidence-based home visiting, family support, early intervention and specialized child care services for pregnant and post partum women and children birth to age six. The model is designed to improve child and family outcomes for vulnerable populations by providing family-centric holistic services, effective service coordination, flexible funding to address gaps in services, prevention, early intervention, health promotion and accountability. DCF/CDD administers CIS overseeing services delivered to children and families by 12 regional CIS coalitions of

local partners unified under a single fiscal agent in each region. CIS services and supports are delivered in homes and in early learning and development (ELD) settings. The goals of this coordination include: building the capacity for high quality Early Learning and Development (ELD) and out of school time opportunities for children with high needs; linking comprehensive services to children in ELD and out of school time settings; supporting families to build protective factors that improve their stability and capacity as children's first teachers; supporting the success of children with high needs in ELD and out of school time settings, and smoothing transitions for children between programs and as they age into school.

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

Describe the coordination goals and process:

The Head Start State Collaboration Office (HSSCO) is in the Statewide Systems and Community Collaboration Unit in DCF/CDD. The HSSCO Director attends monthly meetings of the Head Start Association and acts as a liaison between Head Start grantees and state agencies, including DCF/CDD, AHS and the Agency of Education (AOE). Supporting partnerships between Head Start grantees and prekindergarten programs in public school and community settings and promoting Head Start/Early Head Start -Child Care Partnerships is a strategic priority for CDD. The goals of this coordination include: providing high quality full day-full year Early Learning and Development (ELD) programs that meet the needs of children and families; linking comprehensive services to children in ELD settings; ensuring continuity of care; smoothing transitions for children between programs and as they age into school; and building the capacity for high quality ELD opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in.

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

Describe the coordination goals and process:

The Vermont Department for Health (VDH) is the State agency responsible for public health, including immunizations and, like CDD/DCF, is a part of the Agency of Human Services. Coordination happens at all levels: commissioners and deputy commissioners across AHS meet weekly with the Secretary and central office leadership; The deputy commissioner of the Maternal Child Health Division (MCH) of VDH meets monthly with the deputy commissioner of CDD; leadership and staff of

CDD and MCH serve together on BBF Committees advancing strategies in Vermont's Early Childhood Action Plan and MCH staff attend the weekly systems and community collaboration unit team meetings. The goals of this coordination include: a holistic, cross-sector approach to early childhood development and learning; enhancing the health and safety of early learning and development (ELD) programs; aligning quality of services; coordinating services to families; and linking comprehensive services to children in ELD settings.

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

Describe the coordination goals and process:

The Vermont Department of Labor (DOL) is the State agency responsible for employment services/workforce development CDD works in partnership with DOL on childcare workforce training needs by meeting regularly with staff from DOL's Workforce Development Division. One area of collaboration is our shared support for the Vermont Child Care Apprenticeship Program, administered by Vermont Child Care Industry and Careers Council (VCCICC). Goals for this coordination are to ensure Vermont's child care workforce and child care employers have the supports they need to provide high quality services to working Vermonter's with young children and to build the supply of high quality Early Learning and Development (ELD) and out of school time opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in.

(REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK).

Describe the coordination goals and process:

The Vermont Agency of Education is responsible for public education and co-administers prekindergarten (preK) with AHS/DCF/CDD. Leadership from AOE and AHS/DCF/CDD work together on the Early Childhood Coordination Team (ECICT) to coordinate services and supports for children and families to advance positive educational outcomes from the earliest years. The ECICT maintains a broad view of the collective work across the early childhood world to foster a collaborative and collective approach across state government to realizing the promise of every Vermont child. This broad view includes federal and state grants that support this vision, such as the Early Learning Challenge-Race to the Top grant and the Preschool

Development and Expansion grant and early childhood programs with shared inter-agency responsibility, including, but not limited to: Publicly Funded PreK under Act 166: Monitoring, Fingerprinting, Program Evaluation; Head Start Collaboration; Vermont Early Learning Standards; Special Education IDEA Part C and 619; Kindergarten Readiness Survey and VT Step Ahead Recognition System (STARS). DCF/CDD and Agency of Education (AOE) co-administer publicly funded prekindergarten education to support a robust mixed delivery system that meets the needs children and families. Education Funds for publicly funded PreK are layered with Head Start funding, CCDF subsidies and parent paid tuition to increase affordable access to high quality early care and learning services in socio-economically diverse programs; While AOE employs the PreK coordinator, the PreK interagency-team meets bi-weekly to address implementation of universal PreK The goals of coordination include: providing viable options for part day or full day services for families; ensuring continuity of care; smoothing transitions for children between programs and as they age into school, enhancing and aligning quality of services across settings, linking comprehensive services to children in early learning and development (ELD) and out of school time settings and building the capacity for high quality ELD and out of school time opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in.

(REQUIRED) State/territory agency responsible for child care licensing.

Describe the coordination goals and process:

DCF/CDD is the entity responsible for child care licensing. The Director of Child Care Liceninsing meets weekly with the CDD management team that also includes the state administrator. One of the goals of these meetings and coordination in general is to ensure that all required health and safety aspects are in place and well supported in order to ensure the health and safety of children in Vermont's regulated childcare system.

(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 Agency of Education is responsible for the CACFP. DCF/CDD staff, 3Squares VT (SNAP) staff and AOE CACFP staff consult with Hunger Free Vermont and food security advocates to promote meals and nutrition services for children as part of early

childhood and school age programs and to increase food security and healthy nutrition for young children and their families. Leadership from the Agency of Education (AOE) and DCF/CDD participate together on the BBF SAC. The BBF Subcommittee Early Childhood Wellness Committee oversees Result #1 of Vermont's Early Childhood Action Plan which includes a strategy to "Increase participation in existing food and nutrition programs and expand capacity of such programs." CDD is an active participant on that committee with AOE representatives. The goals of this coordination include: aligning and improving the quality of Early Learning and Development (ELD) services; ensuring children have access to nutritious meals and snacks in ELD settings and linking comprehensive services to children in ELD settings.

- (REQUIRED) McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons.

Describe the coordination goals and process:

The Vermont Agency of Education is the designated McKinney-Vento state coordinating agency for homeless education. Staff from the DCF/CDD and the HSSCOD, sits on an interagency group convened by the Agency of Human Services to address family homelessness with the AOE Coordinator of the McKinney-Vento Homeless Liaisons. The group coordinates and aligns efforts around addressing the needs of homeless children and families including early learning and development and education. The goals of this coordination include: providing access to high quality Early Learning and Development (ELD) and out of school time programs for vulnerable populations; linking comprehensive, trauma informed services to ELD and out of school time programs; and smoothing transitions for children between programs or as they age into school.

- (REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program.

Describe the coordination goals and process:

The Economic Services Division (ESD) is responsible for the Reach Up Program (Vermont's TANF) and is in DCF with CDD. Deputies in both divisions are on the DCF Leadership Team which meets weekly. The two divisions work closely together on budget and policy development and supporting families to achieve economic stability. They collaboratively implement a two generation approach to mitigating the impacts of

poverty on family well being and child development. CDD staff provides training and technical assistance regarding child care to Reach Up workers. The goals of this coordination include: providing viable options for part day or full day services for families; ensuring continuity of care; smoothing transitions for children between programs and as they age into school, enhancing and aligning quality of services across settings; linking comprehensive services to children in early learning and development (ELD) and out of school time settings; coordinating services to families; and building protective factors in families to support and enhance their capacity as the children's first teachers.

(REQUIRED) Agency responsible for Medicaid and the state Children's Health Insurance Program.

Describe the coordination goals and process:

The Department for Vermont Health Access (DHVA), in AHS, is responsible for Medicaid and the state Children's Health Insurance Program: Dr Dynasaur and is part of the Agency for Human Services (AHS) as is DCF/CDD. DHVA Leadership sit on the AHS Integrated Family Services (IFS) Leadership Team and on the AHS Interagency Policy and Operations Team with the CCDF Co-Administrator. DCF/CDD leadership work with staff in DHVA to creatively leverage Medicaid resources to provide supports for children with high needs eligible for Medicaid to ensure their success in early learning and development programs. The goals of this coordination include: aligning quality of services; coordinating services to families; linking comprehensive services to children in Early Learning and Development (ELD) settings; and smoothing transitions for children between programs and as they age into school.

(REQUIRED) State/territory agency responsible for mental health

Describe the coordination goals and process:

The Department of Mental Health (DMH) is responsible for mental health and is part of the AHS with DCF/CDD. Commissioners and deputy commissioners across AHS meet weekly with the Secretary and central office leadership. Representatives from DMH also sit on the AHS Integrating Family Services (IFS) Leadership and Implementation Teams with CDD staff. The teams each meet three times a month to integrate child and family services across the agency. The Children's Integrated Services (CIS) Unit in CDD includes a focus on Early Childhood and Family Mental Health that includes mental health consultation in early learning and development (ELD) programs. Staff

from DMH consult with CDD staff to develop, implement and improve those services to support the social and emotional development of children. CIS staff from CDD are co-located with DMH staff as part of the IFS effort. The goals of this coordination include: a holistic, cross-sector approach to early childhood development and learning; supporting the social-emotional development of children in early learning and development (ELD) programs; aligning quality of services; coordinating services to families; and linking comprehensive services to children in ELD settings.

- (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:](#)

DCF/CDD contracts individually with 12 regional Community Child Care Support Agencies (CCCSA) to: determine income eligibility and referral for the Child Care Financial Assistance Program (CCFAP). The CCCSAs manage certificates that link children in eligible families with participating providers; and provide consumer education and referral services for families, particularly families participating in CCFAP. CDD program staff and leadership meet regularly with leadership in member agencies. We worked closely together to reasonably interpret consumer education requirements in the CCDBG Act of 2014 and incorporate these into CCCSA grants. On an on-going basis the CCCSAs and CDD work with BBF Regional Councils, child care providers and providers of professional development to assess and increase the capacity for high quality early care and learning programs to serve children and families in their communities. The goals of this coordination include: providing viable options for part day or full day services for families; ensuring continuity of care; smoothing transitions for children between programs and as they age into school, enhancing and aligning quality of services across settings, linking comprehensive services to children in early learning and development (ELD) and out of school time settings and building the capacity for high quality ELD and out of school time opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in.

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

[Describe the coordination goals and process:](#)

Vermont Afterschool, Inc is an independent 501C-3 organization that works with afterschool programs, advocates, and partners throughout the state to strengthen out-of-school time programming for children and youth in Vermont, to expand the number and types of programs being offered, and to improve access for all children and youth regardless of race, creed, color, religion, sexual orientation, family income, family situation, or geographic location. Under the guidance of a strong and diverse Partnership Advisory Council, Vermont Afterschool provides and supports training and technical assistance to programs and practitioners, awards grants and recognition for innovation and quality improvement, and hosts statewide events and conferences. The work of Vermont Afterschool is supported by private funds from the C.S. Mott Foundation and the Noyce Foundation, federal and state funds from both Vermont Agency of Education and the Child Development Division in the Department of Children and Families, Vermont Agency of Human Services (including CCDF quality funds) and funding from the Vermont Student Assistance Corporation. Goals for coordination include: enhancing and aligning the quality of services for school-age children; linking comprehensive services to children in school-age settings; developing the supply of quality care for vulnerable populations out-of-school time settings.

[\(REQUIRED\) Agency responsible for emergency management and response.](#)

[Describe the coordination goals and process:](#)

The Vermont Agency of Human Services, Emergency Management and Department of Public Safety are responsible for the state's Continuity of Operations Plan (COOP) and State Emergency Operations Plan. The Department for Children and Families-Child Development Division coordinated the development of the Emergency Response Planning Guide for Child Care Providers. These plans were developed in coordination with the Agency of Human Services, Department of Health, Agency of Education, Regional Planning Commissions, committee members from the State Advisory Council and others. The goals of this coordination include: technical assistance to child care providers, continuation of subsidy payments and determination of eligibility, provide emergency child care services where needed, and ensure post disaster recovery services are in place.

[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

The Head Start State Collaboration Director works in the Child Development Division (CDD) and is in the chain of command to the CCDF Child Care Administrator. She attends the Head Start Association Executive Director monthly meetings and acts as a liaison between CDD and federal Head Start grantees which are the local agencies that have been awarded Early Head Start and Child Care Partnership (EHS/CCP) funding in Vermont. CDD staff have attended Region I conferences and meetings for EHS/CCP with grantees. We have worked with grantees to align child care subsidy policies to support goals of the EHS and CCP programs and support high quality full day, full year comprehensive early childhood services for Vermont families with young children.

- State/territory institutions for higher education, including community colleges

Describe

The Community College of Vermont (CCV) was selected as CDD's partner in transforming the Early Childhood and Afterschool Professional Development System in Vermont - Northern Lights at CCV. Low or no cost training is offered through Northern Lights at CCV to ensure that child care workers have opportunities to meet training and qualification requirements in Child Care Licensing regulations. Northern Lights at CCV employs regionally located career counselors dedicated to the early childhood and afterschool workforce to help individuals create attainable Individual Professional Development Plans to achieve their professional goals. Staff and leaders from CDD work closely with staff and leaders from CCV to grow and support a skilled and knowledgeable professional workforce for early childhood programs and services and afterschool programs in Vermont.

A Higher Education Consortium including all institutions of higher education (IHE) offering early childhood classes, certificates and degrees in Vermont was successfully launched and supported through Vermont's Early Learning Challenge Grant (ELCG). That group has created and successfully implemented an annual week-long summer Early Childhood Institute that has been enthusiastically received and well attended by professionals in public and private early childhood programs across the state. The

group has also worked on alignment of course content and articulation agreements. CDD and the Agency of Education will collaborate to maintain and support that group once the ELCG ends in December 2018 in support of continuing progress toward the goal to move early childhood professionals toward credit bearing professional development experiences and degrees.

[Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services.](#)

[Describe](#)

In addition to responsibility for early childhood and afterschool child care services in Vermont, CDD is responsible for Children's Integrated Services (CIS), an innovative model for integrating early childhood health, mental health, a continuum of evidence-based home visiting, early intervention and specialized, child care services for pregnant and postpartum women and children birth to age six. The model is designed to improve child and family outcomes by providing family-centric holistic services, effective service coordination, and flexible funding to address prevention, early intervention, health promotion, and accountability. CDD administration of CIS in Vermont includes regular and on-going:

- coordination with federal partners including US Department of Education, Office of Special Education Programs (IDEA Part C) and US Department of Health and Human Services: Administration for Children and Families, Children's Bureau (CBCAP), Substance Abuse and Mental Health Services Administration (Early Childhood and Family Mental Health), and Health Resources and Services Administration, Maternal and Child Health Bureau (MIECHV Program);
- coordination with other state agencies and departments including: Agency of Education (IDEA), DCF Family Services Division (child welfare), AHS Department of Mental Health (Early Childhood and Family Mental Health), AHS Department of Health, Maternal and Child Health Division (home visiting) and AHS Department of Vermont Health Access (Medicaid funding including EPSDT);
- coordination with local public school systems and local private agencies providing child and family services including Parent Child Centers, Designated Mental Health Agencies and Home Health Agencies.

[State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant.](#)

[Describe](#)

CDD leadership and staff work hand in hand with leadership and staff from the Maternal Child Health (MCH) Division in Vermont Department of Health. Both

Divisions sit within the Agency of Human Services and partner closely on population health initiatives for young children and families. Specific areas of collaboration include creating a continuum of effective evidence based and evidence informed home visiting services available state-wide, providing high-quality health consultation to child care programs and standing up Help Me Grow Vermont, a statewide system promoting universal developmental screening and improving access to existing resources and services for expectant parents and families with young children through age 8.

[Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment.](#)

[Describe](#)

In Vermont, the Department for Vermont Health Access (DHVA) in the Agency of Human Services is responsible for EPSDT. The Deputy Commissioner for CDD meets regularly (at least weekly) on an AHS Leadership Team with DHVA leadership. The Director of CIS in CDD participates in an agency wide EPSDT work group. CDD staff and DHVA staff interact regularly to ensure Medicaid eligible children receive the services to which they are entitled.

[State/territory agency responsible for child welfare.](#)

[Describe](#)

The Family Services Division (FSD) is part of Vermont Department for Children and Families, as is CDD. Teams from FSD and CDD meet regularly (at least monthly) to collaborate on prevention programs and services, to coordinate policies and practices and to ensure that children in state custody and children at risk of child abuse and neglect and their families have access to services and supports that address trauma, minimize or mitigate the impact of toxic stress, build protective factors in families and advance optimal child development.

[State/territory liaison for military child care programs.](#)

[Describe](#)

Vermont no longer has a funded state liaison for military child care programs. When that position was funded, that individual was housed in the CDD and has worked closely with CDD staff to coordinate services for families in Vermont's National Guard or in active military service.

[Provider groups or associations.](#)

[Describe](#)

CDD has positive relationships with the Vermont Association for the Education of Young Children and the Vermont Child Care Provider Association. CDD staff is available to meet and consult with smaller, local Child Care Director collaboratives and groups and with regional and local Starting Points Networks which are local groups of early childhood professionals across 12 regions in Vermont who take initiative through leadership, professional development and peer support to encourage, learn and grow together. CDD helps to fund Starting Points Networks.

CDD also has positive relationships with Vermont Superintendent's Association, Vermont's School Board Association, Vermont's Principal's Association and the Vermont Council of Special Education Administrators.

[Parent groups or organizations.](#)

[Describe](#)

[Other.](#)

[Describe](#)

CDD has a strong and positive collaborative relationship with philanthropic partners in Vermont with a mission committed to early learning and development including the AD Henderson Foundation, the Turrell Fund and the Permanent Fund. Staff from these organizations participate on many groups, committees and councils that CDD staff participate on, including the Building Bright Futures Early Childhood State Advisory Council. We consult with one another about strategic partnerships and coordinate our efforts to increase access to access to affordable, high quality child care and early learning for all Vermont children.

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 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: 10/01/2018

No (If no, skip to question 1.5.2)

Yes. If yes, describe at a minimum:

a) How you define "combine"

Blending multiple funding streams, and/or layering funds together from multiple funding streams in order to leverage capacity to expand and/or enhance comprehensive high quality early care and learning and out of school time services for children and families that are developmentally beneficial for children and strengthen families.

b) Which funds you will combine

CCDF, TANF, Medicaid, IV-E, IDEA, Part C, Head Start, Early Head Start, Early Head Start - Child Care Partnership (EHS CCP) Grants, Early Learning Challenge Grant (ELCG), Preschool Development and Expansion Grant (PDEG), Social Services Block Grant, IV-B, and **State**: State General Funds, State Education Funds

c) Your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations

Goals of combining funds include: supporting high quality full-day, full year early learning and development services for working families; providing continuity of care for children; smoothing transitions for children; enhancing and aligning the quality of Early Learning and Development (ELD) and out of school time services across settings and sectors; linking comprehensive services to children in ELD and out of school time programs; supporting the success of children with high needs in integrated high quality ELD and out of school time programs; and building the capacity for high quality ELD and out of school time opportunities for all children in diverse socio-economic and ethnic-cultural groups reflective of the communities they live in.

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

Vermont combines funding using different methods appropriate to the funds involved. At the **state level**, Medicaid funds under a state Managed Care Organization (MCO) waiver are combined with matching state funds and leveraged against IDEA Part C

funds to provide supports for successful integration of children with high needs into high quality ELD programs. Often these are combined at the program level with federal CCDF and state General Funds in the Child Care Financial Assistance Program (CC FAP). (CIS, Specialized CC Services). For children eligible, IV-E and IV-Bare used to leverage CCDF and state general funds in CC FAP and to provide additional support services for children in protective services in ELD programs. TANF transfer and Social Services Block Grant are combined with CCDF at the state level to increase access to early care and learning and out of school time programs for low income families.

At the local level, Vermont Education Fund dollars for publicly funded preschool are layered with Head Start funds, CC FAP funds and parent tuition to support full day, full year programs that wrap around prekindergarten hours. In the case of Head Start partnerships these programs are comprehensive in nature of the most vulnerable children. For children eligible for IDEA Part B Section 619, IDEA dollars are combined with state Education Funds to support least restrictive integrated ELD settings. (Act 166 PreK and Essential Early Education Services) PDEG funds are also combined with state and local Education Funds and with Head Start and CCDF funds at the local level.

MCO Medicaid funds and MCO Investment funds and state matching funds are combined with CCDF funds and state General Funds in the CC FAP at the program level to support comprehensive services in high quality ELD programs serving vulnerable populations. Some of the participating programs are Head Start grantees who leverage these funds to expand Head Start programming and partnerships. Early Learning Challenge Grant (ELCG) funds were added to this combination to expand services offered in Center-Based programs to Family Child Care Homes and to evaluate outcomes. (Strengthening Families Program Grants). EHS-CCP combine federal grant funds with CCDF and state general Funds to support full day-full year services for infants and toddlers.

[e\) How are the funds tracked and method of oversight](#)

Each funding stream is accounted for by the agency with oversight responsibility for those funds. The responsible state agency enters into agreements with programs to report data on participants and outcomes and tracks those investments in accord with

state rules for procurement and monitoring. Sometimes this is invisible to state and local partners but more often they comply with multiple reporting requirements to assure responsible oversight of blended or layered funds.

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.

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: 10/01/2018

- 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:

State general funds

-- If known, identify the estimated amount of public funds that the Lead Agency will receive: \$ 20,054,729.00

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

-- If checked, are those funds:

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

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

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

- State expenditures for preK programs are used to meet the CCDF matching funds requirement.

If checked, provide the estimated percentage of the matching fund requirement that will be met with preK expenditures (not to exceed 30 percent):

-- 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:

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

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

- 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:

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

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

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)).

The public-private partnerships highlighted below are important in leveraging and advancing an integrated early care and learning and afterschool system in Vermont in order to achieve Vermont's early childhood vision: To realize the promise of every Vermont child.

[Building Bright Futures \(BBF\) Statewide Advisory Council \(SAC\)](#) is the entity responsible for coordination of early childhood in Vermont and we partner with the BBF SAC and its committees on the state level and with the BBF Regional Councils on a regional level. The

main goal in this public-private partnership is on advancing the goals and corresponding results of Vermont's Early Childhood Action Plan. This work is accomplished primarily through the BBF Committee structure where local, regional and state level stakeholders come together through monthly meetings to develop and implement work plans.

Early Childhood Wellness Committee- The Vision of the Early Childhood Wellness Committee is to ensure a comprehensive, coordinated system of quality improvement opportunities focused on Health, Nutrition and Physical Activity are developed, promoted and made available to all childcare programs. These opportunities are driven by current research informed best practice approaches and seek to meet the needs of our locally diverse populations in order to provide the best care and education to children and families in Vermont. **Result #1-All children have a healthy start. Partners- FaMLI Coalition, Help Me Grow, Home Visiting Alliance.**

Families and Communities Committee- The committee will develop a statewide approach that enriches and expands family leadership at the provider, agency, and community level by convening a statewide Family Leadership Team to provide thought leadership for family leadership best practices. **Result #2: Families and communities play a leading role in children's well-being. Partners-Permanent Fund**

Professional Preparation and Development Committee- The Professional Preparation and Development Committee formed after the first Early Childhood Workgroup meeting in 1992. This inclusive statewide workgroup has addressed issues, created resources and highlighted the need for a well-trained early childhood and after-school professional workforce. Its goal is to develop, coordinate and promote a comprehensive system of quality learning opportunities for current and prospective early childhood and after-school professionals. **Result #3- All children and families have access to high-quality opportunities that meet their needs. Partners- VAEYC, VACCRRRA, Child Care Providers Association, Let's Grow Kids, PreK Capacity Group, ELD Committee.**

Early Learning and Development Committee- The Early Learning and Development Committee informs and advises the Building Bright Futures State Council on problems and solutions in Early Care and Education settings; focusing on concerns that are specific to the Early Care and Education industry so that they can be appropriately addressed by and reflected in the work of the Building Bright Futures State Council. **Result #3- All children and families have access to high-quality opportunities that meet their needs. Partners- VAEYC, VACCRRRA, Child Care Providers Association, Let's Grow Kids, PreK Capacity Group, PPD; Result #4- Vermont invests in prevention and plans for the future success of children. Partner- Building Vermont's Future from The Child Up Summit.**

Data and Evaluation Committee- The role of Building Bright Futures Data and Evaluation Committee is to ensure, on behalf of the Building Bright Futures State Advisory Council, Vermont's Early Childhood System is aligned around a clear set of policy questions and has data available (at the child, family and community as well as program, workforce, and systems levels) that can stimulate informed dialogue, learning and action around these policy questions. The policy questions address the well-being of children as young children (short-term) through their years entering adulthood (long-term.) **Result #5- Data and accountability drive progress in early childhood outcomes. Partners-VB5, BBF ECAP Director**

Early Childhood Interagency Coordination Committee act as an interagency coordinating body to support the implementation and application of the Vermont Early Childhood Framework and the corresponding Early Childhood Action Plan, particularly those activities of the plan that fall within the purview of state government.

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 (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: 10/01/2018

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?

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

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)(l)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i))) or similar coordinating body (98.16(aa)).

1.8.1 Describe how the Statewide Child Care Disaster Plan was developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care or similar coordinating body:

The Vermont Agency of Human Services-Emergency Management in collaboration with the Department for Children and Families, Department of Public Safety, and Division of Fire Safety co-authored the Child Care Disaster Plan. The Deputy Co-chair of the State Advisory Council and representatives from Maternal and Child Health were active participants in the development process. A prework meeting was convened and from this, a draft plan was developed. The draft was sent out for review and comments. A post meeting was held prior to final publication. CCR&R agencies were not part of this process as they do not exist in Vermont.

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:

The State of Vermont Continuity of Operations Plan provides information on Tier 1, Tier 2, and Tier 3 functions for the Child Development Division. Tier 1 functions are to be performed, given a one day disruption. Tier 1 functions include staffing the CDD main phone line, processing of Child Care Financial Assistance invoices, processing of CCFAP applications for subsidy, and maintaining provider's access to the Bright Futures Information System. Additional Tier 1 functions include staffing the Licensor on Duty Line to provide immediate support to child care providers, processing child care licensing variances for temporary child care services or increasing child ratios and coordinating child care licensing visits to affected providers. Tier 2 functions to be performed, given a one day-one week disruptions includes processing licensing background clearances, processing and monitoring Specialized Child Care programs, validating Approved Relative Child Care applications and processing grant and contract invoices. Tier 3 functions to be performed, given one week-one month disruption includes processing child care licensing applications and determining CCFAP and Licensing appeals.

Effective Date: 10/01/2018

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

The licensee reports the incident to CDD either by calling the Licensor on Duty line, electronically filing an incident report through the program's BFIS account or emailing or calling their Licensing Field Specialist directly. A Child Development Division staff person also monitors media reports and notifies the Licensing Field Specialist, Licensing Field Supervisor, and the Director of Child Care Licensing of an emergency that affects a specific program. The Licensing Field Specialist will contact the program if the licensee has not already reached out to the Child Development Division. If the program doesn't respond to a

phone call, the Licensing Field Specialist will conduct a licensing visit. Once contact occurs, the Licensing Field Specialist will determine whether the program needs emergency assistance and/or assistance with maintaining continuity of care. Whether by phone or during a licensing visit, the Licensing Field Specialist reviews who the program is serving. Depending on the situation, this may include gathering the age ranges and number of children receiving care and/or collecting the names of parents and children and their contact information.

When the emergency is complex, the Licensing Field Specialist will support the licensee with obtaining emergency assistance, strategizing and identifying resources, and/or developing an action plan to support continuity of care. The Licensing Field Specialist may contact and/or direct the licensee to contact an expert such as Vermont Department of Health, Division of Fire Safety, etc. The experts will assist with assessing potential health and/or safety risks for staff and children and provide options for continuity of care. The Licensing Field Specialist may support the licensee with filing a child care licensing variance to support a temporary relocation. Necessary community partners will be consulted (Division of Fire Safety, Agency of Natural Resources, local Zoning Administrators) to secure the needed approvals for authorizing a relocation. Licensing Supervisors will prioritize and expedite processing these variances. While the Licensing Field Specialist is providing direct supports to the licensee, the Licensing Supervisor will manage the coordination and information sharing with other CDD services.

If a program is being relocated:

The Child Care Benefits Administrator is notified. The Child Care Benefits Administrator will ensure CCFAP regulations are followed and continuity of payments occurs

The Specialized Child Care Administrator is notified. The Specialized Child Care Administrator will ensure CIS Child Care Coordinators are notified and provide appropriate supports to program providing child care to protective services children and children with special health needs.

If families need assistance with finding alternative care for children:

The Child Care Benefits Administrator will ensure Referral Specialists are notified and assist families with finding alternative child care and/or preschool services; and/or

The Specialized Child Care Administrator is notified. The Specialized Child Care Administrator will ensure CIS Child Care Coordinators are notified and assist families with finding alternative care in collaboration with Referral Specialists.

Effective Date: 10/01/2018

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:

Child Care Regulations stipulate that the licensee shall develop and maintain a written Emergency Response Plan to respond to a full range of emergencies both natural and man-made. A complete plan shall include how the licensee will address and manage the following situations and responsibilities: evacuations/lockdowns, notification to local authorities of the emergency, notification to parents, identification of children and parents at time of emergency, a system for handling children with special needs, a process for relocation, a system for shelter in place, family reunification, and guidelines for continuation of care.

Effective Date: 10/01/2018

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):

The licensee shall ensure that all staff are trained on the Emergency Response Plan and are aware of where to find the written plan. Center regulation-3.7.1.2) (Family CC Home regulation-3.6.1.2). The licensee will attend emergency preparedness training which shall include content specifically related to sheltering in place (Center regulation 3.7.3) (FCCH regulation 3.6.3). The licensee shall ensure that evacuation drills are conducted at least once a month (Center regulation 3.7.2.2) (FCCH regulation 3.6.2.2)

Effective Date: 10/01/2018

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

<http://dcf.vermont.gov/childcare/providers/health-safety>, <http://vem.vermont.gov/plans/state>,
COOP plan available upon request.

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.

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: 10/01/2018

- 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:

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: 10/01/2018

- Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities
- Websites that are accessible (e.g. Section 508 of the Rehabilitation Act)
- Caseworkers with specialized training/experience in working with individuals with disabilities
- 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
- Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies
- Availability and/or access to specialized services (e.g. mental health, behavioral specialists, therapists) to address the needs of all children
- Other.

Describe:

2.2 Parental Complaint Process

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

2.2.1 Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process:

Parents and any other individual can make a complaint about a child care provider in several ways. They can call our child care consumer line at 1-800-649-2642 option 3, or file a complaint online using our data system, Bright Futures Information System (BFIS). When they call the consumer line they will talk to a Licensing Field Specialist who will take the

complaint and ask any necessary questions, interpretation or other accessibility services are available during this call. Submission through BFIS can be anonymous and walks the person through the information needed in the complaint. That complaint can be made here:

http://www.brightfutures.dcf.state.vt.us/vtcc/reset.do?5Mmr3gjmkz13-SgYEjWekr3%3dxguw3YEa.aU7zaju.xnn.xGOOF-Oq-G6%2bS6%256Uh6%256U6F.FOhgwEkeUs3peYY.wjRszYgwUVm3wjR_YEawsUzWe_WmK_SgsUWVjUVm3mWgwkmpwUVm3wjR_YEWeUYegkz13SG0D6qSdGhSS0_d

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:

A Licensing Supervisor reviews each reported complaint daily. If the complaint doesn't allege regulatory non-compliance, then the complainant is contacted (when the complainant is known) to discuss concerns and options. After which the complaint is not accepted for investigation. If the complaint alleges regulatory non-compliance, the complaint is assigned to a Licensing Field Specialist for investigation. The Licensing Field Specialist begins the investigation by connecting with the complainant (when the complainant is known) to discuss the concerns and complaint investigation process. Then the Licensing Field Specialist conducts a complaint visit at the program. The speed for processing complaint investigations is prioritized based on the level of risk to children. Complaints that allege non-compliance that places children at high risk may result in a complaint visit the same day or the next day. Complaints with low risk may result in a complaint visit within a week or two. The investigation includes observations, review of paperwork, interviews of staff, and etcetera as relevant to the nature of the complaint. If evidence demonstrates regulatory non-compliance, violations are cited and corrective action is identified. The final step is for the Licensing Field Specialist to call the complainant (when the complainant is known) and share the outcome of the investigation. A Licensing Supervisor reviews the complaint for quality assurance and closes it. Some complaints involve co-investigation with DCF's Family Services Division due to allegations of child abuse and/or neglect or other community partners (e.g. Division of Fire Safety, and Vermont Department of Health).

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:

The same process is used whether a licensed provider participates in CCDF or not. A Licensing Supervisor reviews each reported complaint daily. If the complaint doesn't allege regulatory non-compliance, then the complainant is contacted (when the complainant is known) to discuss concerns and options. After which the complaint is not accepted for investigation. If the complaint alleges regulatory non-compliance, the complaint is assigned to a Licensing Field Specialist for investigation. The Licensing Field Specialist begins the investigation by connecting with the complainant (when the complainant is known) to discuss the concerns and complaint investigation process. Then the Licensing Field Specialist conducts a complaint visit at the program. The speed for processing complaint investigations are prioritized based on the level of risk to children. Complaints that allege non-compliance that places children at high risk may result in a complaint visit the same day or the next day. Complaints with low risk may result in a complaint visit within a week or two. The investigation includes observations, review of paperwork, and interviews of staff, as relevant to the nature of the complaint. If evidence demonstrates regulatory non-compliance, violations are cited and corrective action is identified. The final step is for the Licensing Field Specialist to call the complainant (when the complainant is known) and share the outcome of the investigation. A Licensing Supervisor reviews the complaint for quality assurance and closes it. Some complaints involve co-investigation with DCF's Family Services Division due to allegations of child abuse and/or neglect or other community partners (e.g. Division of Fire Safety or Vermont Department of Health).

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

All complaints are entered into our BFIS data system under the licensed program in which the complaint is about and remains a permanent part of the licensed program's history/file. The complaint documents complainant name and contact information (when provided), original complaint narrative, an allegation section which identifies each licensing rule identified for investigation, and an investigation log that documents all investigation activity. A site visit report is written and attached to the complaint investigation log. In the allegation section, each licensing rule identified for investigation has the investigation determination (substantiated, unsubstantiated, or unable to determine) entered upon conclusion of the investigation.

Effective Date: 10/01/2018

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:

Site visit reports from complaints in which violations are cited (along with required corrective action) are posted to the BFIS public portal for consumers to review. (http://www.brightfutures.dcf.state.vt.us/vtcc/process.do?2Mmr3gjmkz13-SgYEjWekr3%3dxguw3YEa.aU7zaju.xnn.xGOSD-O6-Gh%2bSq%256Uh6%256USD.6qFgwEkeUs3peYY.wjRszYgwUVm3kmLmkkUs_umUkYAgS_UWVjUVm3mWgwkmPwUVm3kmLmkkUs_zWLEgkz13ShGGOSdFdD6O6_d) If a consumer calls the Consumer Concern Line at (800) 649-2642 option 3, they may ask about a provider's regulatory history. Information about substantiated complaints will be provided.

Effective Date: 10/01/2018

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

Afterschool Program rules 18.15 - 18.17, Center Based Child Care and Preschool Program rules 2.3.6.1 - 2.3.6.3, and Family Child Care Home rules 2.3.5.1 - 2.3.5.3 provide information on the complaint process and are accessible on CDD's website (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

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 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:

The consumer education website is designed specifically based on the parent user, the navigation is built on the language used by consumers. The website is Section 508 compliant and is mobile friendly. Information is written in plain language and at an 6th grade reading level or lower whenever possible. All electronic materials are in file formats that are accessible.

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)):

The websites are Section 508 compliant and are accessible through screen readers and other devices. Outreach materials are written in plain language and at an 6th grade reading level or lower whenever possible. All electronic materials are in file formats that are accessible. The website also has a Google Translate option for individuals to translate the information on the webpage to another language.

Effective Date: 10/01/2018

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

The websites are Section 508 compliant and are accessible through screen readers and other devices. Outreach materials are written in plain language and at an 8th grade reading level or lower whenever possible. All electronic materials are in file formats that are accessible.

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: 10/01/2018

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:

Vermont statute requires child care providers to be licensed by DCF's Child Development Division unless identified exemption criteria apply. See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>). Licensing rule 2.1.2 in Center Based Child Care and Preschool Programs Regulations and licensing rule 1.5 in Afterschool Child Care Programs Regulations allow for exemptions in addition to Vermont statute (<http://dcf.vermont.gov/cdd/laws-regs/childcare>) on non-residential property. Any program that wants to participate in CCDF is required to become licensed and follow all licensing regulations and processes. In the situations in which exemption from being licensed exists, programs have either another oversight entity or the time that children are present is limited minimizing level of risk. The division provides information to the public and prospective child care providers on our website here <http://dcf.vermont.gov/childcare/providers/becoming-provider>. The page outlines the process to become regulated in Vermont.

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

Center Based Child Care and Preschool Programs licensing rules in section 2.3.1 and 2.3.6 and licensing rules 2.3.8.13 and 2.3.9.4. Family Child Care Home licensing rules in section 2.3.1 and 2.3.5 and licensing rules 2.3.7.16 and 2.3.9.4. Afterschool Child Care Programs licensing rules 18.2 - 18.5, 18.15 - 18.17, 18.30, and 18.47. All 3 sets of

licensing regulations may be found on the Vermont Child Development Division website (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

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:

Center Based Child Care and Preschool Programs licensing rules in section 2.3.8.2 and 7.2 and licensing rules 2.3.9.3, 2.3.10.4.1, 3.2.6, 6.2.6.6, 7.6.4, 7.7.5, and 7.7.5.1. Family Child Care Home licensing rules in section 2.3.7.3 and 7.2, and licensing rules 2.3.8.3, 2.3.9.5.1, 3.1.6, 6.2.4.7, 7.6.1, 7.7.5, and 7.7.5.1. Afterschool Child Care Programs licensing rules in section 18.26, and licensing rules 5.11 - 5.18, and 18.43.a. All 3 sets of licensing regulations may be found on the Vermont Child Development Division website (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

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:

<http://brightfutures.vermont.gov>

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
- 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

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

Describe:

State prequalified prekindergarten status; licensing site visit terms and conditions on the license. Additional information is available at the discretion of the provider including guidance practices; age categories willing to serve; if they provide specialized child care services; discounts; description of the program; pets; if program participates in the food program or head start; religious activity; subsidy provider; building type; schedule; hours of operation; transportation; and meal information.

License-Exempt, non-CCDF Providers

- Contact Information
- Enrollment Capacity
- 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:

Relative CCDF Providers

- Contact Information
- Enrollment Capacity

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

Describe:

Other.

Describe:

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

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 individual provider.

Effective Date: 10/01/2018

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:

The current STARS rating, national accreditations, and prequalified prekindergarten status.

- Licensed non-CCDF providers.

Describe the quality information:

The current STARS rating, national accreditations, and prequalified prekindergarten status

- License-exempt center-based CCDF providers.

Describe the quality information:

- License-exempt FCC CCDF providers.

Describe the quality information:

- License-exempt non-CCDF providers.

Describe the quality information:

- 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:

Effective Date: 09/18/2019

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.

The Department defines plain language as "writing that is clear, concise, well-organized, and follows other best practices appropriate to the subject or field and intended audience." Public input is welcomed on all Division written materials. When written materials are revised the Division utilizes community partners, such as the Eligibility agencies, and starting points network groups for child care providers to gather input from families and other interested individuals on how to improve or clarify the materials.

b) Are monitoring and inspection reports in plain language?

If yes,

include a website link to a sample monitoring report.

http://www.brightfutures.dcf.state.vt.us/vtcc/process.do?3Mmr3x2nb_52x2n.x2nb_52x

2n_29%256UDqd0h%25GLPyxb.Pyxb_29%256UGhdDgjumkz13-
SgYEjWekr3%3dxguw3YEa.aU7zaju.xnn.xGOSD-O6-
Gh%2bSq%256Uh6%256USD.6qFgwEkeUs3peYY.wjRszYgwUVm3wjRszY_uzem_p
zuze_1meUzsugsUWVjUVm3mWgwkmpwUVm3kmLmkkUs_wkEpz1mk_ujaaUkrgkz1
3ShGGOGDSSd0q0_F

If no,

describe how plain language summaries are used to meet the regulatory requirements and include a link to a sample summary.

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.

Describe how these health and safety violations are prominently displayed.

Monitoring and inspection reports list violations first. When serious violations have been cited, the factual basis will state "this is a serious violation." The reports include the regulation cited and the "factual basis." The factual basis is a written description of the actual event(s), including if there was an injury or fatality.

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

Describe

The monitoring and inspection reports list the required corrective action the provider must do to be in compliance with the regulation.

d) The process for correcting inaccuracies in reports.

A report may be deleted and a new report may be entered if there is an inaccuracy in the report

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.

A provider may file an appeal within 30 days of the date the report was issued. The provider's appeal rights and instructions on how to file an appeal are at the bottom of any site visit report in which one or more violations is cited. An initial appeal is filed with DCF's Child Development Division and is called a Commissioner's Review. The Commissioner Review is designed to be completed within 30 working days from receipt of the appeal request. A person, not involved with citing the violations, within DCF's Child Development Division is assigned to process the appeal. The appeal process includes reviewing information and testimony from the Licensing Field Specialist, from the provider, and any other pertinent witnesses. A written copy of the appeal decision is provided to the provider, Licensing Field Specialist, and the Licensing Supervisor. If the Commissioner Review decision is to overturn a violation, a revised site visit report is issued at the time that the appeal decision letter is issued. When a violation is upheld in part, a revised site visit report is issued with the overturned portion of the factual basis removed. This revised site visit report and the appeal decision letter provide instructions on how to appeal this finding to the Human Services Board. If the Commissioner Review decision is to uphold the violation(s) in full, the appeal decision letter will include the provider's right to appeal to the Human Services Board. Any appeal to the Human Services Board is required to be filed within 30 days of the date the Commissioner Review decision letter being issued. The Human Services board is designed to complete the appeal process on a timeline agreed upon with the appellant. The Human Services Board is an objective 3rd party who is separate from the Department for Children and Families. A hearing officer holds a hearing in which all witnesses provide testimony and evidence. The hearing officer's decision is provided in writing to the provider and to DCF's Child Development Division. The Human Services Board decisions are processed like the Commissioner Review decisions. The BFIS public portal reflects any changes to violations cited. When a violation has been overturned in its entirety, the violation is expunged and removed from the BFIS public portal upon receipt of this decision by the Human Services Board. CBCCPP and FCCH rule 2.8.3 and ASP rule 18.74 state that providers may submit a request to have violations that have been posted to the public website removed after five years and if there are no repeat violations for the regulation. These requests are to be submitted through the program's BFIS account which are received and processed by a Licensing Supervisor. If the request is approved, the Licensing Supervisor removes the violation from the public portal upon issuance of the decision letter. While these violations are no longer visible to the public, the Child Development Division has the capacity to re-post the violation to the public portal should

it be cited again and has the capacity to disclose regulatory history upon request to any parent calling the Child Development Division Consumer Concern Line with regulatory history questions.

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

Licensing visit reports are required to be posted within 5 days of the licensing visit. Our BFIS data system, in which the licensing reports are entered, generates a notice to the Licensing Supervisors when a report with violations is submitted. This allows the Licensing Supervisors to do a quality assurance review of the report for timely submittal and other quality assurance review. All Licensing Field Specialists are required to document which programs they are visiting each day on their electronic calendar. If a Licensing Supervisor has a concern that site visit reports, for programs with no violations being cited, are not posted within 5 days of the licensing visit; a Licensing Supervisor can use the Licensing Field Specialist's electronic calendar to review all site visit reports versus doing a quality assurance review of those site visit reports in which violations have been cited.

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)).

Once a licensing report is posted to our BFIS public portal, it remains posted until such time as the program is no longer licensed. DCF's Child Development Division is able to hide a report from the BFIS public portal if necessary. If a program has not had a repeat rule violation cited 5 years from the date of citation, the licensee may submit a request through the program's BFIS account to have the rule violation removed from the public portal. Any violations hidden from the BFIS public portal continue to remain a part of the program's regulatory history and may be made viewable again through the BFIS public portal if a repeat rule violation is cited again in the future.

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.

Child care programs are required to report serious injuries or deaths to the Child Development Division through an online incident report in the Division's BFIS data system. This is required by Afterschool Program rule 4.9.a, Center Based Child Care and Preschool Program rule 3.2.1 and Family Child Care Home rule 3.1.1. These regulations are accessible on the Division's website: <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

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

The state definition of Abused or Neglected Child: A child whose physical health, psychological growth and development or welfare is harmed or is at substantial risk of harm by the acts or omissions of his or her parent or other person responsible for the child's welfare. Also, a child who is sexually abused or at substantial risk of sexual abuse

by any person and a child who has died as a result of abuse or neglect (33 VSA § 4912(1)). The Commissioner's designee has determined after investigation that a report is based on accurate and reliable information that would lead a reasonable person to believe that the child has been abused or neglected (33 VSA § 4912(16)). The statute is accessible online at <https://legislature.vermont.gov/statutes/section/33/049/04912>.

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

A serious injury is defined as an injury in which a child has sustained a permanent loss or impairment of function of any body part and/or has sustained serious disfigurement.

d) The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted.

This scorecard captures the outcomes and performance indicators and how the Child Development Division is contributing to the outcomes for Vermont's families and children, including the aggregate number of serious injuries, deaths, and substantiated instances of child abuse: <https://embed.resultsscorecard.com/Scorecard/Embed/23301>

A detailed report is available on this data on the Department for Children and Families website here:

https://dcf.vermont.gov/sites/dcf/files/CDD/Reports/Serious_Incident_Report.pdf

2.3.9 The consumer education website should include contact information on referrals to local child care resource and referral organizations. How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information:

The general website <http://dcf.vermont.gov/childcare/parents> has information about the community agency and contact information on for each agency. In addition, on Bright Futures Information System, when a parent searches for child care and clicks on the details of a child care program a link to the list of referral agencies is available on that page (<http://brightfutures.vermont.gov/>)

Effective Date: 10/01/2018

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:

BFIS has a statement at the top of each page that encourages parents to contact the child care referral specialist for additional information. The link for BFIS is <http://brightfutures.vermont.gov>. When a family does a search for a child care provider and clicks on the details of providers they will receive a statement about talking to their child care provider about their information and calling the child care referral specialist for detailed information and understand the website and looking for child care. They are given this link <http://dcf.vermont.gov/cdd/cccsa> which lists the appropriate referral agencies. In addition at the bottom of this webpage is the contact information for the Lead Agency, and the page contains links additional resources for families.

Effective Date: 10/01/2018

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

Consumer information: <http://dcf.vermont.gov/childcare/parents> and child care search: <http://brightfutures.vermont.gov>

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.

N/A

Effective Date: 10/01/2018

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:

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.

<http://brightfutures.vermont.gov> allows families to search for and view program information on all regulated child care programs in Vermont, including those that provide afterschool care, public school preschool, and other services. Eligibility determination is completed in community agencies that also do the child care referral services. Families that are applying for child care financial assistance are asked if they would like to receive information about child care providers and a referral specialist is available to support that search. The Child Care Financial Assistance Program booklet for families has some information about looking for child care and to talk to the local referral specialist. This booklet is provided to families

who apply for financial assistance. We also have two booklets for parents on how to find child care and what to expect from regulated care – Child Care and You and Using Regulated Child Care in Vermont. Both are available through the eligibility/referral agency and on our website at: <http://dcf.vermont.gov/cdd/publications>

Effective Date: 10/01/2018

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

In addition to the grants to local community agencies to provide child care referral services, those agencies have a Memorandum of Understanding with the statewide 2-1-1 system to do a warm handoff call to the local child care referral specialist to support families having access to child care. Child care referral agencies through their grant from the division are required to do community outreach on the availability of child care information, and that outreach includes information to other local human service agencies.

Effective Date: 10/01/2018

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.

Effective Date: 10/01/2018

Temporary Assistance for Needy Families program:

The Department for Children and Families is the lead agency for TANF and as such has information about the program and how to apply on our website: dcf.vermont.gov. In addition, eligibility specialists and referral specialists provide information to families

that are seeking services and support. The Agency of Human Services has a contract with the state 2-1-1 system to also provide information and referrals for TANF.

[Head Start and Early Head Start programs:](#)

Head Start and Early Head Start programs are required to be regulated and as such are listed as child care programs on the brightfutures.vermont.gov website. Our website also has information about Head Start services with contact information for the local Head Start agency. In addition, eligibility specialists, referral specialists, local Children's Integrated Services staff, and Parent Child Centers provide information to families that are seeking services and support.

[Low Income Home Energy Assistance Program \(LIHEAP\):](#)

The Department for Children and Families is the lead agency for LIHEAP through Economic Services Division and as such has information about the program and how to apply on our website: dcf.vermont.gov. In addition, eligibility specialists and referral specialists provide information to families that are seeking services and support. The Agency of Human Services has a contract with the state 2-1-1 system to also provide information and referrals for LIHEAP and other home heating and energy programs.

[Supplemental Nutrition Assistance Programs \(SNAP\) Program:](#)

The Department for Children and Families is the lead agency for SNAP through Economic Services Division and as such has information about the program and how to apply on our website: dcf.vermont.gov. In addition, eligibility specialists and referral specialists provide information to families that are seeking services and support. The Agency of Human Services has a contract with the state 2-1-1 system to also provide information and referrals for SNAP.

[Women, Infants, and Children Program \(WIC\) program:](#)

Vermont's WIC program is identified as a resource for parents under the economic help section on the DCF/CDD website with a direct link to the WIC section of the Department of Health's website. In addition, CCCSA staff, Children Integrated Services (CIS) staff, including home visitors and staff in Parent Child Centers provide information about the benefits of WIC and how to access WIC in their area.

Child and Adult Care Food Program(CACFP):

Staff in the CCCSAs provide information to child care providers and families about the CACFP. Outreach staff from Hunger Free Vermont encourage providers to participate in the program as a strategy for increasing food security and good nutrition for children. Regional BBF Councils also encourage participation in the CACFP in their regions.

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

CCCSA staff, Children Integrated Services (CIS) staff, including home visitors and staff in Parent Child Centers provide information about Medicaid and CHIP. The Department's website also has a link to Vermont Health Connect which is the state's health care resource under Health/Mental Health Resources.

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

The Division administers IDEA Part C services through the Children's Integrated Services program, and as such all information about Part C is available on the website and division print materials. This also connects families to IDEA Part B services through the Vermont Agency of Education. Information is also given to families with questions through the state's parent hotline - "Help Me Grow", and through local grantees - child care referral, parent child centers, Children's Integrated Services local providers, and home visiting programs. In addition, the Division conducts outreach activities specific to Part C including visiting medical offices to give information to the staff and leave materials for families and distributing information at local community events.

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.

The Division links to research and best practice information for parents through the website: dcf.vermont.gov and requires through a grant for child care referral specialists to provide information to families and the community. The division also oversees the Children's Integrated Services Program that provides resources to families, and medical professionals about concerns they have about their child's development. The services offered through CIS include IDEA Part C, home visiting, parent education, and child care consulting. In addition, a partner of the division is the Department of Health which provides a grant for a statewide Help Me Grow hotline, which is housed at the 2-1-1 center. Information available at these resources includes general ages and stages information and resources to call if a parent has concerns.

Effective Date: 10/01/2018

2.4.5 Describe how information on the Lead Agency's policies regarding the social-emotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models 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.

The division oversees the Children's Integrated Services (CIS) Program which provides mental health consultation and information about social-emotional/behavior to families directly. Information is on the division's website: <http://dcf.vermont.gov/child-development/cis> and the local agencies receiving grants to provide direct services provide local outreach with materials to medical offices, community fairs and other local places parents may access. In addition, Parent Child Centers and trained referral staff are referring families to Vermont's Help Me Grow hotline for information about parenting and child development. CIS home visitors and Parent Child Center staff provide information and resources in person to families based on the needs and questions of the family.

Effective Date: 10/01/2018

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.

Rule 6.2.8.4 in Center Based Child Care and Preschool Programs licensing regulations and section 6.2.6.1 in Family Child Care Home licensing regulations requires programs to engage in planning and implementation that support continued enrollment of children. In the event that a child's continued enrollment is at risk, rules 6.2.8.4.1 and 6.2.8.4.2 provide guidance on transition planning. In all instances the program director shall consult with the child's parents and professionals, as appropriate to develop and implement a plan to address concerns, with the goal of continuing the child's enrollment. These 2 sets of regulations may be accessed by families, providers and the general public on DCF's Child Development Division's website (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

In addition, the Division publishes a booklet for parents called Using Regulated Child Care in Vermont: A Booklet for Parents. This booklet is distributed by child care referral specialists to families looking for child care, and is also provided to child care providers to distributed to families in their care. This booklet includes an overview of regulatory requirements of programs and what parents can expect, this includes the suspension/expulsion regulations required of all regulated child care programs.

Effective Date: 10/01/2018

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 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: 10/01/2018

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)).

Vermont Help Me Grow has established a centralized phone resource, to provide families and caregivers with tools to track children's developmental milestones and get a referral and on-going support to connect with resources and services in their community, including Children's Integrated Services, which includes IDEA Part C (CIS Early Intervention), and IDEA Part B Section 619 administered by Local Education Agencies. The Vermont Department of Health has also developed and implemented an on-line Developmental Screening Registry as part of the Health Department's Child Health profile which will be used to track and communicate developmental screening results. Child care providers can obtain access to the statewide person-centered database which now includes Vermont's Developmental Screening Registry. Developmental screening tool results can be entered and shared across sectors using this registry to support improved screening rates, collaboration, and communication. The registry supports the Ages & Stages Questionnaire®, Third Edition and the Ages & Stages Questionnaire: Social Emotional, Second Edition®, and the Modified Checklist for Autism in Toddlers™ and the Modified Checklist for Autism in Toddlers, Revised with Follow up.

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 \(20 U.S.C. 1419, 1431 et seq.\).](#)

A family resource sheet is given to families at intake of the Child Care Financial Assistance. The resource sheet provides information about services available to families including the EPSDT, IDEA Part B and C, developmental screening services, and how to find out about child care options and specific information about a regulated child care program.

[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.](#)

A family resource sheet is given to families at intake and mailed with Child Care Financial Assistance certificates. The resource sheet provides information about services available to families including the EPSDT, IDEA Part B and C, developmental screening services, and how to find out about child care options and specific information about a regulated child care program. In addition to intake and mailings about Child Care Financial Assistance eligibility, these are provided by child care referral specialists and Children's Integrated Services coordinators when appropriate.

[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.](#)

Vermont's parents and caregivers can call Vermont Help Me Grow, 2-1-1, operated by United Ways of Vermont, and be connected with trained Help Me Grow child development specialists who can answer questions about children's behavior and development and connect families to resources and services in their community. Child development specialists are available from 9 a.m. to 6 p.m., Monday - Friday. Callers can leave messages after hours, as Vermont 2-1-1 is available 24 hours a day, 7 days a week, 365 days a year.

Children at risk for cognitive or other developmental delays are connected with Children's Integrated Services (CIS) administered by the Child Development Division and provided by community partners in a local integration model using a federally approved One Plan that includes the elements of EI IFSP. CIS includes IDEA Part C (Early Intervention), Nursing and Family Support Services and Home Visits, Evidence Based Home Visiting Programs, Specialized Child Care Services and Early Childhood and Family Mental Health Services.

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

As part of the Provider Outreach component of VT Help Me Grow, the Vermont Child Health Improvement Program (VCHIP) trains child health and early care and education practitioners on developmental monitoring, screening and how to link families to local resources and services. The Vermont Child Health Improvement Program through the Vermont Department of Health has coordinated professional development trainings to promote comprehensive developmental surveillance and screening training to early care and education providers in center and home-based child care settings. Many trainings have been offered to child care providers through Vermont's early childhood professional development system on the Ages & Stages Questionnaire, Third Edition and the Ages & Stages Questionnaire: Social Emotional, Second Edition. These will continue to be offered through our early childhood professional development system.

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

The link to the policy for the Consumer Statement may be found here:

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/IV.ELIGIBILITY_DETERMINATION_APPLICATION.pdf. The link to the Consumer Statement which contains information on developmental screenings may be found on the policy.

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:

Effective Date: 10/01/2018

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

A family resource sheet is given to families at intake and placed in re-determination applications sent to clients. This is a written fact sheet.

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

The resource sheet provides information about services available to families including the EPSDT, IDEA Part B and C, developmental screening services, and how to find out about child care options and specific information about a regulated child care program. In addition to intake and mailings about Child Care Financial Assistance eligibility, these are provided by child care referral specialists and Children's Integrated Services coordinators. When appropriate eligibility specialists, referral specialists and CIS coordinators also provide families with the booklets, Child Care and You and Using Regulated Care which provide detailed consumer information about requirements providers must meet. Those booklets are available to all on the division's website: <http://dcf.vermont.gov/cdd/publications>

c) Provide a link to a sample consumer statement or a description if a link is not available.

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/VT_Resources_For_Families.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 of policy promotes continuity for families receiving services through multiple benefit programs.

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

3.1 Eligible Children and Families

At the time when eligibility is determined 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

Effective Date: 10/01/2018

a) The CCDF program serves children

from 6 weeks

(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,

and the upper age is 18

(may not equal or exceed age 19).

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

Established when the primary caretaker(s) can demonstrate that his/her child has a significant health or specialized developmental need as documented by a licensed physician and/or licensed psychologist or by the assessment determining eligibility for Special Education or Early Intervention Services that includes child care as part of the child's development plan.

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

No.

Yes

and the upper age is 18

(may not equal or exceed age 19)

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

"residing with":

Living in the same household

"in loco parentis":

an individual other than a parent, age 18 or older, fulfilling a parental role in caring for a dependent child by providing physical care, guidance and decision-making related to the child's health, school, medical care and discipline.

3.1.2 Eligibility criteria based on reason for care

Effective Date: 10/01/2018

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":

Employment: involvement in an activity, either in or out of the home, through which hourly compensation of at least minimum wage is received. (no minimum hours required) This includes activity related to employment, including hours of rest or sleep, as needed for 2nd or 3rd shift employment.

Start-Up Self Employment: a new business activity determined as likely to lead to self-employment within one year. Earning minimum wage is not required during this period. A Business Plan is required.

Seeking Employment: involvement in activities generally recognized as necessary to obtain employment or training which leads to employment. *No minimum hours required.

"Job training":

Demonstrated participation in a program which is likely to lead to employment within one year after completion of the program. This need can also be established if the training is required to maintain employment. No minimum hours required.

Allowable activities include the following:

- Work programs, training programs, and other activities approved by Economic Services Division as part of the family development plan
- Work or training programs approved by the Department of Labor
- Work study programs or training programs related to employment

"Education":

Demonstrated participation in an educational program which is likely to lead to employment within one year after completion of the program. This need can also be established if the education program is required to maintain employment. No minimum hours required. Allowable activities include the following:

- High school, public or private, and high school equivalency programs such as Adult Basic Education (ABE) or General Equivalency Diploma (GED)
- Post-secondary courses at an accredited or institution of higher education offering certification or associate and bachelor's degree course work

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

- One hour of child care per class credit. If credits are not assigned, a letter from the school/training program, clearly designating the hours of class time, is acceptable.
- One hour of child care per school credit for study time. If credits are not assigned, a letter from the school/training program designating the study hours required, per class, is acceptable.
- Up to 2 hours of travel time may be authorized per day.

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:

The primary caretaker(s) must demonstrate participation in a program which, in the opinion of the Commissioner, is likely to lead to employment within one year after completion of the program. This need can also be established if the training or

education program is required to maintain employment. Volunteer work and post-bachelor education are not eligible activities.

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/2008_DCF_CDD_Child_Care_Subsidy_Regulations.pdf

3.1.2 Eligibility criteria based on reason for care

c) Does the Lead Agency consider seeking employment (engaging in a job search) an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of three months of job search)

No.

Yes.

If yes, describe the policy or procedure. (including any differences in eligibility at initial eligibility determination vs. redetermination of eligibility):

The Commissioner has determined that Seeking Employment may be authorized for up to 12 weeks (3 Months) for an income eligible parent/caretaker. In addition, if a client requests to use the service need of Seeking Employment more than once during their 12-month eligibility period or at re-determination the request will be granted.

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:

i. Please provide the Lead Agency's definition of "protective services":

A set of personalized and planned child development services designed to intervene positively in a child's life. Subsidized early care and education may be used as an intervention and safety strategy that promotes child development in the implementation of the Department for Children and Families, Family Services Division (DCF FSD) case plan for children in state custody in foster care or in the custody of biological parents or kin caregivers. Early care and education may also be authorized as a prevention and early intervention service designed to reduce stress for families and their children and promote positive child development while

avoiding the intervention of the DCF FSD. This may be authorized after a confidential application and risk assessment has been completed by the local Children's Integrated Services Team.

Note: Federal requirements allow other vulnerable children identified by the Lead Agency not formally in child protection to be included in the Lead Agency's definition of protective services for CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are not working or are not in education/training activities, but this provision should be included in the protective services definition above.

ii. Are children in foster care considered to be in protective services for the purposes of eligibility at determination?

No

Yes

iii. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis (658E(c)(5))?

No

Yes

iv. Does the Lead Agency provide respite care to custodial parents of children in protective services?

No

Yes

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

Effective Date: 07/21/2019

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

1. The total (gross) monthly income received by a child and her/his primary caregivers which is derived from any source except for the following noted below:
 - Income received from the sale of real or personal property (house, car, boat, stocks, bonds) unless the primary caretaker(s) was engaged in the business of selling such property, in which case the net proceeds will be counted as income from self-employment;

- Withdrawal from bank deposits;
- Money borrowed;
- Tax refunds including Renters Rebate and Earned Income Credit;
- Public assistance income (such as income received in DCF Economic Services Division's financial assistance programs, including but not limited to Food Stamps, Medicaid, Fuel Assistance, Reach Up, Reach First, and Postsecondary education program payments, General Assistance and Emergency Assistance);
- Value of USDA donated foods and home produce consumed by the family;
- Wage, salary or other earned income of a person under age 18 living in the household who is not the primary caretaker;
- Loans, grants, scholarships or work-study income received for training or education;
- Incentive payment for training or education or other programs or activities authorized in a Reach Up plan or other case plan;
- Supplemental Security Income (SSI);
- Child Support paid out on a regular basis to another household;
- Adoption assistance payments under Title IV-E of the Adoption Assistance and Child Welfare Act of 1980 or under the State's Adoptions Assistance Program;
- Payments to foster parent(s) from DCF's Family Services Division to subsidize the care and maintenance of a foster child;
- Self-employment business expenses other than depreciation charges, Section 179, per current IRS procedures;
- Money received from federal and or sponsored programs as stipends; and 1
- Military pay for household members deployed on active duty

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.

	(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

	(a)	(b)	(c)	(d)
1	3,933	3,343	5,333	136
2	5144	4372	5333	104
3	6354	5401	5333	84
4	7564	6430	6438	85
5	8774	7458	7543	86

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)).

N/A

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. LIHEAP Estimates 2019

e) Identify the most populous area of the State used to complete the chart above.

Statewide data was used, income guidelines apply to the entire state.

f) What was the date (mm/dd/yyyy) that these eligibility limits in column (c) became effective? 07/21/2019

g) Provide the citation or link, if available, for the income eligibility limits.

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/Sliding_Fee_Scales.pdf

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: 10/01/2018

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

Applicant must certify by checking yes or no on Childcare Financial Assistance application.

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:

When Family Services opens a case for a child and is authorizing child care, a Protective Services Authorization (PSA) is submitted by the FSD Social Worker. The child is considered to be in DCF custody and the need for child care is determined on a case by case basis based upon the needs of the child and family/foster parent. Income and assets are waived if child care is authorized as part of the safety plan.

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/2008_DCF_CDD_Child_Care_Subsidy_Regulations.pdf.

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/V.CIS_PROTECTIVE_SERVICE_S.pdf

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

When a child resides with both primary caretakers in the same household, income eligibility is based on the gross income of the primary caretakers whether the individuals are married or parties to a civil union.

When a child in the household is the legal responsibility of one primary caretaker and other children are considered the legal responsibility of both primary caretakers, separate eligibility may be determined based on the income of each primary caretaker individually if the primary caretakers are not married.

In determining eligibility of a family in which a child is residing with only one of his/her primary caretakers and an "unrelated adult", income eligibility is based on the gross income of the primary caretaker only and the unrelated adult is not considered to be a member of the household.

Effective Date: 10/01/2018

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: 10/01/2018

- 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:

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

Effective Date: 10/01/2018

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 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: 10/01/2018

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

N/A - The Lead Agency sets its initial eligibility 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's initial eligibility threshold.

Provide the second tier of eligibility for a family of three.

Describe how the second eligibility threshold:

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

ii. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:

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

iv. Provide the citation for this policy or procedure:

- 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 a graduated phase-out.

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: 10/01/2018

Average the family's earnings over a period of time (i.e. 12 months).

Describe:

When a primary caretaker works on a seasonal basis or on a limited contracted basis (i.e.: paraprofessional in school system), or if the income fluctuates on a monthly basis, the income, at the parent's request, may be spread over a year.

Request earning statements that are most representative of the family's monthly income.

Describe:

A primary caretaker is required to provide their 2 most current consecutive paystubs. If the most recent paystubs do not accurately reflect the monthly income, the family member may submit additional pay stubs or a payroll record from their employer and the income will be averaged based upon the information provided.

- Deduct temporary or irregular increases in wages from the family's standard income level.

Describe:

A primary caretaker may provide additional income information (pay stubs, payroll summary) showing that the increase in wages is temporary.

- Other.

Describe:

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: 03/18/2020

- Applicant identity.

Describe:

Application self-declaration to include name, SSN (optional), address, birthdate. Verify information through direct interface with ESD benefit programs as needed. Required annually.

- Applicant's relationship to the child.

Describe:

Application self-declaration - Cross reference with Economic Services Division (ESD) data as needed. Required annually

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

Describe:

Application self-declaration to include name, social security number, birth date. Verify information through direct interface with ESD benefit programs as needed. Required annually.

Work.

Describe:

Request, from applicant, employment verification form, pay stubs, or tax return information. Required at annually.

Job training or educational program.

Describe:

Request, from applicant, school registration and training plan. Letter from training coordinator is also acceptable. Required annually

Family income.

Describe:

Based upon an individual's service need we request employment verification, pay stubs, contracts, tax returns, and letters from SSA. If needed, child support disbursement statements, or court orders for support are requested. Information may be verified against other benefit programs in ESD. Required annually

Household composition.

Describe:

Application self-declaration - Cross reference with Economic Services Division (ESD) data for other benefit programs as needed. Required annually.

Applicant residence.

Describe:

Application self-declaration - Cross reference with Economic Services Division (ESD) data for other benefit programs as needed. Required annually

Other.

Describe:

Communication with other Departments, Division and Programs staff regarding adoption agreements, Reach Up participation, foster care, etc.

During COVID-19 Response Period (3/18/20 - 5/31/20). Families require a service

need to be eligible for Child Care Financial Assistance (CCFAP) families. Due to Covid-19 families are not able to provide necessary service need documentation due to temporary layoffs or school closures. To ensure continuity of care for families currently enrolled in CCFAP we implemented the following:

- All families whose eligibility is due to expire March 21 through June 6 will have their current authorizations extended until August 29, 2020.
- Families will be expected to reapply with all new documentation when their extended eligibility ends in August.

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: 10/01/2018

Time limit for making eligibility determinations

Describe length of time:

Contractual performance measure requirement for Community Child Care Support Agencies (CCCSAs) - 7 business days to initiate determination process and final eligibility determination must be completed within 30 days. Able to track compliance through Bright Futures Information System (BFIS).

Track and monitor the eligibility determination process

Other.

Describe:

None

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

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

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

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

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

Effective Date: 10/01/2018

a) Identify the TANF agency that established these criteria or definitions: Department for Children and Families, Economic Services Division

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

"Appropriate child care":

An available child care slot with a licensed or registered provider within 5 miles of the parent or caretaker's residence or normal route to a program activity or employment that corresponds to the days and hours care is needed and the age of the child needing care; or the participant or caretaker chooses an Approved Relative Child Care (ARCC) provider who is in compliance with the law over a regulated child care provider.

"Reasonable distance":

Located within five miles of the parent or caretaker's residence or on a normal route to a program activity or employment that corresponds to the days and hours care is needed.

"Unsuitability of informal child care":

Child care that the Child Development Division (CDD) classifies as Approved Relative Child Care (ARCC), and that a participant or caretaker determines to be unacceptable; and child care that CDD classifies as either a registered family child care home or a licensed child care center, and that a participant or caretaker determines to be unacceptable, when such determination is confirmed by the CDD.

"Affordable child care arrangements":

Child care services by a provider that accepts the state subsidy as full payment for services or charges a co-pay above the subsidized rate that the family can pay without hardship.

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

In writing

Verbally

Other.

Describe:

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

2302.2 Notification - At the time of application for financial assistance and at the time of any redetermination of eligibility, the commissioner will provide each Reach Up participating family with information about the requirement that adults participate in the services component of Reach Up. During the time a family is participating in the financial assistance component, the department shall keep adults informed of factors that affect their required participation in the services component. The department shall notify all applicants and participants, in writing, of the following:

- the individual's participation status
- a change in participation status
- the rights and responsibilities associated with the participant's status
- the availability of deferments and modifications to the work requirement
- the potential sanctions for noncooperation
- the right to request conciliation
- the right to a fair hearing for participants who do not agree with the status determination

3.2 Increasing Access for Vulnerable Children and Families

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

list or the ranking of eligible families in priority order to be served).

Note:

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

3.2.1 Describe how the Lead Agency defines:

Effective Date: 10/01/2018

a) "Children with special needs":

A child significant health or specialized developmental need as documented by a licensed physician or psychologist or by the assessment determining eligibility for special education or early intervention that includes child care as part of the child's plan. CDD reimburses at higher rates for providers receiving specialized training to care for these children. In addition, quality funds are allocated for providers serving these children.

b) "Families with very low incomes":

Children eligible for 100% benefit on the CCFAP Sliding Fee Scale. Priority rules in this category also apply to eligible children in families receiving Reach UP (TANF) benefits. Reimburse at higher rates for providers receiving specialized training to care for these children. Provide quality funds for providers serving these children. The State does not impose a co-payment however, if a provider charges more than the subsidy rate, the parent is responsible for the co-payment to the provider. At several Center based and FCC programs across the state, designated as Strengthening Families (SF) Programs, and supported with grant funding to provide comprehensive services, families with 100% benefit are not charged any additional co-payment as a requirement of the SF Grants.

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

Effective Date: 10/01/2018

a) Identify how services are prioritized for children with special needs. 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:

CDD reimburses at higher rates for providers receiving specialized training to care for these children. In addition, quality funds are allocated for providers serving these children.

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:

At several Center based and FCC programs across the state, designated as Strengthening Families (SF) Programs, and supported with grant funding to provide comprehensive services, families with 100% benefit are not charged any additional co-payment as a requirement of the SF Grants.

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:

The Child Care Financial Assistance Program (CC FAP) application requests information regarding homelessness status. If client identifies as homeless, the application is forwarded to the Specialized Child Care Coordinator in Children's Integrated Services (CIS) for processing as a Family Support application. Family Support guidelines state that homeless families are automatically approved for child care at 100% of the state's subsidized rate.

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
- Other.

Describe:

TANF families are considered "families with very low income" and are prioritized as described in b above.

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

N/A

Effective Date: 10/01/2018

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

N/A

Effective Date: 10/01/2018

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: 10/01/2018

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

The Child Care Financial Assistance Program (CC FAP) application requests information regarding homelessness status. If client identifies as homeless, the application is forwarded to the Specialized Child Care Coordinator in Children's Integrated Services (CIS) for processing as a Family Support application. The Specialized Child Care Coordinator meets with the family to provide assistance in completing the eligibility paperwork. Eligibility for Family support child care is determined by a Family Support Team. This team may authorize enrollment in the Child Care Financial Assistance program prior to obtaining all eligibility documentation. Once eligibility is approved, a certificate containing the start date of care is created to the family's child care provider. The CIS Child Care Coordinator will continue to work with the family to collect any necessary eligibility documentation until the case file is complete.

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

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 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: 10/01/2018

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)

Center Based Child Care Rule 3.4.4.2 and Registered/Licensed Family Child Care Rule 3.3.4.2 is a revised requirement to accommodate Homeless and Foster children. The prior rule stipulated that all records were required before beginning child care. The new rule states that the child's file shall be complete within the first week that the child begins to attend care and the required annual physical shall be obtained within 45 days of enrollment. The licensing guidance manuals state that if a parent discloses that they are homeless, or the provider has information that indicates a family might be homeless, documentation is placed in the child's enrollment file. Licensing staff will

use this documentation to give the child care program additional time to complete enrollment requirements. If a family is experiencing homelessness does not have immunization records in the registry, the provider will work with the family to obtain the records. Once immunization records are reviewed, if a child is not current then enrollment may occur on a provisional basis. Provisional admittance must be for a reasonable length of time that is consistent with the immunization schedule and is not to exceed 6 months after the child is admitted. In addition, if a parent needs additional time to come into compliance with a health and safety requirement, the child care provider may request a variance, per the rules in CBCCPP Section 2.7.

The Department of Health actively collaborated with the regulation revision process and the writing of the guidance manuals which included the length of grace period. Representatives from Vermont Department of Health, Vermont Agency of Education and Vermont Department of Mental Health advised and participated in all regulation development meetings.

[Provide the citation for this policy and procedure.](#)

These regulations/guidance manuals may be accessed on DCF's Child Development Division's website (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). Information regarding child care rule 3.4.4.2 is found in the Center Based Child Care Regulations on page 32 and 3.3.4.2 may be found in the Registered/Licensed Family Child Care Regulation on page 29. Center Based Child Care and Preschool Programs licensing rules section 5 and Family Child Care Home licensing rules section 5 describe the requirements for the well child exam. Vermont Center Based & Preschool Programs Guidance Manual, pages 37-38 and Vermont Family Child Care Homes Guidance Manual, pages 46-48 provide additional guidance on provisional enrollment, immunizations, well child exams and homelessness..

[Children who are in foster care.](#)

Center Based Child Care Rule 3.4.4.2 and Registered/Licensed Family Child Care Rule 3.3.4.2 is a revised requirement to accommodate Homeless and Foster children. The prior rule stipulated that all records were required before beginning child care. The new rule states that the child's file shall be complete within the first week that the child begins to attend care and the required annual physical shall be obtained within

45 days of enrollment. Once immunization records are reviewed, if a child is not current then enrollment may occur on a provisional basis. Provisional admittance must be for a reasonable length of time that is consistent with the immunization schedule and is not to exceed 6 months after the child is admitted. In addition, if a parent needs additional time to come into compliance with a health and safety requirement, the child care provider may request a variance, per the rules in CBCCPP Section 2.7.

The Department of Health actively collaborated with the regulation revision process and the writing of the guidance manuals which included the length of grace period. Representatives from Vermont Department of Health, Vermont Agency of Education and Vermont Department of Mental Health advised and participated in all regulation development meetings.

[Provide the citation for this policy and procedure.](#)

These regulations/guidance manuals may be accessed on DCF's Child Development Division's website (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). Information regarding child care rule 3.4.4.2 is found in the Center Based Child Care Regulations on page 32 and 3.3.4.2 may be found in the Registered/Licensed Family Child Care Regulation on page 29. Center Based Child Care and Preschool Programs licensing rules section 5 and Family Child Care Home licensing rules section 5 describe the requirements for the well child exam. Vermont Center Based & Preschool Programs Guidance Manual, pages 37-38 and Vermont Family Child Care Homes Guidance Manual, pages 46-48 provide additional guidance on provisional enrollment, immunizations, well child exams and homelessness..

[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\(a\)\(1\)\(i\)\(C\)\(4\)\).](#)

Child Care Licensing is part of the Child Development Division. Child Care Licensing and the Community Child Care Support agencies will refer families to Help Me Grow for assistance with immunizations and other health and safety requirements. Help Me Grow has four primary functions: Family and Community Outreach, Child Health Provider Outreach, Centralized Phone Access Point and Data Collection & Analysis. Help Me Grow Vermont is a statewide system for improving access to existing resources and

services for expectant parents and families with young children through age 8.

c) Does the Lead Agency establish grace periods for other children who are not experiencing homelessness or in foster care?

No.

Yes.

Describe:

All children are subject to Center Based Child Care Rule 3.4.4.2 and Registered/Licensed Family Child Care Rule 3.3.4.2 which states that a child's file shall be complete within the first week that the child begins to attend care and the required annual physical shall be obtained within 45 days of enrollment. Once the immunization records are reviewed, if a child is not current then enrollment may occur on a provisional basis. Provisional admittance must be for a reasonable length of time that is consistent with the immunization schedule and is not to exceed 6 months after the child is admitted. In addition, if a parent needs additional time to come into compliance with a health and safety requirement, the child care provider may request a variance, per the rules in CBCCPP Section 2.7.

3.3 Protection for Working Families

3.3.1 12-Month eligibility.

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

This change means that a Lead Agency may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the state's income eligibility threshold, but not the federal threshold of 85 percent of SMI. The Lead Agency may not terminate assistance prior to the end of the 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. A temporary change in eligible activity includes, at a minimum, any time-limited absence from work for an

employed parent due to such reasons as the need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working; any student holiday or break for a parent participating in a training or educational program; any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program; any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency; 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: 03/18/2020

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.

CDD Child Care Financial Assistance Regulation III B Duration of Eligibility, page 10 states that "Eligibility for child care services based on a service need of employment, self-employment, training, special health needs, protective services, or family support will be re-determined annually". Child Care Policy, Eligibility Determination - Application, under reporting changes- states that it is the family's responsibility to report any changes that may affect their file (e.g., change in family composition, address change, job loss, termination of educational studies) during their 12 month eligibility period. If the reported change decreases the financial assistance for the family, no eligibility change is necessary. The child care financial assistance amount remains the same during the 12 month eligibility period. If the change increases the financial assistance for the family, the application must be re-determined immediately to reflect the increase in the eligibility percentage."

During the COVID-19 response period (3/18/2020 - 5/30/2020). Families require a service need to be eligible for Child Care Financial Assistance (CCFAP) families. Due to Covid-19 families are not able to provide necessary service need documentation due to temporary layoffs or school closures. To ensure continuity of care for families currently enrolled in CCFAP we implemented the following:

- All families whose eligibility is due to expire March 21 through June 6 will have their current authorizations extended until August 29, 2020.
- Families will be expected to reapply with all new documentation when their extended eligibility ends in August.

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

Temporary change is defined as a change in eligible activities including job loss, change in participation in a training or educational activity, a time-limited absence from work, interruption of work for seasonal workers, student semester/holiday breaks, or any other cessation of work or attendance at a training or education program. Termination of eligibility will not occur due to a temporary change.

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

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/2008_DCF_CDD_Child_Care_Subsidy_Regulations.pdf - Duration of Eligibility may be found on page 10.

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/IV.ELIGIBILITY_DETERMINATION_APPLICATION.pdf - Statement located at bottom of page under "Reporting Changes"

https://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/IV.ELIGIBILITY_DETERMINATION_CASE_MANAGEMENT_REPORTING_CHANGES.pdf - Procedure document for temporary changes.

<http://dcf.vermont.gov/cdd/ccfap-policies> - The policies for employment, training/education, and self-employment all contain information for temporary change under the procedures heading.

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: 09/18/2019

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:

If a client reports that they are no longer employed or in school, they may utilize the service need of Seeking Employment for a period of 3 months. If after 3 months, the client does not have a service need the file may be closed. If during an eligibility period a client reports a permanent change in income and they now exceed 85% SMI, the certificate is terminated one service period from date of notice. An end enrollment notice is sent to both the family and child care provider.

ii. Describe what specific actions/changes trigger the job-search period.

The client reports a change in job status.

iii. How long is the job-search period (must be at least 3 months)?

3 months

iv. Provide the citation for this policy or procedure.

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/III.ELIGIBILITY_CRITERIA_SEEKING_EMPLOYMENT.pdf

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

- Not applicable.
- Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

i. Define the number of unexplained absences identified as excessive:

ii. Provide the citation for this policy or procedure:

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

Provide the citation for this policy or procedure:

Child Care Financial Assistance Regulation IIA- Eligibility Criteria

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/2008_DCF_CDD_Child_Care_Subsidy_Regulations.pdf

- 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.

Parents must certify on the Child Care Financial Assistance application that the information given is true and correct to the best of their knowledge and that they understand they are subject to prosecution for fraud if incorrect or misleading information is given. In addition, the Child Care Financial Assistance Regulations state that CDD may permanently deny access to the subsidy program to any family substantiated for engaging in fraudulent practices within the program.

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/2008_DCF_CDD_Child_Care_Subsidy_Regulations.pdf

page 13

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: 10/01/2018

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:

- Changes that impact the Lead Agency's ability to contact the family.

Describe:

The family must report, within 10 business days any change in address or phone number.

- Changes that impact the Lead Agency's ability to pay child care providers.

Describe:

The family must contact their Eligibility Specialist to report a change in child care provider. At time of contact, the payment certificate to the old provider is terminated and a payment certificate is created for the new provider.

Any additional reporting requirements that the Lead Agency chooses, as its option to require from parents during the 12-month eligibility period, shall not require an office visit. In addition, the Lead Agency must offer a range of notification options to accommodate families.

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

- Phone
 Email
 Online forms
 Extended submission hours
 Postal Mail
 FAX
 In-person submission
 Other.

Describe:

d) Families must have the option to voluntarily report changes on an ongoing basis during the 12-month eligibility period. Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in

income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

i. Describe any other changes that the Lead Agency allows families to report.

A family may report any change in their household circumstance that they feel could result in an increase in their subsidy percentage.

ii. Provide the citation for this policy or procedure.

Child Care Financial Assistance Program Policies for Service Needs,
<http://dcf.vermont.gov/cdd/ccfap-policies>

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 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: 10/01/2018

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:

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.

Effective Date: 07/21/2019

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

Family Size	(a) Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)	(b) What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?	(c) The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?	(d) Highest Initial or First Tier Income Level Before a Family Is No Longer Eligible	(e) What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?	(f) The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?
1	1866	7.14	0.38%	5333	644.48	12.08%
2	1866	7.14	0.38%	5333	644.48	12.08%
3	1866	7.14	0.38%	5333	644.48	12.08%
4	2253	7.14	0.32%	6438	644.48	10.01%
5	2640	7.14	0.27%	7543	644.48	8.54%

b) What is the effective date of the sliding-fee scale(s)? 07/21/2019

c) Identify the most populous area of the state used to complete the chart above.

The above rates and income guidelines are statewide.

d) Provide the link to the sliding-fee scale:

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/Sliding_Fee_Scales.pdf

e) If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).

3.4.2 How will the family's contribution be calculated, and to whom will it be applied?

Check all that apply.

Effective Date: 10/01/2018

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 families benefit level is assigned in accord with Vermont's sliding fee scale. Benefit level ranges from 100% at 100% FPL to 10% at 200% FPL. Family contribution is calculated for each eligible child as that percent of the state rate that the Child Care Financial Assistance Program (CC FAP) benefit does not cover. For example, a family at 100% FPL with 100% benefit is not assigned a contribution - CCFAP pays the full state rate including the quality differential determined by the provider's level in the QRIS (Vermont STARS). A family with a 25% benefit is assigned 25% of the state rate for that child - CC FAP pays 75% of the rate which includes the quality differential determined by the provider's level in the QRIS.

The fee is a percent of income and:

- The fee is per child, with the same percentage applied for each child.
- The fee is per child, and a discounted percentage is applied for two or more children.
- The fee is per child up to a maximum per family.

- No additional percentage is charged after certain number of children.
- The fee is per family.
- The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

- Other.

Describe:

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

Effective Date: 03/18/2020

- 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:

Vermont's sliding fee scale payment rate is set with a base rate and pays a higher rate on behalf of families based on the number of stars (QRIS) the program has. 1 Star programs receive 5% above the base rate; 2 Star programs receive 10% above the base rate; 3 Star programs receive 20% above the base rate; 4 Star programs receive 30% above the base rate; 5 Star programs receive 40% above the base rate.

- Other.

Describe:

During the child care closure period of 3/18/2020-5/31/2020 Vermont paid:

- 100% of co-pays for CCFAP families in Phase 1 (*March 18 - April 4, 2020*)of stabilization,
- 50% of co-pays for CCFAP families in Phase 2 (*April 5, 2020 - May 31, 2020*) of stabilization,
- 100% of co-pays for CCFAP essential worker families in "new" child care programs and
- 100% of co-pays for ALL school-age CCFAP essential worker families.

These align with the same policies Vermont applied for covering the out of pocket costs for private pay families.

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.

Effective Date: 03/18/2020

- No, the Lead Agency does not waive family contributions/co-payments.
- Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the poverty level for families of the same size.
- 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.

Child Care Financial Assistance (CCFAP) program will make full payment for child care services delivered to foster children where the FS social worker has determined the need for services. Licensed providers caring for these children may be reimbursed at the provider rate recorded in the Bright Futures Information System (BFIS).

https://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/V.CIS_PROTECTIVE_SERVICES.pdf

- 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.

During the child care closure period of 3/18/2020-5/31/2020 Vermont paid:

- 100% of co-pays for CCFAP families in Phase 1 (*March 18 - April 4, 2020*)of stabilization,
- 50% of co-pays for CCFAP families in Phase 2 (*April 5, 2020 - May 31, 2020*) of stabilization,
- 100% of co-pays for CCFAP essential worker families in "new" child care programs and
- 100% of co-pays for ALL school-age CCFAP essential worker families.

These align with the same policies Vermont applied for covering the out of pocket costs for private pay families.

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)).

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)).

The child care certificate is issued after the parent has selected a provider. It contains information on the provider rate, CDD base rate, STARS Quality Factor, and total CDD rate paid to provider. In addition, it contains hours authorized (part time, full time, or extended care), the subsidy percentage, name and address of provider, name and phone number of eligibility specialists and how to appeal the decision if they are not satisfied.

Effective Date: 10/01/2018

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.

Effective Date: 10/01/2018

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

Describe:

4.1.3 Child care services available through grants or contracts.

Effective Date: 10/01/2018

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.

If yes, describe how many jurisdictions use grants or contracts for child care slots.

- Yes, statewide. If yes, describe:

i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:

ii. The type(s) of child care services available through grants or contracts:

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
N/A

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.

- 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
 - N/A

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)).

Center Based Child Care and Preschool Programs licensing rule 4.2, Family Child Care Home licensing rule 4.2, and Afterschool Child Care Programs licensing rule 3.9 require programs to allow parents to have unlimited access to their children. If access has been prevented, parents may report this to the Division either by phone or through the BFIS public portal, and Licensing Field Specialists will investigate the concern. The licensing regulations are accessible on the Division's website: <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

Effective Date: 10/01/2018

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?

Effective Date: 10/01/2018

No.

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

Restricted based on minimum the number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements.

Describe:

Restricted based on the provider meeting a minimum age requirement. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2).

Describe:

A relative of the child must be at least 18 years of age per the Child Care Financial Assistance Approved Relative Child Care Provider Requirements.

Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours).

Describe:

Restricted to care by relatives.

Describe:

A relative of children receiving Child Care Financial Assistance per the Child Care Financial Assistance Approved Relative Child Care Provider Requirements. Protection and supervision of children on a regular or continuous basis for less than 24 hours a day by a relative of the eligible child(ren) which meets minimal health and safety standards and is provided to children whose families are eligible for child care subsidy through the Child Care Financial Assistance Program. Relatives are defined as grandparents, great-grandparents, siblings (if the sibling lives at a separate residence), aunt or uncle by birth, by marriage, or by court decree.

Restricted to care for children with special needs or a medical condition.

Describe:

Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF.

Describe:

Other.

Describe:

4.2 Assessing Market Rates and Child Care Costs

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

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

- Provide an overview of the Lead Agency's proposed approach (e.g., cost estimation model, cost study/survey, etc.), including a description of data sources.
- Describe how the Lead Agency will consult with the State's Early Childhood Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, organizations representing child care caregivers, teachers and directors, and other appropriate entities prior to conducting the identified alternative methodology.
- Describe how the alternative methodology will use methods that are statistically valid and reliable and will yield accurate results. For example, if using a survey, describe how the Lead Agency will ensure a representative sample and promote an adequate response rate. If using a cost estimation model, describe how the Lead Agency will validate the assumptions in the

model.

- If the proposed alternative methodology includes an analysis of costs (e.g., cost estimation model or cost study/survey), describe how the alternative methodology will account for key factors that impact the cost of providing care'such as: staff salaries and benefits, training and professional development, curricula and supplies, group size and ratios, enrollment levels, licensing requirements, quality level, facility size, and other factors.
- Describe how the alternative methodology will provide complete information that captures the universe of providers in the child care market.
- Describe how the alternative methodology will reflect variations by provider type, age of children, geographic location and quality.
- Describe how the alternative methodology will use current, up to date data.
- Describe the estimated reporting burden and cost to conduct the approach.

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

Effective Date: 10/01/2018

- 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)).

a) State Advisory Council or similar coordinating body:

The Department for Children and Families, Child Development Division (CDD) has collected feedback on the survey through participation on statewide community committees focused on early childhood and family support systems in Vermont. Members of the Vermont Building Bright Futures (BBF) Data and Evaluation Committee provided feedback that the methodology of the survey was appropriate, however they requested the report include data on the market rates by areas of state, including by county. This report summarizes the child care market rate data for the entire state of Vermont, the twelve Vermont Agency of Human Services districts, and the fourteen counties in Vermont to be responsive to this request.

b) Local child care program administrators:

The State's Advisory Council, Building Bright Futures (BBF) represents many aspects of the child care and early care field in Vermont including resource and referral agencies, parents, teachers and program administrators, and consultation was through BBF.

c) Local child care resource and referral agencies:

The State's Advisory Council, Building Bright Futures (BBF) represents many aspects of the child care and early care field in Vermont including resource and referral agencies, parents, teachers and program administrators, and consultation was through BBF.

d) Organizations representing caregivers, teachers, and directors:

The State's Advisory Council, Building Bright Futures (BBF) represents many aspects of the child care and early care field in Vermont including resource and referral agencies, parents, teachers and program administrators, and consultation was through BBF.

e) Other. Describe:

N/A

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 data for this market rate survey was collected from the state's Bright Futures Information System (BFIS). The Department for Children and Families (DCF) recognizes that child care programs charge in a variety of different ways, and rates also differ based on available discounts from the program. In an effort to gather valid data that is statically comparable, child care programs are asked to report their rates to DCF in several price modes (please see definitions for details on the price modes): part time weekly, full time weekly and extended care weekly. These modes are broken down into four age groups – infant, toddler, preschool and school age, and by provider type: licensed and registered. These price modes match the CCFAP system of eligibility and payment for child care programs. Child care programs are asked to convert their own rates to the price modes paid through the CCFAP system. They are given the guidance to record the rate to accurately represent what a parent who is not eligible for CCFAP would pay for the price mode based on the age category and number of hours the child attends the program. Programs that do not charge for their services are encouraged to submit their rates as zero, so their information can appropriately be excluded from the Market Rate Survey.

At the time the data was collected there were 692 licensed programs and 598 registered programs regulated in the State of Vermont. When determining the rate of return of the market rate data the number of programs indicating capacity to serve that age group on their referral or license information was used as the total number of programs who potentially could have rate information. Response rates vary by price mode from 65% of licensed preschool programs to 100% of licensed programs serving full time infants, toddlers and school age children. Programs not regulated by the state, such as family and friend care, recreation departments and others are not included in this market rate survey. The response rates are: Licensed Full Time Care – Infant/100%; Toddler/100%; Preschool/65%; School

Age/100%. Licensed Part Time Care – Infant/96%; Toddler/96%; Preschool/66%; School Age/100%. Registered Full Time Care – Infant/88%; Toddler/88%; Preschool/89%; School Age/89%. Registered Part Time Care – Infant/88%; Toddler/88%; Preschool/88%; and School age/89%.

The Agency of Human Services (AHS) was created by the Vermont Legislature in 1969 to serve as the umbrella organization for all human service activities within state government. AHS serves the state through districts. There are twelve districts in the state. The rates charged by both licensed and registered programs vary by AHS district. The report outlines the analysis by AHS district area. Overall Barre, Bennington, Brattleboro, Burlington and Hartford districts rates are more expensive than the statewide rate, while the remainder of the districts are lower than the statewide rate. In addition to the standard calculation of percentile to determine how many parents eligible for CCFAP at 100% can access child care programs without a co-payment, each of the districts were also analyzed by the actual program rate and the rate that would be paid based on STARS participation level. Overall, the rate analysis by STARS payment demonstrated more access to programs than the standard percentile analysis. The districts that had more participation by programs at higher levels of STARS had more access to those programs without a co-payment. The report also analyzes the rates by counties in Vermont. The child care market rates vary by county. In counties where there is only one child care program of that type serving a specific age the data was not presented in this report. As with the analysis by AHS district this analysis demonstrated that looking at the data by the standard calculation of percentile does not demonstrate the access to programs without co-payment for families at 100% CCFAP eligibility. In addition, more access without co-payment was found in areas where there are more programs participating at higher levels of the STARS program.

Effective Date: 10/01/2018

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

Effective Date: 0

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

Average, 50th percentile and 75th percentile is available statewide, by Agency of Human Services service area, and county.

b) Type of provider. Describe:

Available by licensed child care which includes center based child care and preschool programs, licensed family child care home and afterschool programs, and by registered home.

c) Age of child. Describe:

Available by infants which is children 6 weeks to their 2nd birthday, toddlers which is children who are 2 years old but have not reached their third birthday; preschool age which are children who are 3 to 5 years old up to their sixth birthday; and school age which is 6 years to 13 years, and up to 19 years for children who have special needs.

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

. The data was also examined by STARS level, summary data is available in the report.

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). 04/01/2018

b) Date the report containing results was made widely available - no later than 30 days after the completion of the report. 04/26/2018

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

The report is available to the public here: <http://dcf.vermont.gov/cdd/reports> also an email went out to the division's email list of individuals and organizations interested in division news.

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

The Department for Children and Families, Child Development Division (CDD) has collected feedback on the survey through participation on statewide community committees focused on early childhood and family support systems in Vermont. Members of the Vermont Building Bright Futures (BBF) Data and Evaluation Committee provided feedback that the methodology of the survey was appropriate, however they requested the report include data on the market rates by areas of state, including by county. This report summarizes the child care market rate data for the entire state of Vermont, the twelve Vermont Agency of Human Services districts, and the fourteen counties in Vermont to be responsive to this request.

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.

Effective Date: 09/01/2019

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

Rate \$ 210.00 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 26.17

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

Rate \$ 145.38 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 20.65

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

Rate \$ 201.92 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 29.83

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

Rate \$ 141.35 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 25.00

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

Rate \$ 173.65 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 18.92

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

Rate \$ 121.15 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 3.13

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

Rate \$ 161.54 per week unit of time (e.g., daily, weekly, monthly, etc.)

Percentile of most recent MRS: 39.29

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

Rate \$ 121.15 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 14.14

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

Part time is 25 hours per week or less, full time is between 26 and 50 per week.

j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). 07/21/2019

k) Identify the most populous area of the state used to complete the responses above.

The market rate was determined using statewide data.

l) Provide the citation or link, if available, to the payment rates.

https://dcf.vermont.gov/sites/dcf/files/CDD/Docs/ccfap/CCFAP_Rate_Schedule_Effective_July_21_2019.pdf

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)).

N/A

4.3.2 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

Check and describe the types of tiered reimbursement or differential rates, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS and/or an alternative methodology, and the amount of the rate. Check all that apply.

Effective Date: 10/01/2018

Differential rate for *non-traditional hours*.

Describe:

Extended care which is defined as 51 hours or more is paid a differential rate that is 36% higher than the full time rate for that age child and type of program.

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

Describe:

Providers who care for children with special needs and have been approved as a specialized child care provider receive a 7% differential that is calculated on the rate the child receives.

Differential rate for *infants and toddlers*. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:

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:

Providers participating in STARS receive a differential rate determined by the number of STARS the program has achieved. 5% differential for one star, 10% differential for two stars, 20% differential for three stars; 30% differential for four stars and 40% differential for 5 stars.

Other differential rates or tiered rates.

Describe:

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

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.

Child Care Financial Assistance Program (CCFAP) payments are available to all regulated child care programs that charge for their services. Regulated programs include Center Based Child Care and Preschool Programs, Registered and Licensed Family Child Care Homes and Afterschool Child Care Programs. Head Start programs and public school preschool programs are also regulated in Vermont and are part of the child care landscape available to assisted families.

- 82% of all regulated providers in Vermont have an active CCFAP Rate Agreement indicating that they accept CCFAP assisted families for enrollment.
- Public preschool programs are included in regulated Center Based Child Care and Preschool Programs. Many of these do not provide child care services after regular school hours and so do not charge for services or have an active rate agreement for CCFAP which impacts this data point.
- Payment records indicate that approximately 71% of regulated providers including all provider types are receiving CCFAP payments on behalf of assisted families at a given point in time.
- Approximately 23% of children in regulated child care are participants in CCFAP. This data point has remained fairly consistent over time.

CCFAP eligible families may also use informal care provided by relatives (Approved Relative Care providers) who agree to maintain appropriate health and safety standards.

Although this data documents that assisted families have access to a full range of providers comparable to the general population of Vermont families, affordability remains a challenge. We do not receive enough state and federal resources to fully fund subsidy payment rates that align to current market rates which is our goal. Vermont deploys strategies to mitigate the impact of low rates that create high co-payments that are a challenge for subsidized families and child care providers that provide services to them. (see 4.4.1e)

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.

Vermont uses alignment with Market Rate Survey (MRS) results to establish CCFAP rates. The CCFAP rate structure aligns the rate paid to child care programs that have achieved 4 stars at the 75th percentile of the relevant Market Rate Survey for each age group and provider type.

Vermont's current rates for Preschool and School age children are aligned with 2014 Market Rate Survey results. Vermont's current rates for Infant and Toddler children are aligned with 2017 Market Rate Survey results.

Vermont enacted universal entitlement to 10 hours of publicly funded prekindergarten for all 3 and 4 year old children (and 5 year olds not yet eligible for Kindergarten) in Vermont which was implemented in 2015. Services are provided through a mixed delivery system

that includes private as well as public school programs. An annual tuition of \$3092 is provided to support these services to qualified private providers that parents choose for their children. This tuition is layered with CCFAP subsidies at the program level to further reduce costs for families participating in CCFAP for preschool age children enrolled in high quality early care and learning programs. We believe this also helps to support access to full day full year services for this age group. Most private programs serving large numbers of CCFAP assisted preschoolers are also approved as universal PreK providers.

The increase in Infant Toddler rates and the ability to layer public preschool funds with outdated preschool rates are promising improvements for assisting CCDF eligible families to pay for high quality child care in Vermont. Annually we model and report on what it would take to reach the most current market rates in CCFAP as part of the state budget process. When we receive enough federal and state funding to establish rates at that level we will have confidence those are adequate. Currently we carefully balance rates, payment policies, relationships with child care providers and other strategies to assist families participating in CCFAP in accessing high quality early care and learning for their children in an under-resourced system.

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

In the Child Care Financial Assistance Program (CC FAP) in Vermont, the tiered reimbursement schedule is integral in the discussion of access and affordability to regulated programs for participating families. Tiered reimbursement is intended to incentivize participating providers to increase quality to capture higher rates and incentivize families to choose higher quality care to reduce co-payments.

Only 19% of children participating in CC FAP attend programs with no STARS receiving payments at the base rate while 26% of participating children attend programs rated as 4 STARS. 68% of all participating children attend programs rated at 3 STARS or higher.

In July 2018, Vermont raised rates for Infants and Toddlers to align with the Market Rates charged in 2016. In these age categories we have confidence that the base rate of \$192.31 per child per week is enough revenue to meet or exceed all health, safety, quality and staffing requirements under CCDF which are established in Vermont's child care licensing regulations and monitored by state Licensing staff.

In assessing how our rate schedule promotes access to quality for participating families,

we examine the interplay between average market rates, CC FAP rates and potential co-payments through case studies. In a licensed center-based program with no STARS, families with a 100% CC FAP benefit may have a weekly co-payment of \$58.78 if the provider charges the average market rate for programs not participating in STARS (\$251.00 weekly). In a licensed center-based program with 5 STARS, that same family has no co-payment if the provider charges the average market rate for 5 STAR programs (\$253.24) weekly. In that case, the STARS quality factor allows the provider a little extra revenue to contribute to quality care (\$15.99 weekly).

In the preschool rate category, families participating in CC FAP that choose prequalified PreK programs (which must have achieved a rating of at least 3 STARS) can layer \$3,267 in state Universal PreK (UPK) tuition onto the subsidy payments for child care. In 2016 the Vermont Agency of Education and CDD used several complementary analyses (including the Provider Cost of Quality Calculator) to establish the annual tuition for 10 hours per week of UPK for 36 weeks a year (school session). The description of that analysis is available at <https://education.vermont.gov/sites/aoe/files/documents/edu-early-education-prek-draft-statewide-tuition-rate.pdf> . An annual increase modeled after cost of education increases in K-12 was built into the tuition rate. Part time UPK is an entitlement for all three and four-year-old children in Vermont. In a licensed Center-based program with no STARS, families with 100% benefit using FT child care may have a weekly co-payment of \$86.47 at a program charging the average market rate for all centers. For the same family enrolled in a licensed Center-based program with 5 STARS charging the 75th percentile of 2017 market rates for centers and prequalified as a UPK program, the combination of subsidy and UPK tuition reduces that co-payment to \$2.02 per week. We know that over 75% of 4 year olds and over 69% of 3 year olds access UPK tuition so we believe this layering has a significant impact on affordability for CC FAP families In Vermont.

As part of the Market Rate Survey, we consider Provider Rate Agreements compared to subsidy rates for that provider and analyze what percent of all programs participating in CC FAP would charge no additional co-payment for families with 100% benefit. That means CC FAP rates cover all of the rates they charge. In the preschool rate category this is 58% of participating programs. In the school age category this is 99% of all participating programs indicating that CC FAP school age rates are accepted as full payment for most school age children with 100% subsidy. Since infant and toddler rates have changed since the last Market Rate Survey analysis, we don't have that statistic for the current Infant and Toddler rate categories.

Much of this analysis and information is included in the bi-annual Vermont Child Care Market Rate Survey which is discussed at the Building Bright Futures (BBF) State Advisory Council and in several BBF subcommittees. Results and case studies are also presented to Department and Agency leadership and to legislative Committees of jurisdiction during the legislative session.

In the 2017 legislative session, the Senate Appropriations Committee proposed a \$2.2 million-dollar investment to fund Early Care and Development Program (ECDP) Grants to support early care and development programs serving CC FAP participants and reduce the burden of co-payment for families and providers. This was supported by the Administration and has been added to the base of the CDD budget. 465 programs serving over 50% of all CCFAP participating children received quarterly grants in 2018. Grants to center-based programs ranged from \$617.50 to \$17,372 annually and grants to Family CC Homes ranged from \$202.50 to \$1,673.75 annually. Grants are primarily determined by how many CC FAP children are served in each program. Recipients must be participating in STARS (at any level). A bi-annual survey of ECDP Grants recipients indicates that 44% of those programs used the funds to reduce family co-payments while maintaining quality services. Approximately 50% more of these programs indicated that they typically discount tuition to families participating in CC FAP and that these funds helped them to purchase supplies, increase staff pay and otherwise enhance quality.

CDD uses all this information and analysis to assess rates and assure that participating providers serving CC FAP families can meet the costs of implementing foundational health, safety, quality and staffing requirements under CCDF. We use quality investments to provide low and no cost training to ensure that program staff can meet training requirements in the regulations which were found to be the most significant increased cost for providers in revised child care regulations implemented in September 2016. These regulations meet or exceed requirements under CCDF. We also pay for part of the costs of fingerprint supported background checks.

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).

The CCFAP base rate is established as 30% less than the 75th percentile reported in Vermont's Child Care Market Rates Survey for each provider type and age group for full time and part time care. In assigning rates to individual programs, if the provider's reported rate is less than our base rate, we use the providers rate as the base.

Using quality differentials, a higher rate is paid on behalf of families in accord with program quality documented through participation in Vermont's QRIS - Vermont STARS:

- Programs with a 1 star rating receive 5% above the base rate;
- Programs with a 2 star rating receive 10% above the base rate;
- Programs with a 3 star rating receive 20% above the base rate;
- Programs with a 4 star rating receive 30% above the base rate;
- Programs with a 5 star rating receive 40% above the base rate.

This incentivizes commitment to quality improvement for regulated programs of all types serving subsidized children. Vermont allows very few exemptions to child care regulation. It encourages families to use higher quality child care as the quality differential reduces assigned co-payment. The results in steady increases in program quality over time. Both the percent of programs participating in Vermont STARS and the percent of programs achieving a rating of 3-5 stars have increased every year since 2010. More significantly, the percent of subsidized children in programs with a 3-5 star rating has increased from 44.9% in 2013 to 62.9% in 2017.

Vermont's tiered reimbursement rates and methodology were established in 2010 during a redesign of child care subsidies. This was prior to the Provider Cost of Quality Calculator and the emerging interest and research into cost estimation in relation to quality. At that time, we understood that the cost of child care was a major impediment to successful participation in the workforce for low income families. We also saw child care as a two-generation program with potential to provide developmental benefits to children while strengthening families if the services supported were of high quality, We had a 5 year old QRIS that was beginning to mature and take hold. We paid out bonuses to providers serving subsidized children for participation in QRIS but these bonuses did not reduce subsidized families' share of costs. Vermont's subsidy program at that time included a contract component in which we paid for a specific number of reserved spaces at negotiated rates for a relatively small number of higher quality providers serving low income families. Analysis of the program indicated that rates for children in those programs were robust, above the most recent (2008) market rate and supported high quality services as indicated by 4 and 5 STAR ratings in the QRIS - this was about

one third of all children accessing subsidies at that time. Rates for all other children - about two thirds of participants - were significantly below market rates constraining access and affordability for participating families who were not in reserved spaces. In reserved spaces we were spending over \$1 million dollars annually in empty slots. We had some additional resources to invest including a major increase in state investment and federal ARRA funds which we pooled with savings from policy changes like an end to reserved spaces and a major restructuring of QRIS incentives moving away from annual bonuses and toward tiered reimbursement. In a way we conducted what might now be called a narrow cost analysis. One goal was rate equity across participating families and programs. We also wanted to preserve the robust rates for high quality programs serving subsidized families and so those formerly negotiated rates informed the highest tiers in the rate schedule for all participating providers. We used the results of the most recent Market Rate Survey (2008). We did extensive modeling on how to disperse available funding across rate categories to ensure equity, incentivize quality and decrease cost burdens on families. We analyzed proposals against financial impacts on participating providers using case study methods. We used real data from our system to analyze impacts on participating families. We landed on the methodology described above. The vision at that time was to maintain alignment with market rates going forward. State budget realities over time has not supported the level of increased investments to achieve that vision. The state has maintained CC FAP investments, replacing federal ARRA funding when it ended.

In this State Plan period Vermont remains committed to a market rate methodology in setting child care rates for CC FAP. We used results of the 2015 and 2017 Market Rate Surveys in investing federal and state increases into increased Infant and Toddler rates in July 2018.

That said, CDD participates in a coalition of public and private organizations and agencies, led by the Building Bright Futures Early Childhood Statewide Advisory Council, that pursues achieving optimal outcomes for Vermont's young children with access to affordable high-quality child care as a prioritized strategy. A Blue-Ribbon Commission on Financing High Quality Affordable Child Care, convened by the legislature in 2016, conducted a cost study based on a shared definition of high quality comprehensive services. Participants on the Commission included Head Start grantees, Parent Child Centers and other high-quality center-based programs as well as family child care home providers, business partners, advocates and other stakeholders. The CDD Deputy Commissioner participated and provided consultation on definitions of high quality and on

cost modeling. That cost modeling can be found in the final Commission report at <http://buildingbrightfutures.org/wp-content/uploads/2015/11/VT-BRC-Full-Final-Report-1.pdf> . See page 17 and Appendix B for cost of quality modeling. The recommendations of the Commission included engaging in a more detailed, comprehensive and inclusive design process to examine how systems changes could achieve economies of scale to ensure that child care quality was supported efficiently and effectively in Vermont's predominantly small programs and how different funding streams could be aligned and leveraged to achieve quality and affordability for families and for taxpayers. Subsequently Building Bright Futures and Lets Grow Kids, a privately funded advocacy organization, conducted a state wide Appreciative Inquiry process culminating in a two day summit bringing several hundred Vermonters together to explore 'Building Vermont From the Child Up'. The ideas and designs captured in that process were forwarded to a smaller, focused Think Tank to create a blueprint for Vermont's birth - 5 early education and care system. Recommendations from the Think Tank are anticipated in January 2019. CDD has been a full participant and expert consultant in every aspect of this collective work. We understand cost of quality modeling and are steady internal advocates for increased investments in child care. Right now, for purposes of this current State Plan, we are not factoring in the cost of quality model in CC FAP rates. Our modest goal now is to achieve alignment with current market rates and increase benefit levels for families and this goal is constrained by available resources.

Despite concern about the adequacy of our rates, we believe that our data indicates that our policies and practices are supporting access to quality care for the most vulnerable populations with the resources available to us.

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

Limit the maximum co-payment per family.

Describe: .

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.

We retain an entitlement to participation in some level of subsidy for all eligible families up to 300% of FPL. We have not elected to freeze enrollment or create a waiting list for CCFAP because we believe that not providing assistance to eligible families creates as much a barrier to access to child care for eligible families as co-payments.

- ☑ Other.

Describe:

Vermont deploys strategies to mitigate the impact of low rates that create high co-payments that are a challenge for subsidized families and child care providers that provide services to them.

CCFAP pays the full provider rate for children in state custody to increase access for this most vulnerable population with no lost revenue for providers or additional costs to foster families or kin placements.

CCFAP uses Medicaid Waiver Investment funding to provide a 7% rate differential for approved providers serving children involved with protective services and children with special needs.

We incentivize provider participation in CCFAP and enrollment of children participating in CCFAP through two grant programs designed to support program quality and increase access to high quality programs for subsidized families:

- Strengthening Families Grants: established in 2010 as part of a major reform in child care assistance policy and practice. The program offers regulated child care programs an opportunity to apply for up to \$10,000, \$40,000 or \$80,000 annually per program (based on program size) in a competitive process. Grants are awarded in three-year cycles. The primary goal of these grants is to ensure affordable access to high quality comprehensive early care and education programs for children and families challenged by economic instability and other environmental risk factors. Also to maintain a supply of high quality infant-toddler care and to increase family strengths and resiliency in providing a nurturing environment that promotes the early development of their children. Programs receiving these grants must have achieved a rating of 4-5 stars in

Vermont's QRIS and maintain a minimum of 25% enrollment of subsidized children. The average enrollment of subsidized children in the current grantees is approximately 63%. They agree to accept the state rate for families with a 100% benefit as full payment for child care services. The current round of grantees includes 24 programs distributed across the state serving 830 CCFAP children - approximately 10% of our subsidized population. These grants are funded with \$1.1 million annually in Medicaid Waiver Investment funds.

- Early Childhood Development Program Grants: established in 2017 by the state legislature to: support early care and development programs serving low income families and young children in Vermont, particularly those serving infants and toddlers; reduce the burden of co-payments on families and providers participating in the Child Care Financial Assistance Program (CCFAP); and help early care and development programs provide quality services that promote children's development and well-being and strengthen families. 465 child care programs received a grant in October 2017 and/or January 2018, and an average of 4,750 children receiving CCFAP benefits were served by these programs. Of the programs receiving a grant, 148 were center based and 317 were family child care homes. The percent of children participating in CCFAP enrolled in the program, particularly infants and toddlers participating in CCFAP, is a determining factor in assessing these quarterly grant awards. Semi-annual survey results indicate that providers are using these funds to reduce co-payments, support subsidized families and maintain quality. \$2.2 million annually, primarily in state general funds with some CCDF targeted funds, support this program

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.

The rationale for this policy is to encourage the broadest array of regulated provider participation in CCFAP so that subsidized families have access to the same provider pool as non-subsidized families. It is part of a set of program policies intended to position the state subsidy system as a responsible participant in the child care market on behalf of assisted families. This policy recognizes evidence

that indicates that most families in the United States cobble together multiple arrangements to meet their child care needs and enables subsidized families to utilize assistance to negotiate arrangements with child care providers in the marketplace with a level of flexibility that the alternative - requiring all participating providers to accept the state rate as full payment - would not provide. We believe that adopting a policy that does not allow providers to charge any additional amounts above the state rate would reduce the number of providers willing to accept assisted families and reduce access.

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.

We do not have a consistent and reliable source of information to provide this data since these arrangements are negotiated between the provider and the families. The division has surveyed child care programs and found that approximately 50% of programs either do not charge families the additional amounts, or discount the additional amounts. In 2013 the division surveyed programs and found that 58% of programs discounted the additional amounts, see the division's 2013 Co-Payment Survey - <https://dcf.vermont.gov/sites/dcf/files/CDD/Reports/Co-payment%20Survey.pdf>. Additionally, in spring 2018 the division asked child care programs that received a state funded Early Care and Development Grants if funds were used to discount the additional amounts charged to families. While not all programs used the funds to discount the additional amounts, approximately 50% of programs receiving grants discounted or reduced additional amounts charged to families as a practice. See the March 2018 Early Care and Development Grant Report - https://dcf.vermont.gov/sites/dcf/files/CDD/Reports/ECDP_Grant_March_2018_Report.pdf

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.

As part of our presentation of unfunded budget pressures to the legislature and legislative councils and committees, we model and present child care costs for representative Vermont families utilizing the subsidy program. We use different family sizes and configurations and vary age of children and type of care. This

provides a clear picture of how subsidy payments and assigned co-payments interact with full child care rates and potentially constrain full access for families. We update these analyses annually.

Strengthening Families Grants and Early Development Program Grants described in 4.4.1e, available to programs consistently serving subsidized children and families, are specifically designed to reduce these additional costs for families and mitigate the impact that this lost revenue may have on access and program quality.

g) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers.

CCFAP payment policies closely mirror child care industry practice. We process payments based on active enrollment accommodating reasonable absences and make electronic deposits weekly with most providers submitting attendance to receive payment every two weeks. We allow paper processing for providers who do not have technology or automatic deposit capacity (a small number). We have state staff dedicated to quickly resolving payment issues for providers participating in CCFAP. From a practice perspective we are considered a good and reliable payer on behalf of assisted families. This encourages a full range of providers to accept and enroll subsidized children and families.

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

Geographic area.

Describe:

Type of provider.

Describe:

Rates are set by licensed type, registered type, and a separate rate for Approved Relative Child Care

Age of child.

Describe:

Rates are paid based on the age of the child. Infants are children birth to the 2nd birthday, toddlers are 2 year olds to their third birthday; preschool is age 3 years old

to the 6th birthday; and school age is 6 years and to the 14th birthday; and special needs children up to age 19.

Quality level.

Describe:

1 Star programs receive 5% above the base rate; 2 Star programs receive 10% above the base rate; 3 Star programs receive 20% above the base rate; 4 Star programs receive 30% above the base rate; 5 Star programs receive 40% above the base rate.

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:

Payment rates are set at the 75th percentile benchmark or higher of the most recent MRS.

Describe:

Based on the approved alternative methodology, payments rates ensure equal access.

Describe:

Feedback from parents, including parent surveys or parental complaints.

Describe:

Other.

Describe:

As the state agency responsible for CCFAP, we believe that rates that do not keep pace with the child care market are not adequate to support full access to high quality child care programs for subsidized families. Annually we model and report on what it would take to reach the most current market rates in CCFAP as part of the state budget process. We applied all of the recent increase in federal funds to increase infant and toddler rates. We have not been appropriated additional funds

to close the gap between CCFAP rates and the current market rates. In May 2018, Vermont formally requested relief from this requirement from the Office of Child Care until state and federal resources are available to fully fund current market rates in the subsidy program. We welcome an opportunity to opportunity to discuss this request and have not yet received a response at the time of this submission.

4.5 Payment Practices and the Timeliness of Payments

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

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

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

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

Effective Date: 03/18/2020

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.

Child care providers can bill for the services provided every two weeks, with the payment happening within one week of billing.

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

Paying based on a child's enrollment rather than attendance.

Describe the policy or procedure.

Providers are paid on the weekly amount approved by either attendance of the child or a code to represent the reason for the absence. Coded days include P code-provider closed day (15 per fiscal year), V code-parent vacation day (10 per fiscal year), S code-child sick day (unlimited), N code - no notice (1 week paid if parent did not give notice), H code-hold the spot (limited use, approved by CDD).

From 3/18/2020-5/31/2020: Child Care Financial Assistance payments will be based on children scheduled to attend and eligible for Child Care Financial Assistance and not on actual attendance.

- If the child care program closes related to concerns about the Coronavirus either voluntarily or due to recommendations the child care provider will submit U codes for the children listed on the invoice. The U codes will be overridden for payment and payment will be based on the child's fixed part time or full time certificate.

- If the program remains open, the child care program will enter actual hours of attendance. Payment will be based on the child's fixed part time or full time certificate.

From 6/1/2020-7/6/2020 when a child care is open and it is requested by the family, Child Care Financial Assistance payments will be based on the schedule on the eligible and active certificate and not on actual attendance.

- 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.

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(l)(3)).

- 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).

Payment is made on a part time (1-25 hours), full time (26-50 hours), or extended care (51+ hours) schedule, and payment is made if the child attends at least one hour per week or a code is used for an absence.

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

private-paying parents.

Describe the policy or procedure.

Child Care providers in Vermont charge deposit fees rather than registration fees. These deposit fees are applied to the parent's child care payment once the child starts child care. The parent may request from, the Child Development Division, an early copy of their child care payment certificate verifying start date of care and payment amount. The parent may give this certificate to the child care provider as proof of eligibility, start date and payment amount for the deposit fee to be waived.

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:

Providers must complete a payment agreement at minimum once every two years to receive Child Care Financial Assistance. The agreement is available here:

http://dcf.vermont.gov/sites/dcf/files/CDD/Forms/Financial_Agreement_Part_1.pdf

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:

A start and end date are clearly noted on the payment certificate sent to the child care provider. When a change occurs to a certificate, an enrollment notice is generated by BFIS and is sent to the provider's BFIS account. Provider's without internet access receive a same day phone call.

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

Child Care providers may contact the CDD payroll technician if they feel that the payment received is incorrect. The technician reviews the BFIS invoice and if the amount is incorrect, a payroll adjustment is made. If additional funds are due to a provider, the payment will be made on the following pay date.

g) Other. Describe:

N/A

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

Effective Date: 10/01/2018

No, the practices do not vary across areas.

Yes, the practices vary across areas.

Describe:

4.6 Supply-Building Strategies to Meet the Needs of Certain Populations

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

4.6.1 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: 10/01/2018

In licensed family child care.

The Division collaborations with Building Bright Futures and Vermont Birth to Five to work on building capacity of child care in Vermont, this work is completed to support equal access and parental choice for families receiving child care financial assistance and families who do not. The capacity effort is working on six strategies: a family survey; a child care recruitment campaign; building business supports for child care programs; reducing barriers for child care programs to become and stay regulated; provide resources for programs to start up or expand; and building the capacity of the workforce. This effort was begun in early summer of 2018 and has not yet seen a significant increase in capacity and access for families. However, it is anticipated this will slowly impact the access and opportunities for parental choice. This is being tracked in a variety

of ways. The number of programs and capacity of child care programs by age and geographic area is being tracked, and the division collaborates with Let's Grow Kids and Building Bright Futures to publish the report on family access to care: <http://vermontinsights.org/children-likely-to-need-care>; additionally, the Agency reports on equitable access through the state community profiles: http://humanservices.vermont.gov/ahs_community-profiles/. And the number of children in accessing regulated child care programs by region and the Child Care Financial Assistance Program and the number of children accessing high quality (3 or more STAR rated) programs. The progress on this can be viewed on Agencies Resilient Communities profiles: http://humanservices.vermont.gov/ahs_community-profiles/. Data is available by County, Agency of Human Services District and Hospital Service Area.

In licensed child care centers.

The Division collaborations with Building Bright Futures and Vermont Birth to Five to work on building capacity of child care in Vermont, this work is completed to support equal access and parental choice for families receiving child care financial assistance and families who do not. The capacity effort is working on six strategies: a family survey; a child care recruitment campaign; building business supports for child care programs; reducing barriers for child care programs to become and stay regulated; provide resources for programs to start up or expand; and building the capacity of the workforce. This effort was begun in early summer of 2018 and has not yet seen a significant increase in capacity and access for families. However, it is anticipated this will slowly impact the access and opportunities for parental choice. This is being tracked in a variety of ways. The number of programs and capacity of child care programs by age and geographic area is being tracked, and the division collaborates with Let's Grow Kids and Building Bright Futures to publish the report on family access to care: <http://vermontinsights.org/children-likely-to-need-care>; additionally, the Agency reports on equitable access through the state community profiles: http://humanservices.vermont.gov/ahs_community-profiles/. And the number of children in accessing regulated child care programs by region and the Child Care Financial Assistance Program and the number of children accessing high quality (3 or more STAR rated) programs. The progress on this can be viewed on Agencies Resilient Communities profiles: http://humanservices.vermont.gov/ahs_community-profiles/. Data is available by County, Agency of Human Services District and Hospital Service Area.

Other.

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

Effective Date: 10/01/2018

a) Children in underserved areas. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

Family child care networks.

Describe:

[Starting Points Networks](#) - Made up of local groups of early childhood professionals across 12 regions in Vermont who take initiative through leadership, professional development and peer support to encourage, learn and grow together. Issues related to business development are often primary topics at Starting Points trainings and monthly network meetings.

Start-up funding.

Describe:

Technical assistance support.

Describe:

Recruitment of providers.

Describe:

The division is creating a recruitment campaign for child care programs. The materials for this campaign will be used statewide, and will ensure consistent messaging for prospective child care providers.

Tiered payment rates (as discussed in 4.3.2).

Describe:

The payment rate is set with a base rate, and pays a higher rate on behalf of families based on the number of stars (QRIS) the program has. 1 Star programs receive 5% above the base rate; 2 Star programs receive 10% above the base rate; 3 Star programs receive 20% above the base rate; 4 Star programs receive 30% above the base rate; 5 Star programs receive 40% above the base rate.

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

- Accreditation supports.

Describe:

The division provides grants to child care programs to support the full cost of accreditation process fees. In addition, all regulated programs achieving accreditation or reaccreditation can apply for a \$1000 bonus at the time of accreditation/reaccreditation.

- Child Care Health Consultation.

Describe:

- Mental Health Consultation.

Describe:

- Other.

Describe:

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

b) Infants and toddlers. 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.

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:

Other.

Describe:

The division created a coalition of stakeholders to look at this issue, and the coalition's determined strategies and resources available to increase the supply of child care. The work of that coalition is now being executed by the Early Learning

and Development Subcommittee of the statewide public private organization, Building Bright Futures. Strategies include a recruitment campaign, grants from a private partner to expand options, and business supports from other private and public partners.

The Division collaborates with partners on a report called Stalled at the Start. This report examines the access to quality child care for families with infants and/or toddlers across the state. The most recent report is available here:

<http://vermontinsights.org/children-likely-to-need-care>

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:

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:

The division provides grants to child care programs to support the full cost of accreditation process fees. In addition, all regulated programs achieving accreditation or reaccreditation can apply for a \$1000 bonus at the time of accreditation/reaccreditation.

Child Care Health Consultation.

Describe:

Mental Health Consultation.

Describe:

Other.

Describe:

The division created a coalition of stakeholders to look at this issue, and the coalition's determined strategies and resources available to increase the supply of child care. The work of that coalition is now being executed by the Early Learning and Development Subcommittee of the statewide public private organization, Building Bright Futures. Strategies include a recruitment campaign, grants from a private partner to expand options, and business supports from other private and public partners.

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.

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:

Other.

Describe:

The division created a coalition of stakeholders to look at this issue, and the coalition's determined strategies and resources available to increase the supply of child care. The work of that coalition is now being executed by the Early Learning

and Development Subcommittee of the statewide public private organization, Building Bright Futures. Strategies include a recruitment campaign, grants from a private partner to expand options, and business supports from other private and public partners.

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.

Describe:

Start-up funding.

Describe:

Technical assistance support.

Describe:

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:

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: 10/01/2018

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

After an assessment of the needs across the state there is a significant need for increasing access to high-quality care in all areas of the state, and at this point no area has been excluded from investments due to the need.

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

After an assessment of the needs across the state there is a significant need for increasing access to high-quality care in all areas of the state, and at this point no area has been excluded from investments due to the need.

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.

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: 10/01/2018

Center-based child care.

Describe and Provide the citation:

Licensees are required to comply with regulations that include qualifications, business practices, health and safety, family relations, ratios, care and education of children, and emergency procedures.

<http://dcf.vermont.gov/cdd/laws-regs/childcare>

Family child care.

Describe and Provide the citation:

Licensees are required to comply with regulations that include qualifications, business practices, health and safety, family relations, ratios, care and education of children, and emergency procedures.

<http://dcf.vermont.gov/cdd/laws-regs/childcare>

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

Describe and provide the citation (if applicable):

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: 10/01/2018

Note: Additional information about exemptions related to CCDF providers is required in 5.1.3. Vermont statute requires child care providers to be licensed by DCF's Child Development Division unless identified exemption criteria apply. For the full definition of exemption criteria see 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>). Generally speaking the statute exempts child care for 2 or fewer families; a hospital or a recreational or therapeutic program (unless services for the care, protection, and supervision of children is not incidental to its primary purpose); child care facilities operated by religious organizations during or in connection with religious services or church sponsored activities; and an afterschool program serving students in kindergarten through secondary school, receiving 21st Century Community Learning Center funding, and is overseen by the Agency of Education. Licensing rule 2.1.2 in Center Based Child Care and Preschool Programs Regulations and licensing rule 1.5 in Afterschool Child Care Programs Regulations allow for exemptions in addition to Vermont [statute \(http://dcf.vermont.gov/cdd/laws-regs/childcare\)](http://dcf.vermont.gov/cdd/laws-regs/childcare) on non-residential property. See the citation for the full language of the exemption criteria. Generally speaking, recreation programs operated on non-residential property need to meet one of four criteria to also be exempt from licensure. Essentially the types of programs that meet one of the four criteria are programs such as a gymnastic class. The criteria limits the ages of children served, and the length of time children would be in attendance. Any program that wants to participate in CCDF is required to become licensed and follow all licensing regulations and processes. In the situations in which exemption from being licensed exists, programs have either another oversight entity or the time that children are present is limited minimizing level of risk.

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: 10/01/2018

Center-based child care.

If checked, describe the exemptions.

Family child care.

If checked, describe the exemptions.

In-home care.

If checked, describe the exemptions.

Approved Relative Child Care (ARCC) providers must be a relative of the child that is qualified to receive Child Care Financial Assistance. Child care is provided on a regular basis for less than 24 hours a day for children 6 weeks to 12 years of age or up to age 18 when the primary caretaker(s) can demonstrate that his/her child has a significant health or specialized developmental need. Child Care may be provided to the children of no more than two relative family units and may occur in the child's or provider's home.

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

a) Licensed CCDF center-based care

1. Infant

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

A child who is at least six (6) weeks and under thirteen (13) months of age.

-- Ratio:

1:4

-- Group size:

Eight

-- Teacher/caregiver qualifications:

See Center Based Child Care and Preschool Programs licensing rules 7.3.2.1 - 7.3.2.4 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). To determine when various qualifications apply, see licensing rule 6.2.1.4 and the licensing rules in section 6.2.4. Please note that the qualifications are the same regardless of the age of children in the classroom.

2. Toddler

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

A child between thirteen (13) through thirty-five (35) months of age.

-- Ratio:

Regulations allow for a sliding ratio based on age. For 13mos to 30mos the ratio is 1:4, and for 30mos to 35mos the ratio is 1:5. This provides options when programs are transitioning children from one age group to another.

-- Group size:

Regulations allow for a sliding group size based on age. For 13mos to 18mos, the group size is 8; and for 18mos to 35mos, the group size is 10. This provides

options when programs are transitioning children from one age group to another.

-- Teacher/caregiver qualifications:

See Center Based Child Care and Preschool Programs licensing rules 7.3.2.1 - 7.3.2.4 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). To determine when various qualifications apply, see licensing rule 6.2.1.4 and the licensing rules in section 6.2.4. Please note that the qualifications are the same regardless of the age of children in the classroom.

3. Preschool

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

A child who is thirtysix (36) months of age up until school age.

-- Ratio:

1:10

-- Group size:

Twenty

-- Teacher/caregiver qualifications:

See Center Based Child Care and Preschool Programs licensing rules 7.3.2.1 - 7.3.2.4 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). To determine when various qualifications apply, see licensing rule 6.2.1.4 and the licensing rules in section 6.2.4. Please note that the qualifications are the same regardless of the age of children in the classroom.

4. School-age

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

A child who is five (5) years of age or older and currently attending kindergarten or has completed kindergarten or a higher grade.

-- Ratio:

1:13

-- Group size:

Twenty-six

-- Teacher/caregiver qualifications:

See Center Based Child Care and Preschool Programs licensing rules 7.3.2.1 - 7.3.2.4 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). To determine when various qualifications apply, see licensing rule 6.2.1.4 and the licensing rules in section 6.2.4. Please note that the qualifications are the same regardless of the age of children in the classroom.

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

Exempt providers are not allowed to participate in CCDF so this is not applicable.

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

See Center Based Child Care and Preschool Programs licensing rule 6.2.2 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>) says that programs are required to comply with the ratios and group size requirements for the youngest child in a mixed age group. Please note that the qualifications are the same regardless of whether children are in a mixed age classroom.

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

See Center Based Child Care and Preschool Programs licensing rules in section 7.3.1 and in section 7.3.2 (<http://dcf.vermont.gov/cdd/laws-regs/childcare>) for director qualifications. There are no variations based on the ages of children in care. Rather, director qualifications are based upon the licensed capacity which is the total number of children allowed in care at any given time.

b) Licensed CCDF family child care provider

1. Infant

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

a child who is at least six (6) weeks and under thirteen (13) months of age

-- Ratio:

There are a variety of regulations that speak to ratio. For example, in a registered Family Child Care Home, the FCCP's own children under 24 months of age who reside in the home are required to count in the limit on children less than 24 months but not in the overall limit on all children. In a licensed Family Child Care Home, the FCCP's own non-school age children who reside in the home and the Family Child Care Assistant's own non-school age children are counted. See the charts in Family Child Care Home licensing rules 6.2.1.15 - 6.2.1.87 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rules 6.2.2.1 - 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). These charts have been created in place of using words to ensure clarity of understanding. If a combination isn't allowed by the chart, then it has been left out intentionally. In registered Family Child Care Homes, there are two charts. The chart titled, "Registered FCCH: Option one (1): Year Round Care" is the more commonly used ratio chart in Vermont. This chart allows for a focus on serving children under 24 months. The chart titled, "Registered FCCH: Option two (2): Summer Vacation" allows for additional school age children but by using this chart, the FCCP is limited to no more than 2 children under 24 months of age total.

-- Group size:

See the charts in Family Child Care Home licensing rules 6.2.1.5 - 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). In Family Child Care Homes, group size and ratio are considered the same thing. The same answer above for ratio applies here for group size.

-- Teacher/caregiver qualifications:

See Family Child Care Home licensing rules 7.3.1 and 7.3.3 apply to registered FCCPs and Family Child Care Home licensing rules 7.3.2 and 7.3.3 apply to licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

2. Toddler

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

a child between thirteen (13) through thirtyfive (35) months of age

-- Ratio:

There are a variety of regulations that speak to ratio. For example, in a registered Family Child Care Home, the FCCP's own children under 24 months of age who reside in the home are required to count in the limit on children less than 24 months but not in the overall limit on all children. In a licensed Family Child Care Home, the FCCP's own non-school age children who reside in the home and the Family Child Care Assistant's own non-school age children are counted. See the charts in Family Child Care Home licensing rules 6.2.1.15 - 6.2.1.87 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

These charts have been created in place of using words to ensure clarity of understanding. If a combination isn't allowed by the chart, then it has been left out intentionally. Toddlers who are 13 - 23 months are in one grouping in the charts, and toddlers who are 24 - 35 months are in a different grouping in the chart. There are greater limits for toddlers under 24 months. In registered Family Child Care Homes, there are two charts. The chart titled, "Registered FCCH: Option one (1): Year Round Care" is the more commonly used ratio chart in Vermont. This chart allows for a focus on serving children under 24 months. The chart titled, "Registered FCCH: Option two (2): Summer Vacation" allows for additional school age children; but by using this chart, the FCCP is limited to no more than 2 children under 24 months of age total.

-- Group size:

See the charts in Family Child Care Home licensing rules 6.2.1.5 - 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). In Family Child Care Homes, group size and ratio are considered the same thing. The same answer above for ratio applies here for group size.

-- Teacher/caregiver qualifications:

See Family Child Care Home licensing rules 7.3.1 and 7.3.3 apply to registered FCCPs and Family Child Care Home licensing rules 7.3.2 and 7.3.3 apply to licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

3. Preschool

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

a child who is thirtysix (36) months of age up until school age

-- Ratio:

There are a variety of regulations that speak to ratio. For example, in a licensed Family Child Care Home; the FCCP's own non-school age children who reside in the home and the Family Child Care Assistant's own non-school age children are counted. See the charts in Family Child Care Home licensing rules 6.2.1.15 - 6.2.1.87 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). These charts have been created in place of using words to ensure clarity of understanding. If a combination isn't allowed by the chart, then it has been left out intentionally. In registered Family Child Care Homes, there are two charts. The chart titled, "Registered FCCH: Option one (1): Year Round Care" is the more commonly used ratio chart in Vermont. This chart allows for a focus on serving children under 24 months. The chart titled, "Registered FCCH: Option two (2): Summer Vacation" allows for additional school age children; but by using this chart, the FCCP is limited to no more than 2 children under 24 months of age total. Another example is that licensed FCCPs may care for up to 8 preschool age children by themselves (with no other children) as compared to registered FCCPs who may care for up to 6 preschool age children by themselves (with no other children).

-- Group size:

See the charts in Family Child Care Home licensing rules 6.2.1.5 - 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). In Family Child Care Homes, group size and ratio are considered the same thing.

The same answer above for ratio applies here for group size.

-- **Teacher/caregiver qualifications:**

See Family Child Care Home licensing rules 7.3.1 and 7.3.3 apply to registered FCCPs and Family Child Care Home licensing rules 7.3.2 and 7.3.3 apply to licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

4. School-age

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

a child who is five (5) years of age or older and currently attending kindergarten or has completed kindergarten or a higher grade

-- **Ratio:**

There are a variety of regulations that speak to ratio. For example, in a licensed Family Child Care Home; the FCCP's own school age children who reside in the home and the Family Child Care Assistant's own school age children are not counted. See the charts in Family Child Care Home licensing rules 6.2.1.15 - 6.2.1.87 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>). These charts have been created in place of using words to ensure clarity of understanding. If a combination isn't allowed by the chart, then it has been left out intentionally. In registered Family Child Care Homes, there are two charts. The chart titled, "Registered FCCH: Option one (1): Year Round Care" is the more commonly used ratio chart in Vermont. This chart allows for a registered FCCP to care for no more than 6 non-school age children (with no more than 2 of these 6 children under 24 months of age) and no more than 4 school age children year-round provided that the school age children meet one of two conditions. Either the school age children began care prior to May 1st during the preceding school year or are siblings of younger children enrolled in the registered Family Child Care Home. The chart titled, "Registered FCCH: Option two (2): Summer Vacation" allows for additional school age children; but by using this chart, the registered FCCP is limited to no more than 2 children under 24 months of age total.

-- Group size:

See the charts in Family Child Care Home licensing rules 6.2.1.5 - 6.2.1.7 which apply to registered FCCPs and see the charts in Family Child Care Home licensing rule 6.2.2.4 for licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).). In Family Child Care Homes, group size and ratio are considered the same thing. The same answer above for ratio applies here for group size.

-- Teacher/caregiver qualifications:

See Family Child Care Home licensing rules 7.3.1 and 7.3.3 apply to registered FCCPs and Family Child Care Home licensing rules 7.3.2 and 7.3.3 apply to licensed FCCPs (<http://dcf.vermont.gov/cdd/laws-regs/childcare>).

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

Vermont statute requires anyone providing child care services to more than 2 families to be licensed. The Child Development Division doesn't allow for exempt family child care homes to participate in CCDF. Therefore, this question is not applicable.

c) In-home CCDF providers:

1. Describe the ratios

Vermont statute allows unregulated child care. See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>). The limit is on the number of families versus the number of children and states unregulated child care may be provided for 1 or 2 families. Unregulated child care participating in CCDF is only approved for children in the care of a relative (aunt, uncle, grandparent, great grandparent or sibling living outside of the child's home).

2. Describe the group size

Vermont statute allows unregulated child care. See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>). The limit is on the number of families versus the number of children and states unregulated child care may be provided for 1 or 2 families. Unregulated child care participating in CCDF is only approved for children in the care of a relative (aunt, uncle, grandparent, great grandparent or sibling living outside of the child's home).

3. Describe the maximum number of children that are allowed in the home at any one time.

Vermont statute allows unregulated child care. See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>). The limit is on the number of families versus the number of children and states unregulated child care may be provided for 1 or 2 families. Unregulated child care participating in CCDF is only approved for children in the care of a relative (aunt, uncle, grandparent, great grandparent or sibling living outside of the child's home).

4. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size

Vermont statute allows unregulated child care. See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>). The limit is on the number of families versus the number of children and states unregulated child care may be provided for 1 or 2 families. Unregulated child care participating in CCDF is only approved for children in the care of a relative (aunt, uncle, grandparent, great grandparent or sibling living outside of the child's home).

5. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day

Vermont statute allows unregulated child care. See 33 V.S.A. § 3502 (<https://legislature.vermont.gov/statutes/section/33/035/03502>). The limit is on the number of families versus the number of children and states unregulated child care may be provided for 1 or 2 families. Unregulated child care participating in CCDF is only approved for children in the care of a relative (aunt, uncle, grandparent, great grandparent or sibling living outside of the child's home).

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(l)). Note: This question is different from the health and safety training requirements, which are addressed in question 5.2.3.

Effective Date: 10/01/2018

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.)

For prevention, the standard is those practices that promote children's health which includes cleaning practices, immunizations, diapering protocols, and handwashing. The licensing rules take in account children's ages and accommodations needed for children with special needs. For managing infectious diseases, the standard is to engage in practices that minimize the spreading of contagious illnesses which includes program policies for managing infectious illnesses, daily health checks, exclusion criteria for sick children, practices for responding to sick children, and standard precautions for handling bodily fluids.

-- List all citations for these requirements, including those for licensed and license-exempt programs

Center Based Child Care and Preschool Program and Family Child Care Home rules in section 5.1, 5.2.1, 5.2.3, 5.2.6, 5.3, and rules 5.2.2.3 - 5.2.2.4, 5.2.4.4, and 5.2.5. Afterschool Child Care Program rules 10.6, 13.1, and 13.5 - 13.16. (citation for accessing these regulations: <http://dcf.vermont.gov/cdd/laws-regs/childcare>). Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements.

ARCCs are exempt from this requirement.

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

Daily health checks are not required in Afterschool Child Care Program regulations. Diapering regulations are also not included in Afterschool Child Care Program regulations. Otherwise, the regulations have similar, if not the same, rules pertaining to prevention and control of infectious diseases. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care

All three regulations have licensing rules requiring staff assist children with hand washing as needed and make accommodations based on children's special needs.

-- Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement.

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

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Safe-sleep practices are those actions that increase infants (under 12 months of age) safety while they sleep which reduces the risk of sudden infant deaths. These actions/practices include placing infants on their back to sleep; not placing blankets, pillows, or soft objects with an infant; transferring an infant who has fallen asleep in a swing or car seat into a crib to sleep on his/her back; no objects around the infant's neck while sleeping (e.g. bib); no cords on objects with a sleeping infant (e.g. no cord on a pacifier); and no positional devices. Center Based Child Care and Preschool Program and Family Child Care Home rules in section 5.4.2.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Center Based Child Care and Preschool Program and Family Child Care Home rules in section 5.4.2 (citation for accessing these regulations: <http://dcf.vermont.gov/cdd/laws-regs/childcare>). Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

No variations based on category of care. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care

Same rules for all infants under 12 months of age.

-- Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement

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.)

There are protective regulations such as proper labeling with a child's name, discarding of expired medications, and etcetera. There are also safety regulations such as training for staff administering medications, and where medications are stored. There are regulations that require parental permission for administration of medication.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Center Based Child Care and Preschool Program rules in section 5.6 and rules 3.4.6.3

and 5.7.3. Family Child Care Home rules in section 5.6 and rules in 3.3.6.3 and 5.7.3. Afterschool Child Care Program rules 10.3 - 10.4 and 10.7. (citation for accessing these regulations: <http://dcf.vermont.gov/cdd/laws-regs/childcare>). Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

In Afterschool Child Care Program regulations, the licensing rule requires being trained to provide medication versus Center Based Child Care and Preschool Programs regulations and Family Child Care Home regulations in which staff who administer medication are required to complete a specific training for medication administration. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. An ARCC provider must obtain permission from the parent authorizing (1) emergency medical care for children and (2) prior to giving medication to children in care.

-- Describe any variations based on the age of the children in care

No significant variations.

-- Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. The requirements state that the provider shall obtain written permission from the parent authorizing (1) emergency medical care for child(ren) and (2) prior to giving medication to child(ren).

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

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

This is defined as regulations that protect children with food allergies and food related injuries as well as regulations that identify how the program and staff are prepared to handle unexpected situations related to food allergies and food related injuries. These

regulations include but is not limited to written program procedures, information sharing, providing alternative foods, knowing how to respond in an emergency, supervision during meal and snack times.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Center Based Child Care and Preschool Program rules 5.11.6.10, 6.2.6.3 and 6.3.4 and the rules in section 5.11.8. Family Child Care Home rules 5.11.6.10, 6.2.4.5, and 6.3.4 and the rules in section 5.11.8. Afterschool Child Care Program rule 8.8, 14.7, and 15.6 - 15.7. (citation for accessing these regulations: <http://dcf.vermont.gov/cdd/laws-regs/childcare>). Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Afterschool Child Care Programs do not have a licensing rule that says "Foods for infants shall be of a texture and consistency that promotes safe consumption and reduces the risk of choking" like Center Based Child Care and Preschool Program and Family Child Care Home regulations. Nor does this set of regulations have a specific rule about maintaining supervision of children when they are eating. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care

Center Based Child Care and Preschool Program and Family Child Care Home regulations have rule 5.11.6.10 which states "Foods for infants shall be of a texture and consistency that promotes safe consumption and reduces the risk of choking." (citation for accessing these regulations: <http://dcf.vermont.gov/cdd/laws-regs/childcare>). This rule relates specifically to infants and not for older age groups of children.

-- Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These

requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement.

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.)

There are a variety of licensing rules across the regulations that address indoor and outdoor safety and maintenance of the child care building/home, premises, and toys/materials. Also, there are licensing rules for safe transportation, swimming, food preparation and storage, management of pest control, fire safety, drinking water safety, lead and asbestos safety. DCF's Child Development Division worked with Division of Fire Safety, Agency of Natural Resources, and Vermont Department of Health to identify child care licensing regulations that ensured child safety across environments and for children of all ages. See rules within the health and safety and application sections within all 3 sets of regulations.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Rules in Center Based Child Care and Preschool Program section 5.10, Family Child Care Home section 5.10, and Afterschool Program section 11 - 12 and 16 - 17. The regulations are accessible on the Division's website: <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Licensed programs including licensed Family Child Care Homes have to adhere to Division of Fire Safety regulations. Division of Fire Safety does not have jurisdiction over Registered Family Child Care Homes. There are regulations for Registered Family Child Care Homes that address safety elements as identified by Division of Fire Safety to ensure the same level of safety across environments. Agency of Natural Resources does not have jurisdiction over Registered Family Child Care Homes and

water testing requirements do not exist for those water systems that aren't required to have Agency of Natural Resource water permits. As such, Agency of Natural Resources assisted the Child Development Division with writing and implementing child care licensing regulations that required water testing standards for Center Based Child Care and Preschool Programs and for Family Child Care Homes. These same water testing standards only apply to Afterschool Child Care Programs required to obtain water permits from the Agency of Natural Resources. Because of the size of Registered Family Child Care Home programs (small family child care homes), there isn't the same licensing rule that requires a specific amount of indoor and outdoor square footage per child. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care

Not applicable.

-- Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. The requirements state that the provider shall protect the children from any and all conditions which threaten the children's health, safety and well-being. This includes but is not limited to access to stoves, pools, poisons, well, known vicious animals, weapons, medications, toxic chemicals, bodies of water and heating devices.

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.)

Child care programs are required by regulations to ensure that staff use supervision, positive guidance practices that handle children gently and safely, and prevent the use of inappropriate discipline and corporal punishment. These regulations help protect children from shaken baby syndrome, abusive head trauma and child maltreatment. There are also child care licensing regulations that require staff receive training on how to notice signs of shaken baby syndrome, abusive head trauma and child maltreatment and respond when these signs have been observed.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Center Based Child Care and Preschool Program rules in section 3.3 and rules 2.1.5, 5.10.1.13.2, 6.2.7.3, 6.2.7.4 7.1.3, 7.6.5, and 7.7.5.2, Family Child Care Home rules in section 3.2 and rules 2.1.5, 5.10.1.13.2, 6.2.5.3, 6.2.5.4, 7.1.3, 7.6.2, and 7.7.5.2, and Afterschool Child Care Program rules 3.7, 4.10 - 4.16, 5.31, 9.1, and 9.2 address this.

The regulations are accessible on the Division's website:

<http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

There are not rules in Afterschool Child Care Program regulations that speak to shaken baby syndrome considering children are required to be 5 years of age and older to receive services. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care

Not applicable.

-- Describe if relatives are exempt from this requirement

The Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. The requirements state that guidance/discipline shall not include any form of cruel and unusual punishment, even with parental permission, including corporal punishments such as but not limited to shaking, hitting, spanking, pinching, or confinement in a small enclosed or darkened area.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for

evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

There are child care licensing regulations that require programs attend training on emergency preparedness and write emergency response plans, educate staff on how to respond in various emergencies, and practice emergency evacuation drills. These regulations address evacuation; relocation; sheltering-in-place; lockdown; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Center Based Child Care and Preschool Program rules in section 3.7 and 5.8 and rules 5.10.1.13.2, 5.10.5.4.7, 6.2.3.2, 6.2.4.5, 6.3.4, and 8.1.18; Family Child Care Home rules in section 3.6 and 5.8 and rules 5.10.1.13.2, and 6.3.4; and Afterschool Child Care Program rules 3.7 - 3.8, 5.26, 6.3, 8.8, 10.8 - 10.11, and 16.8 - 16.9. The regulations are accessible on the Division's website: <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Family Child Care Homes most often have a single person providing child care services so they do not have the same rule related to having a second person present to assist in an emergency as centers. Some Center Based Child Care and Preschool Programs provide non-recurring care services who have an additional rule on this topic. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care

Not applicable

-- Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement.

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

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

There are regulations that address how to handle, store, and dispose of hazardous materials and appropriate disposal of biocontaminants.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Center Based Child Care and Preschool Program rules in section 5.10.1.10 and rules 5.2.5, 5.10.1.7, and 7.1.3; Family Child Care Home rules in section 5.10.1.10 and rules 5.2.5, 5.10.1.7, and 7.1.3; and Afterschool Child Care Program rules 5.31 and 12.5. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Center Based Child Care and Preschool Program and Family Child Care Home regulations have more specificity than Afterschool Child Care Program regulations. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care

Not applicable

-- Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. The requirements state that the provider shall protect the children from any and all conditions which threaten the children's health, safety and well-being. This includes but is not limited to access to stoves, pools, poisons, well, known vicious animals, weapons, medications, toxic chemicals, bodies of water and heating devices. In addition, the provider shall clean up blood and other bodily fluids with appropriate caution, protection and thoroughness.

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.)

All three sets of child care licensing regulations have a section related to transporting children in a safe manner, with safe vehicles, with parental permission, and related to emergency precautions.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Center Based Child Care and Preschool Program rules in section 5.10.6, Family Child Care Home rules in section 5.10.6, and Afterschool Program rules in section 17. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Center Based Child Care and Preschool Program and Family Child Care Home regulations have more specificity than Afterschool Child Care Program regulations. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the

provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care

Staffing requirements are increased when non-ambulatory children are in the vehicle.

-- Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. The requirements state that children under 8 years of age shall be properly secured in a federally approved child restraint system appropriate to their weight and size, when being transported.

10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

All three sets of regulations have training and retraining requirements related to pediatric first aid and CPR. The requirements speak to which staff require training, when the training has to be completed and that trained staff must be present when child care services are being provided.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Center Based Child Care and Preschool Program rules 5.10.5.4.1 - 5.10.5.4.2, 5.10.5.4.5, 7.1.2, 7.4.7, and 8.1.19; Family Child Care Home rules in section 7.1.2 and rules 5.10.5.4.1 - 5.10.5.4.2, 5.10.5.4.4, 7.4.7, and 7.6.7; and Afterschool Child Care Program rules 5.27, 5.34 - 5.36, 5.39 - 5.41. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

No substantive differences for center and FCC. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires

licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care

Not applicable.

-- Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement.

11. Recognition and reporting of child abuse and neglect

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Child care licensing regulations require training for staff to be able to prevent child sexual abuse through recognition of signs of grooming and other predatory behaviors, to be able to recognize the signs of child abuse and/or neglect, and to know how to report suspicion or knowledge of child abuse and/or neglect.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Rules in section 3.3 of Center Based Child Care and Preschool Programs, in section 3.2 of Family Child Care Homes, and rules 4.10 - 4.16 in Afterschool Child Care Programs address this topic as titled. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

No substantive differences for center or FCC. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care

Not applicable.

-- Describe if relatives are exempt from this requirement

Pursuant to 33 V.S.A. 4913 (accessible online at <https://legislature.vermont.gov/statutes/section/33/049/04913>), Approved Relative Child Care Providers are mandated reporters of child abuse and neglect and are required to report to the Child Protection Line when they reasonably suspect abuse or neglect of a child.

b) Does the Lead Agency include any of the following optional standards?

No, if no, skip to 5.2.3.

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.)

All 3 sets of child care licensing regulations address nutrition with child care licensing rules on types of foods and drinks to be served or not served, how often meals and/or snacks are required to be offered, and information sharing with families about meals and/or snacks being served when the food is provided by the program versus the family.

-- List all citations for these requirements, including those for licensed and license-exempt providers

See Center Based Child Care and Preschool Program and Family Child Care Home rules in section 5.11. Also see Afterschool Child Care Program rules in section 14. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

No substantive differences for center or FCC. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care.

There are additional rules in the Center Based Child Care and Preschool Program and Family Child Care Home regulations for infants. These rule address additional health and safety requirements, following parents' preferences with how foods are introduced, and properly labeling bottles to ensure formula and/or breast milk is served to the right child.

--Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement.

2. Access to physical activity

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

All 3 sets of child care licensing regulations address requirements for children to have outside time to ensure children are receiving physical activity.

-- List all citations for these requirements, including those for licensed and license-exempt providers

See Center Based Child Care and Preschool Program and Family Child Care Home rules in section 6.1.2 and rule 6.1.3.1. Also see Afterschool Child Care Program rules 8.2, 12.8 - 12.9. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

No substantive differences for center or FCC. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care.

No variations based on the ages of children in care.

--Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement.

3. Caring for children with special needs

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

All 3 set of child care licensing regulations address requirements related to services for children with special needs. This includes but is not limited to inclusion criteria, making reasonable modifications to curriculum and daily activities and appropriately modifying emergency procedures.

-- List all citations for these requirements, including those for licensed and license-exempt providers

See Center Based Child care and Preschool Program rules in section 6.3 and rules 6.1.4.4.6, 8.1.9, and 8.1.18. Family Child Care Home rules in section 6.3 and rule 6.1.4.4.6. See Afterschool Child Care Program rules 5.38 and 8.8. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Center Based Child Care and Preschool Program and Family Child Care Home regulations have more specificity than Afterschool Child Care Program regulations. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care.

Not applicable.

--Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement.

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

Describe:

Curriculum

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Curriculum regulations are designed to support children's growth and development.

-- List all citations for these requirements, including those for licensed and license-exempt providers

See Center Based Child Care and Preschool Program and Family Child Care Home rules in sections 6.1 - 6.2. See Afterschool Child Care Program rules sections 6 - 9. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

No substantive differences for center or FCC. In-home and license-exempt are the same in Vermont and apply only to Approved Relative Child Care. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

-- Describe any variations based on the age of the children in care.

No substantive difference.

--Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) must certify that they have read and understand the Approved Relative Child Care Provider Requirements. These requirements contain minimal health and safety requirements. ARCCs are exempt from this requirement.

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

Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served, that address the health and safety topics described in 5.2.2, and child development. Lead Agencies must also have ongoing training requirements on the health and safety topics for caregivers, teachers, and directors of children receiving CCDF funds (658E(c)(2)(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: 10/01/2018

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:

The focus of the child care licensing regulations is on the content and not on establishing a minimum number of pre-service or orientation hours. Relevant number of hours varies significantly based on the individual staff person's years of experience and educational background when beginning employment. For example, an individual with no prior experience and education will need significantly more orientation hours than someone with a Bachelor or Master's degree in early education. The same expectations exist within all 3 sets of child care licensing regulations.

2. Licensed FCC homes:

The focus of the child care licensing regulations is on the content and not on establishing a minimum number of pre-service or orientation hours. Relevant number of hours varies significantly based on the individual staff person's years of experience and educational background when beginning employment. For example, an individual with no prior experience and education will need significantly more orientation hours than someone with a Bachelor or master's degree in early education. The same expectations exist within all 3 sets of child care licensing regulations.

3. In-home care:

In-home and license-exempt are the same in Vermont. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

4. Variations for exempt provider settings:

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain

in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer)

Orientation is required to be completed prior to staff being left alone with children. For Trainees who are not allowed to be left alone with children, the orientation is required to be completed within one month of starting employment.

c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served

There is no difference.

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

There is an on-line training available for all providers which may be completed in one's home, at the child care program or at a local library or other public location in which access to an online training exists. There are also criteria for a program to develop their own training for their staff. The criteria ensures that trainings created and provided by programs for their own staff provides comparable content to the on-line training.

e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).

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

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCC providers are exempt from this requirement.

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

Approved Relative Child Care Providers (ARCC) are the only license exempt programs allowed in Vermont and they are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

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

Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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 to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

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

Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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](#)

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

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](#)

Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

[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](#)

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant

must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

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

Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health &

Safety information is contained in the booklet.

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

Providers complete the Better Kid Care Online Orientation which covers shaken baby syndrome, abusive head trauma, and child maltreatment. This training is required to be completed prior to being left alone with children. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

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

Training on the program's policies on relocation; shelter-in-place and lock down; staff and volunteer emergency preparedness training and practice drills; communication and reunification with families; continuity of operations, and accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions is required to be completed prior to being left alone with children. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health &

Safety information is contained in the booklet.

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

Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

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

Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

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

Center Based Child Care and Preschool Program rule 7.1.2 and 8.1.19, Family Child Care Home rules in section 7.1.2, and Afterschool Program rule 5.39. In addition, an [Administrative Memo on First Aid & CPR Expectations for Child Care](#)

[effective 9/30/2019](#) detailing programs are required to complete this requirement within 3 months of hire and this requirement applies to all staff.

All regulations and administrative memos are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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](#)

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

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](#)

Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

5.2.3e 12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

5.2.3e 13.

Describe other training requirements, such as nutrition, physical activities, caring for children with special needs, etc..

Vermont's regulation that requires orientation training also includes the following requirements: nutrition and food safety including prevention of and response to emergencies due to food and allergic reactions, providing developmentally appropriate activities and experiences for children, and inclusion of children with special needs.

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Center Based Child Care and Preschool Program and Family Child Care Home rule 7.1.3 and Afterschool Program rule 5.31. All regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition.

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

Approved Relative Child Care Providers (ARCC) are exempt from pre-service/orientation training. The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the rules/requirements contained in the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health & Safety information is contained in the booklet.

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: 10/01/2018

a) Licensed child care centers:

There is anywhere from 4 - 15 hours of ongoing professional development required annually. Staff are required to complete professional development in core content areas which includes health and safety. Staff is defined to include all teachers, program directors and/or administrators, and classroom aides.

b) Licensed FCC homes:

There is 15 hours of ongoing professional development required annually. Family Child

Care Providers, assistants, and aides are required to complete professional development in core content areas which includes health and safety.

c) In-home care:

In-home and license-exempt are the same in Vermont. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. No minimum training hours are required for ARCC providers.

d) Variations for exempt provider settings:

N/A

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: 10/01/2018

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

There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rules 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 - 5.36. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

-- 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:

Child care licensing regulations require an individualized professional development

plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

-- 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:

ARCC Providers are exempt from this requirement.

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

There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rules 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 - 5.36. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

-- 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:

Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and

Afterschool Child Care Program rule 5.33. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

-- 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:

ARCC providers are exempt from this requirement.

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

There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rules 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 - 5.36. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

-- 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:

Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

-- 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:

ARCC providers are exempt from this requirement.

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

There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rules 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 - 5.36. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

-- 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:

Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

-- 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:

ARCC providers are exempt from this requirement.

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

There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rules 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 - 5.36. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

-- 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:

Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

-- 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:

ARCC providers are exempt from this requirement.

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

There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rules 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 - 5.36. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

-- 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:

Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

-- 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:

ARCC providers are exempt from this requirement.

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

There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rules 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 - 5.36. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

-- 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:

Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

-- 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:

ARCC providers are exempt from this requirement.

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

There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rules 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 - 5.36. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

-- 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:

Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

-- 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:

ARCC providers are exempt from this requirement

9. Appropriate precautions in transporting children (if applicable)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rules 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 - 5.36. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

-- 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:

Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

-- 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:

ARCC providers are exempt from this requirement.

10. Pediatric first aid and CPR certification

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Staff and family child care providers are required to be certified and to renew

certification based on the expiration date on their certification card. These trainings may not count toward annual professional development requirements. These trainings are in addition to annual requirements. Center Based Child Care and Preschool Program rules 7.1.2, 7.4.7, and 8.1.19; Family Child Care Home rules 7.1.2.1 - 7.1.2.3 and 7.4.7; and Afterschool Child Care Program rules 5.34 - 5.36 and 5.39. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

-- 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:

Staff and family child care providers are required to be certified and to renew certification based on the expiration date on their certification card. These trainings may not count toward annual professional development requirements (in essence, these trainings are in addition to annual requirements). Center Based Child Care and Preschool Program rules 7.1.2, 7.4.7, and 8.1.19; Family Child Care Home rules 7.1.2.1 - 7.1.2.3 and 7.4.7; and Afterschool Child Care Program rules 5.34 - 5.36 and 5.39. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

-- 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:

ARCC providers are exempt from this requirement.

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

There is a general annual professional development training requirement for all staff. Center Based Child Care and Preschool Program rules 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 - 5.36. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

-- 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:

Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

-- 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:

ARCC providers are exempt from this requirement.

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

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

There is a general annual professional development training requirement for all staff.

Center Based Child Care and Preschool Program rules 7.4.4 and 8.1.21, Family Child Care Home rule 7.4.4 and Afterschool Child Care Program rules 5.34 - 5.36. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. Vermont requires licensure to participate in CCDF unless the provider is a relative (ARCC) per Federal definition. ARCCs are exempt from this requirement.

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:

Child care licensing regulations require an individualized professional development plan that determines the type and amount of annual professional development on any given topic based on existing knowledge and skill. See Center Based Child Care and Preschool Program and Family Child Care Home rule 7.4.1 and Afterschool Child Care Program rule 5.33. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

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:

ARCC providers are exempt from this requirement.

13. Describe other requirements such as nutrition, physical activities, caring for children with special needs, etc..

N/A

Provide the citation for other training requirements, including citations for both licensed and license-exempt 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:

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:

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

During the application process, there is either a technical assistance licensing visit or a pre-registration licensing visit (depending on the type of applicant). These visits are conducted by a Licensing Field Specialist to assess whether the space, materials and planned services are in substantial compliance with licensing rules. Once licensed, Licensing Field Specialists conduct licensing compliance visits to assess compliance to licensing regulations. During the application process, the applicant is required to obtain those state permits that are required by the Division of Fire Safety and by the Agency of Natural Resources in addition to

complying with Vermont Department of Health lead safety requirements. Division of Fire Safety and the Agency of Natural Resources have collaborated with DCF's Child Development Division to write child care licensing regulations that address health and safety requirements for programs not required to obtain state permits which ensures the same level of health and safety requirements for all licensed child care programs.

Effective Date: 10/01/2018

5.3.2 Inspections for licensed CCDF providers.

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

Effective Date: 10/01/2018

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

A Licensing Field Specialist conducts a pre-licensure inspection (technical assistance visit) prior to a license being issued. Applicants are expected to demonstrate substantial compliance for a license to be issued. If substantial compliance has been achieved and concerns exist, a provisional license is issued for no more than a year with specific required action outlined for the program to achieve. If required action is achieved within one year, a license renewal application is completed, and a full license

is issued. If required action is not achieved within one year, the license expires as the license renewal application is considered incomplete. If substantial compliance is not demonstrated during the pre-licensure inspection, required action is identified and the applicant is provided more time to achieve compliance. If substantial compliance is not able to be demonstrated after further technical assistance and more time, the application is denied.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers

DCF's Child Development Division's BFIS data system, allows Licensing Field Specialists and their supervisors to identify which programs are due for an annual, unannounced inspection. Using this information and knowledge of programs' schedules and routines, Licensing Field Specialists schedule the programs they will visit each week. As of 10/15/2018, the Division hired 2 new Licensing Field Specialists and have a 3rd position under recruitment. Once the new staff have been hired and trained, Licensing Field Specialists will meet the once a year requirement.

3. Identify the frequency of unannounced inspections:

- Once a year
 More than once a year

Describe:

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards.

Licensing Field Specialists complete compliance inspections using a differential monitoring process which assesses licensing rules as selected by Licensing Supervisors using a consensus model of licensing rules that directly or indirectly impact child health, safety, development, and fire standards.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers

Center Based Child Care and Preschool Program rule 2.3.9.4 and Afterschool Child Care Program rule 18.7. The regulations are accessible on the Division's website at

<http://dcf.vermont.gov/cdd/laws-regs/childcare>. On page 8 of the Center Based Child Care and Preschool Program Guidance Manual, it says that regulatory compliance visits are unannounced visits. On page 2 of the Afterschool Guidance Manual, it says that Licensing Field Specialists will conduct unannounced visits.

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

Licensing Field Specialist conducts a pre-licensure inspection (technical assistance visit for licensed family child care homes and a pre-registration visit for registered family child care homes) prior to a license being issued. Applicants are expected to demonstrate substantial compliance for a license to be issued. If substantial compliance has been achieved and concerns exist, a provisional license is issued for no more than a year with specific required action outlined for the program to achieve. If required action is achieved within one year, a license renewal application is completed, and a full license is issued. If required action is not achieved within one year, the license expires as the license renewal application is considered incomplete. If substantial compliance is not demonstrated during the pre-licensure inspection, required action is identified and the applicant is provided more time to achieve compliance. If substantial compliance is not able to be demonstrated after further technical assistance and more time, the application is denied.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF family child care providers

DCF's Child Development Division's BFIS data system, allows Licensing Field Specialists and their supervisors to identify which programs are due for an annual, unannounced inspection. Using this information and knowledge of programs' schedules and routines, Licensing Field Specialists schedule the programs they will visit each week. As of 10/15/18, the Division hired 2 new Licensing Field Specialists and have a 3rd position under recruitment.. Once the new staff have been trained, Licensing Field Specialists will meet the once a year requirement.

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.

Licensing Field Specialists complete compliance inspections using a differential monitoring process which assesses licensing rules as selected by Licensing Supervisors using a consensus model of licensing rules that directly or indirectly impact child health, safety, development, and fire standards.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers

Family Child Care Home rule 2.3.9.4. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>. On page 8 of the Family Child Care Home Guidance Manual, it says that regulatory compliance visits are unannounced visits.

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 pre-licensure inspections and unannounced inspections of licensed CCDF providers
DCF's Child Development Division's Licensing Field Specialists.

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: 10/01/2018

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

N/A because license-exempt center-based programs are not permitted to participate in CCDF.

Provide the citation(s) for this policy or procedure

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

N/A because license-exempt family child care programs are not permitted to participate

in CCDF.

Provide the citation(s) for this policy or procedure

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

License-exempt in-home CCDF providers are only permitted if they meet the Federal definition of relative child care. Approved Relative Child Care Providers (ARCCs) are exempt from monitoring.

Provide the citation(s) for this policy or procedure

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,

decide:

e) List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers

N/A

5.3.4 Licensing inspectors.

Effective Date: 10/01/2018

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)).

The qualifications for a Licensing Field Specialist are as follows: " **Education:** Bachelor's degree with successful completion of four college level courses in early childhood topics.

Experience: Two years of successful experience as a head teacher or director of a licensed child care facility, operator of a registered family day care home, child care licensur, resource and referral counselor, child care trainer, or child care eligibility specialist." **OR " Education:** CDA or Associate Degree in child development.

Experience: Four years of successful experience as a head teacher or director of a licensed child care facility, operator of a registered family day care home, child care licensur, resource and referral counselor, child care trainer, or child care eligibility specialist." Once an individual has been hired with the foundational education and experience, we provide training on health and safety requirements that are age appropriate to the age of children in care and provider setting. Our community partners (e.g. Division of Fire Safety, Vermont Department of Health, etcetera) assist us with providing this training both within the classroom as well as on an on-call basis when their expertise will assist us with assessing child safety. In some instances, our community partner joins us on a licensing visit.

b) Provide the citation(s) for this policy or procedure

<http://humanresources.vermont.gov/staffing/classification/job-specifications?code=530801>

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: 10/01/2018

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.

As of 10/15/2018, the Division hired 2 new Licensing Field Specialists and have a 3rd position under recruitment. This allows each licensed program to be visited prior to licensure and annually for an unannounced compliance visit thereafter in full compliance with Federal requirements.

b) Provide the policy citation and state/territory ratio of licensing inspectors
state ratio of licensing inspectors to programs: 1:105

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 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.

Exemptions because of relative care have requirements that include health and safety requirements. If there is a concern about health and safety with an exempt relative, a complaint may be entered (following the same complaint process for licensed programs).

The complaint will be assigned to the Licensing Field Specialist, for the area, who will investigate. If violations are cited, corrective action is also identified and required to be completed. If compliance is not achieved, the subsidy certificate may be expired.

The Approved Relative Child Care (ARCC) applicant must certify on the ARCC application that they have read and understand the ARCC Requirements Booklet. In addition, their signature certifies that they are in compliance with these requirements and will remain in compliance as long as they are providing care. The Health and Safety information contained in the ARCC requirements are as follows:

1. The Provider shall have knowledge of, account for the activities of, and remain in closeproximity to the child(ren) at all times in order to assure immediate intervention to safeguard the child(ren) from harm.
2. The Provider shall protect the child(ren) from any and all conditions which threaten the child(ren)'s health, safety and well-being. This includes but is not limited to access to stoves, pools, poisons, wells, known vicious animals, weapons, medications, toxic chemicals, bodies of water and heating devices.
3. Use of tobacco products in the home is prohibited during the hours the child(ren) are in care.
4. Corporal punishment, which includes hitting, spanking, pinching, shaking, or beconfined in a small enclosed or darkened area, is prohibited and a parents' consent cannot override or negate this prohibition.
5. Children under eight (8) years of age shall be properly secured in a federally approved child restraint system appropriate to their weight and size, when being transported.
6. The Provider shall have adequate first aid supplies and knowledge of how to use them.
7. The Provider shall certify in writing to the CDD that the premises in which the childcare is to be provided has a functioning smoke detector, CO2 monitor, and a 2-A:10BC fire extinguisher.
8. The Provider shall obtain written permission from the parent authorizing (1) emergency medical care for child(ren), and (2) prior to giving medication to child(ren) in care.
9. The Provider shall wash their hands and assure that the hands of children being cared for are washed at appropriate times.
10. The Provider shall clean up blood and other bodily fluids with appropriate caution, protection and thoroughness.
11. The Provider shall not leave child(ren) in care of another person. If an emergency situation arises to which only the Provider can respond and such a situation prevents the Provider from being able to continue to provide childcare, the Provider may leave a child(ren) for a short period of time in the care of another person who has been approvedby CDD through the record check process. The parent shall be notified of this action atthe first practical opportunity.
12. The Provider shall develop a record keeping system for each child's attendance, record dates and times of service provided, and maintain these records for three (3)years.

In addition, pursuant to 33 V.S.A. §4913, Approved Relative Child Care Providers are mandated reporters of child abuse and neglect and are required to report to the Child Protection Line when they reasonably suspect abuse or neglect of a child. This report must be made within twenty-four (24) hours of the time information regarding the suspected abuse or neglect was first received or observed. The Child Protection Line: 1-800-649-5285 (24 hours a day, 7 days a week).

Yes, relatives are exempt from some inspection requirements.

If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.

No, relatives are not exempt from inspection requirements.

5.4 Criminal Background Checks

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

Components	In-State	National	Inter-State
1. Criminal registry or repository using fingerprints in the current state of residency	x		
2. Sex offender registry or repository check in the current state of residency	x		
3. Child abuse and neglect registry and database check in the current state of residency	x		
4. FBI fingerprint check		x	
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)		x	
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			x
7. Sex offender registry or repository in any other state where the			x

individual has resided in the past 5 years			
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 requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met 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 fingerprints in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
2. Sex offender registry or repository check in the current state of residency	Milestone/Prerequisite for 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	Possible Time Limited 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/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
6. Criminal registry or repository in any	Possible Time Limited Waiver for:	

other state where the individual has resided in the past 5 years, with the use of fingerprints being optional	--Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting 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/or --Conducting checks on all new (prospective) staff and/or --Conducting 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/or --Conducting checks on all new (prospective) staff and/or --Conducting 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.

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: 03/21/2020

- 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

Vermont has fully implemented in-state criminal registry checks with the use of fingerprints for all new staff in Center Based Child Care and Preschool Programs (see CBCCPP rule 7.2.6 as our authority to do this), all new staff in Afterschool Programs (see ASP rule 5.16 as our authority to do this) and all new household members who are 18 years of age or older and staff within Family Child Care Homes (see FCCH rules 7.2.6 and 2.3.10.5 as our authority to do this). This process is triggered when the Division receives a Record Check Authorization form for an individual not already affiliated with the licensed or regulated program. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

During the COVID-19 response period, Vermont's Fingerprint Identification Centers closed and stopped providing fingerprinting services beginning with Governor Scott's order for the closure of close-contact businesses on 3/21/2020. Beginning on May 15th and each week thereafter, Governor Scott identifies additional businesses and activities that may re-open in Vermont. Fingerprint centers are reopening gradually. As a result, regulated child care staff, family child care providers, and family child care adult household members can not submit to fingerprinting as required.

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

License-exempt providers are not allowed to participate in CCDF unless they meet the Federal definition for relative. Because they do meet the Federal definition for relative, Vermont exempts them from this requirement.

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.

Vermont has fully implemented in-state criminal registry checks with the use of fingerprints for all existing staff in Center Based Child Care and Preschool Programs (see CBCCPP rule 7.2.6 as our authority to do this), all existing staff in Afterschool Programs (see ASP rule 5.16 as our authority to do this) and all existing household

members who are 18 years of age or older and staff within Family Child Care Homes (see FCCH rules 7.2.6 and 2.3.10.5 as our authority to do this). This process included issuing the Fingerprint Authorization Certificate form needed to submit to fingerprinting to existing Center Based Child Care and Preschool Programs, Afterschool Programs and Family Child Care Homes' household members and staff. These providers and household family members then submit to fingerprinting and the Division receives and processes their results. Vermont is enforcing this requirement for all required categories of providers. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

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:

5.4.2 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: 08/15/2019

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

Vermont has fully implemented in-state sex offender registry checks for all new staff Center Based Child Care and Preschool Programs (see CBCCPP rule 7.2.6 as our authority to do this), all new staff Afterschool Programs (see ASP rule 5.16 as our authority to do this) and all new household members who are 18 years of age or older and staff within Family Child Care Homes (see FCCH rules 7.2.6 and 2.3.10.5 as our authority to do this). This process is triggered when the Division receives a Record Check Authorization form for an individual not already affiliated with the licensed or regulated program. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

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

While license-exempt providers are not allowed to participate in CCDF unless they meet the Federal definition of relative, Vermont does do this check on all license-exempt providers. These license-exempt providers are called Approved Relative Child Care (ARCC) providers (see ARCC requirement 4 which is available upon request).

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.

Vermont has fully implemented in-state sex offender registry checks for all existing staff Center Based Child Care and Preschool Programs (see CBCCPP rule 7.2.6 as our authority to do this), all existing staff Afterschool Programs (see ASP rule 5.16 as our authority to do this) and all existing household members who are 18 years of age or older and staff within Family Child Care Homes (see FCCH rules 7.2.6 and 2.3.10.5 as our authority to do this). This process was completed by Licensing Technicians in the Division and in the future will be triggered when the Division receives a Record Check Authorization form for an individual not already affiliated with the licensed or regulated program. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

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: 10/01/2018

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

These requirements apply to all licensed and regulated child care programs. This is not a new practice in Vermont; rather, it is a continuation of an existing practice. Vermont's practice complies completely with this requirement with all required individuals within all licensed and regulated programs (see Center Based Child Care and Preschool Program and Family Child Care Home rule 7.2.6, and Afterschool Program rule 5.16.) The regulations are accessible on the Division's website [at http://dcf.vermont.gov/cdd/laws-regs/childcare](http://dcf.vermont.gov/cdd/laws-regs/childcare).

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

While license-exempt providers are not allowed to participate in CCDF unless they meet the Federal definition of relative, Vermont does do this check on all license-exempt providers. This practice pre-dates the current Federal requirements. These license-exempt providers are called Approved Relative Child Care (ARCC) providers (see ARCC requirement 4 which is available upon request).

b) Has the search of the in-state child abuse and neglect 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.

There is no difference, and this is a pre-existing component of Vermont's background clearance process. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.2.6, and Afterschool Program rule 5.16. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

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: 03/21/2020

- 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

Vermont has fully implemented the National FBI fingerprint check for all new staff Center Based Child Care and Preschool Programs (see CBCCPP rule 7.2.6 as our authority to do this), all new staff Afterschool Programs (see ASP rule 5.16 as our authority to do this) and all new household members who are 18 years of age or older and staff within Family Child Care Homes (see FCCH rules 7.2.6 and 2.3.10.5 as our authority to do this). This process is triggered when the Division receives a Record Check Authorization form for an individual not already affiliated with the licensed or regulated program. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

During the COVID-19 response period, Vermont's Fingerprint Identification Centers closed and stopped providing fingerprinting services beginning with Governor Scott's order for the closure of close-contact businesses on 3/21/2020. Beginning on May 15th and each week thereafter, Governor Scott identifies additional businesses and activities that may re-open in Vermont. Fingerprint centers are reopening gradually. As a result,

regulated child care staff, family child care providers, and family child care adult household members can not submit to fingerprinting as required.

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

License exempt providers are not allowed to participate in CCDF unless they meet the Federal definition for relative. Because they meet the Federal definition for relative, they are exempt from the National FBI fingerprint check.

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.

Vermont has fully implemented the National FBI fingerprint check for existing staff in Center Based Child Care and Preschool Programs (see CBCCPP rule 7.2.6 as our authority to do this), existing staff in Afterschool Programs (see ASP rule 5.16 as our authority to do this) and all existing household members who are 18 years of age or older and staff within Family Child Care Homes (see FCCH rules 7.2.6 and 2.3.10.5 as our authority to do this). This process was triggered by issuing required individuals in all licensed and registered programs the Fingerprint Authorization Certificate form needed to submit to fingerprinting. Required individuals submitted to fingerprinting, and the Division has received and processed their results Vermont is now enforcing this requirement for non-compliant individuals. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the FBI fingerprint 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:

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 in-state (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: 03/21/2020

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

Vermont has fully implemented NSOR checks for all new staff Center Based Child Care and Preschool Programs (see CBCCPP rule 7.2.6 as our authority to do this), all new staff Afterschool Programs (see ASP rule 5.16 as our authority to do this) and all new household members who are 18 years of age or older and staff within Family Child Care Homes (see FCCH rules 7.2.6 and 2.3.10.5 as our authority to do this). This process is triggered when the Division receives a Record Check Authorization form for an individual not already affiliated with the licensed or regulated program. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

During the COVID-19 response period beginning 3/21/2020, Vermont's Fingerprint Identification Centers closed and stopped providing fingerprinting services and as a result, regulated child care staff, family child care providers, and family child care adult household members can not submit to fingerprinting as required. Even though these checks are not fingerprint supported, the NCIC, NSOR and Interstate checks are performed by Vermont Crime Information Center as a step in processing fingerprint clearances for regulated child care programs and family child care homes. Without the fingerprint process being available, Vermont does not have a process for completing this check during the COVID-19 pandemic.

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

License-exempt providers are not allowed to participate in CCDF unless they meet the Federal definition for relative. Because they do meet the Federal definition for relative, Vermont exempts them from this requirement.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the 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?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

Vermont has fully implemented NSOR checks for all existing staff Center Based Child Care and Preschool Programs (see CBCCPP rule 7.2.6 as our authority to do this), all existing staff Afterschool Programs (see ASP rule 5.16 as our authority to do this) and all existing household members who are 18 years of age or older and staff within Family Child Care Homes (see FCCH rules 7.2.6 and 2.3.10.5 as our authority to do this). This process was triggered when the Division issued a Record Check Authorization form for required individuals. That triggers Vermont Crime Information Center to conduct the NSOR check in addition to processing fingerprint checks on these required individuals for the Division. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

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:

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 resides and each 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: 03/21/2020

a) Has the interstate criminal 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

Vermont has fully implemented the inter-state criminal registry checks for all new staff Center Based Child Care and Preschool Programs (see CBCCPP rule 7.2.6 as our authority to do this), all new staff Afterschool Programs (see ASP rule 5.16 as our authority to do this) and all new household members who are 18 years of age or older and staff within Family Child Care Homes (see FCCH rules 7.2.6 and 2.3.10.5 as our authority to do this). This process is triggered when the Division receives a Record Check Authorization form for an individual not already affiliated with the licensed or regulated program. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

During the COVID-19 response period beginning 3/21/2020, Vermont's Fingerprint Identification Centers closed and stopped providing fingerprinting services and as a result, regulated child care staff, family child care providers, and family child care adult household members can not submit to fingerprinting as required. Even though these checks are not fingerprint supported, the NCIC, NSOR and Interstate checks are performed by Vermont Crime Information Center as a step in processing fingerprint clearances for regulated child care programs and family child care homes. Without the fingerprint process being available, Vermont does not have a process for completing this check during the COVID-19 pandemic.

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

License-exempt providers are not allowed to participate in CCDF unless they meet the Federal definition for relative. Because they do meet the Federal definition for relative, we exempt them from this requirement.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the interstate criminal 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:

b) Has the interstate criminal registry or repository 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.

Vermont has fully implemented the inter-state criminal registry checks for existing staff Center Based Child Care and Preschool Programs (see CBCCPP rule 7.2.6 as our authority to do this), existing staff Afterschool Programs (see ASP rule 5.16 as our authority to do this) and existing household members who are 18 years of age or older and staff within Family Child Care Homes (see FCCH rules 7.2.6 and 2.3.10.5 as our authority to do this). This process was triggered when the Division issued a Record Check Authorization form to required individuals. This is the process that triggers Vermont Crime Information Center to conduct the interstate criminal registry check in addition to processing fingerprint checks for the Division. not already affiliated with the

licensed or regulated program. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

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:

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: 03/21/2020

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

These requirements apply to all licensed and regulated child care programs. Our practice complies completely with this requirement with all required individuals within all licensed and regulated programs in Vermont. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.2.6, and Afterschool Program

rule 5.16. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

During the COVID-19 response period beginning 3/21/2020, Vermont's Fingerprint Identification Centers closed and stopped providing fingerprinting services and as a result, regulated child care staff, family child care providers, and family child care adult household members can not submit to fingerprinting as required. Even though these checks are not fingerprint supported, the NCIC, NSOR and Interstate checks are performed by Vermont Crime Information Center as a step in processing fingerprint clearances for regulated child care programs and family child care homes. Without the fingerprint process being available, Vermont does not have a process for completing this check during the COVID-19 pandemic.

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

Vermont does do inter-state sex offender registry checks on all license-exempt providers who participate in CCDF. These license-exempt providers are called Approved Relative Child Care (ARCC) providers (see ARCC requirement 4 which is available upon request).

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:

b) Has the interstate sex offender registry or repository 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.

Vermont does this check for everyone affiliated with any licensed and regulated child care program. The Division's Licensing Technicians perform this check as part of their normal duties. (see Center Based Child Care and Preschool Program and Family Child Care Home rule 7.2.6, and Afterschool Program rule 5.16). The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

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

Describe:

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: 10/01/2018

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

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 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:

Vermont now has the spreadsheet of how to request this information from other states. A process for requesting this information has been created. The final step is to create a process for being able to pay other states for this information when required by the other states. Once this is in place, Vermont will begin requesting this information as required. Once this final piece of the process is in place, Vermont will request this information for all licensed and regulated programs. License-exempt providers are not allowed to participate in CCDF unless they meet the Federal definition for approved relative child care (ARCC). Because they do meet the Federal definition for relative, we exempt them from this requirement.

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.

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
- Strategies used to address these challenges

Describe:

Vermont now has the spreadsheet of how to request this information from other states. A process for requesting this information has been created. The final step is to create a process for being able to pay other states for this information when required by the other states. Once this is in place, Vermont will begin requesting this information as required. Once this final piece of the process is in place, Vermont will request this information for all licensed and regulated programs. License-exempt providers are not allowed to participate in CCDF unless they meet the Federal definition for relative. Because they do meet the Federal definition for relative, we exempt them from this requirement.

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.

Effective Date: 10/01/2018

- 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 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:

Vermont's licensing regulations states that staff may not be left alone with children without approval from the Division. The Division's approval includes a review of fingerprint supported background clearance information. (see Center Based Child Care and Preschool Program and Family Child Care Program rule 7.2.4, and Afterschool Program rule 5.14). This means that staff may be provisionally employed and work with children if they are supervised (at all times) by a staff person who has fully cleared our background clearance process to include fingerprinting until such time as the provisionally employed staff person has fully cleared our background clearance to include fingerprinting as required. Provisional employment may not begin until the individual has submitted to the fingerprint process. This process begins with the individual submitting a Record Check Authorization form to the Child Development Division. Once this has been completed, step two in the clearance process begins which is for the Division to issue the Fingerprint Authorization Certificate. This is required for step three in the clearance process which is for the individual to provide their fingerprints at a Fingerprint Identification Center. Steps four and five involve the Vermont Crime Information Center to conduct the National FBI fingerprint checks

(along with several other checks, e.g. NSOR) and for the Division to receive the results. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>

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: 10/01/2018

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)).

In order to respond expeditiously to other states', territories', and tribes' requests; Vermont has taken several steps. First, Vermont has provided contact information for how to do this to be included in the national spreadsheet shared with all states so they have easy access to Vermont's process. Next, if the Division is contacted directly, Division staff put the entity in direct contact with the Vermont entities who will assist them with these checks. This includes a direct referral to the Vermont Crime Information Center (<https://vcic.vermont.gov/>) who will perform the criminal background check and Vermont's Child Protection Registry (<https://dcf.vermont.gov/protection/registry/out-of-state>) who will perform the child abuse and neglect substantiation check. Finally, Vermont has shared this Federal requirement with the Vermont entities who provide these services and confirmed Vermont's ability to release this information as well as ensure our Vermont colleagues understand the 45-day timeframe requirement.

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: 10/01/2018

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:

Based on the results of background checks described in this section the following persons are prohibited and shall not operate, be employed at, or be allowed unsupervised access to children: A person who is required to complete a background check who refuses or knowingly makes a material false statement in connection with such background check; A person convicted of fraud; A person convicted of a felony (consisting of Murder, Child abuse or neglect, A crime against children, including sexual activity or child pornography, Spousal abuse, A crime involving rape or sexual assault, Kidnapping, Arson, Physical assault or battery, or A drug related offense committed during the proceeding five (5) years); A person convicted of a misdemeanor offense against a child or another person (consisting of Violence, Child

abuse or neglect, Child endangerment, Sexual assault or activity, Child pornography; or Other bodily injury); A person found by a court to have abused, neglected or mistreated a child, elderly or disabled person, or animal; or An adult or child who has had a report of abuse or neglect substantiated against them under Chapters 49 and 69 of Title 33 Vermont Statutes Annotated; or A person registered, or is required to be registered, on a state sex offender registry or repository or the National Sex Offender Registry established under the Adam Walsh Child Protection and Safety Act of 2006. This is the criteria used for disqualifying a person based upon their background clearance per Center Based Child Care and Preschool Program and Family Child Care Home rule 7.2.6 and Afterschool Program rule 5.16. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

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: 10/01/2018

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)).

In the denial letter issued to the subject of the background clearance, there is information provided on how to contest the accuracy of the finding. In the denial letter to the employer, there is information provided on how to appeal the denial finding and information on how to request a record check variance to allow the staff member to be employed when the disqualifying criteria is eligible for such a variance. Only persons prohibited under the licensing regulations for the following reasons are eligible to request a variance: A conviction of fraud; A drug related offense committed during the proceeding five (5) years; A conviction of a misdemeanor offense against another person (consisting of Violence; Other bodily injury; or Other information known to the Department). These individuals may operate or be employed in a program only when the licensee and the person involved, have obtained a written variance from the Commissioner, or designee.

The licensee and the involved person shall request a variance by submitting evidence of suitability or rehabilitation to the Commissioner, or designee. The burden of proof is on the licensee and the involved person. Center Based Child Care and Preschool Program and Family Child Care Home rule 7.2.8.5 and Afterschool Program rule 5.18.e. The regulations are accessible on the Division's website at <http://dcf.vermont.gov/cdd/laws-regs/childcare>.

In order to maintain the privacy for the subject of the background clearance, Vermont issues two separate letters of our findings. The child care program receives a generic letter that says whether the subject of the background clearance "passed" or not along with relevant next step information (see above response for details on next steps). If the subject of the background check has been identified as meeting prohibited person criteria, the letter to the child care program also says that we have sent a letter detailing our findings to the subject of the background clearance. The subject of the background clearance receives a separate letter that tells them if they "passed." If they are identified as meeting prohibited person criteria, the letter provides the concrete details of this finding and relevant next step information (see above response for details on next steps).

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)).

DCF's Child Development Division covers a portion of the fees leaving only the cost of submitting to the fingerprinting to the subject of the background clearance and/or their employer.

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

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

Relatives are exempt from the following components of the background checks: fingerprint supported checks, NSOR, criminal registry or repository in any other state checks where the relative has resided in the past 5 years, and child abuse and neglect registry and database checks in any other state where the relative has resided in the past 5 years.

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 (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: 09/18/2019

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:

Vermont's professional development system is based on competencies and standards developed/revised under the State Advisory Council's Professional Preparation and Development Committee and supported and implemented by [Northern Lights @ CCV](#). **NL@CCV** is funded by CDD with CCDF to support and coordinate the implementation of Vermont's Professional Development System. [Professional Standards and Competencies](#) are the foundation of the professional development system. They are used as self- assessment tools, and to guide the development and use of curricula, instruction and credentials. They are the basis of career pathways.

-- Career pathways. Describe:

Vermont's professional development system includes a 6 level [Early Childhood Career Ladder](#) and [Afterschool Pathways](#) developed/revised under the State Advisory Council's Professional Preparation and Development Committee and supported and implemented by Northern Lights @ CCV. **NL@CCV** is funded by CDD with CCDF to support and coordinate the implementation of Vermont's Professional Development System. The Child Development Division (CDD) [child care program regulations](#) (see section 7) align the roles in regulated child care programs (teacher assistant, teacher associate, teacher, etc.) with the Early Childhood Career Ladder. Program Directors also need to meet additional criteria.

-- Advisory structure. Describe:

Vermont's Building Bright Futures State Advisory Council, Inc.'s [Professional Preparation and Development \(PPD\) Committee](#) is a statewide committee charged with overseeing the early childhood and afterschool professional development system in Vermont and is comprised of representatives from roles across the early childhood system. The goal of PPD is to develop, coordinate and promote a comprehensive system of quality learning opportunities for current and prospective early childhood and after school professionals. PPD's mission is to ensure comprehensive coordinated system of quality learning opportunities that give current and prospective professionals the knowledge, skills, dispositions, and experiences they need to provide the best care and education to children and families in Vermont. This group committee reviews, advises and makes recommendations about new or existing professional development initiatives and activities as well as acts as an [advisory body for NL@CCV](#).

-- Articulation. Describe:

Vermont's Early Childhood Higher Education Consortium brings together deans, curriculum coordinators, faculty leads and department heads in early childhood, as well as state agency leaders and the Head Start Collaboration project, to collaboratively address the education needs of Vermont's early childhood workforce. Understanding the current status of articulation agreements between colleges was a primary focus for 2017. Six articulation agreements have been updated and a new articulation agreement is underway at the state's largest institution of higher education, the University of Vermont. The Vermont state college system has worked to streamline articulation among the state colleges and with many private colleges in Vermont. Professionals can use the [Higher](#)

[Education](#) and Resources pages at **NL@CCV** as well as support from a cadre of career advisors (housed at **NL@CCV** and funded by CCDF) in navigating articulation.

-- [Workforce information. Describe:](#)

The Division uses Bright Futures Information System (BFIS), which is an integrated child care information system, to collect data on the workforce. Data is collected on the number of individuals working directly with children, their role in the program, and the education and credentials of those individuals.

-- [Financing. Describe:](#)

Funding for the majority of the Vermont early childhood professional development system comes through the Child Care and Development Block Grant and private pay. Other funding sources are the Early Learning Challenge Grant (through December 2018), the Temporary Aid to Needy Families (TANF) grant to Vermont, state general fund dollars, Part B funds, State Department of Labor (Apprenticeship) and some foundation funding to targeted initiatives.

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:](#)

[T.E.A.C.H. EARLY CHILDHOOD® VERMONT SCHOLARSHIP PROJECT](#)

(through the Vermont Association for the Education of Young Children) -

Associate's Degree at the Community College of Vermont (CCV) and coursework for those who have a Bachelor's Degree but not a teaching license in obtaining a teacher license in either Early Childhood or Early Childhood Special Education

[The Vermont Early Childhood and Afterschool Program Director Credential](#)

(offered through NL@CCV) - This is a credential for professionals working in center-based, afterschool, or family child care settings, who are directors or managers and for those who want to gain the program director competencies.

Twenty-one college credits are required for achieving the credential.

- [The Vermont Child Care Apprenticeship Program](#). Along with funding from the CDD, the Vermont Child Care Industry and Careers Council and the VT Department of Labor collaborate to offer the Apprenticeship Program for child care workers seeking

education and experience in the field. Apprentices complete 6 college courses; and participate in additional community-based trainings to gain the knowledge and skills needed to work more effectively in the field. This program is designed for apprentices who are working at least 30 hours per week and typically takes about 2 years to complete.

- [Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework](#)

[Describe:](#)

In 2015, through Early Learning Challenge Grant funding, Vermont created the Vermont Early Childhood Higher Education Consortium which is comprised of representatives from all of the colleges and universities in Vermont that have early childhood programs. This group has been working with each other and other early childhood professional development system partners to identify areas of common interest, create articulation agreements, and enhance access to early childhood pathways in higher education. As a result of ELCG funding a consultant reviewed the coursework for all of the colleges with a lens of the Vermont Early Learning Standards. This has helped align the curricula and ground each college program in a common framework. It is the intention of this group to continue after ELCG funding has ended.

- [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.](#)

Vermont's Building Bright Futures State Advisory Council, Inc.'s [Professional Preparation and Development \(PPD\) Committee](#) is a statewide committee charged with overseeing the early childhood and afterschool professional development system in Vermont and is comprised of representatives from roles across the early childhood system. For approximately 26 years, the Vermont CDD has brought issues related to the development and ongoing revisions of the professional development system to this group. Questions

related to professional standards and competencies, career pathways, articulation agreements, financing of professional development supports and related workforce information (such as the child care apprenticeship program) have all come before this advisory committee for vetting and stakeholder involvement. This committee has produced final drafts of documents and system recommendations which have been integrally linked with grants and contracts that the CDD has executed and the strategies on how the professional development support system has been implemented. The goal of PPD is to develop, coordinate and promote a comprehensive system of quality learning opportunities for current and prospective early childhood and after school professionals. PPD's mission is to ensure comprehensive coordinated system of quality learning opportunities that give current and prospective professionals the knowledge, skills, dispositions, and experiences they need to provide the best care and education to children and families in Vermont. This group committee reviews, advises and makes recommendations about new or existing professional development initiatives and activities (including the professional development framework) as well as acts as an [advisory body for NL@CCV](#).

Effective Date: 09/18/2019

6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).

The Vermont framework is designed to improve the quality of care for all participating children and families by giving child care providers the tools, supports and information they need to provide quality care. This framework also includes professional development and career advising support and onsite mentoring support for programs serving high needs children through our partner organizations which helps individuals as needs arise. Trainings related to working with diverse individuals is an important aspect of our ongoing professional development plan. In addition, we offer funding opportunities to help support workforce stability and retention of caregivers, teachers and directors seeking additional coursework.

In addition, our child care licensing staff work closely with individuals in child care programs to allow extra time to meet requirements if needed while they access the available supports. All of these supports improve the quality, diversity, stability and retention of the child care workforce.

The below programs contribute to the stability of the workforce and retention of those working in the field by helping individuals achieve degrees and credentials in the early childhood/afterschool field while reducing the financial burden for pursuing their goals. Compensation improvements are included in the [T.E.A.C.H. Early Childhood® Vermont Scholarship Project](#) (Increase earnings through the provision of a bonus and/or a raise for recipients who complete their education in a prescribed period of time to support economic viability of staff) and the [Vermont Child Care Apprenticeship Program](#) (regular increases in wages for the apprentice during and upon completion of the 4000-hour training program). This contributes to the stability of the workforce and retention of those working in the field when individuals are helped to achieve degrees and credentials in the early childhood/afterschool field while reducing the financial burden for pursuing their goals.

Financial assistance to attain credentials and post-secondary degrees:

- [The Vermont Student Assistance Corporation](#) offers both degree and non-degree grants for low income Vermonters.
- Through funding from the Child Development Division, [Vermont Association for the Education of Young Children](#) (VtAEYC) issues [tuition grants](#) to eligible staff working in regulated child care programs, to pay for college coursework, fees and recognition bonuses. The priority for these grants is to help individuals obtain credentials and post-secondary degrees and to advance along the Vermont Early Childhood Career Ladder. (These grants were formerly issued by the Child Development Division (CDD))
- Through funding from the Child Development Division, [Vermont Afterschool, Inc.](#) offers two tuition-free college courses for individuals who work in afterschool programs. The courses, which are offered through the Community College of Vermont, are Introduction to Afterschool Education and Care and Afterschool Education & Development of the School-Age Child. These courses can be applied to the Vermont Afterschool Professional Credential.
- The [Vermont T.E.A.C.H. Program](#) and the [Vermont Child Care Apprenticeship Program](#) both offer subsidized coursework to support in-place professionals in achieving college coursework to meet both career goals and licensing requirements.

Effective Date: 09/18/2019

6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service 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)).

VT training and professional development requirements:

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/Licensing/CBCCPP_Regulations_FINAL.pdf - section 7 pages 85-86 and 92-93

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/Licensing/FCCH_Final.pdf - section 7 pages 84-85 and 90

http://dcf.vermont.gov/sites/dcf/files/CDD/Docs/Licensing/AS_Regulations_Final.pdf - section 5 page 23-26

The Vermont training and professional development framework incorporates the knowledge and application of VT's early learning and developmental guidelines, our health and safety standards and social-emotional/behavioral and early childhood mental health intervention models.

Providers create an annual [Individual Professional Development Plan](#) based on the [Early Childhood Competencies and Core Knowledge Areas](#) to show that they reflect upon and plan their professional skills, knowledge, and development. Early Childhood Core Knowledge

Areas include:

- ~ CHILD DEVELOPMENT – Promoting child development and learning
- ~ FAMILIES AND COMMUNITIES - Building Family and Community Relationships
- ~ OBSERVING AND ASSESSING - Observing, Documenting and Assessing to Support Young Children and Families
- ~ HOW WE TEACH - Using Developmentally Effective Approaches
- ~ WHAT WE TEACH - Using Content Knowledge to Build Meaningful Curriculum
- ~ HEALTH, SAFETY, NUTRITION - Ensuring Healthy, Safe Environments and Good Nutrition
- ~ PROFESSIONALISM - Growing as a Professional
- ~ PROGRAM ORGANIZATION - Managing and Administering Programs

The professional development system recognizes training a provider engages in on the knowledge and application of the Vermont early learning and developmental guidelines; our 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). Under its agreement with CDD, NL@CCV provides an array of annual training that includes these specific topics as well as other topics identified by VT's Professional Preparation and Development Committee.

Vermont has considered the elements of the professional development framework throughout the existing [Vermont Career Ladder](#) in order to ensure that individuals progressing along the career ladder have received information on all of the essential components related to these aspects. At Level I, Vermont created the [Fundamentals for Early Childhood Professionals training](#) which the Vermont Early Learning Standards, health and safety standards, and social-emotional/behavioral and early childhood mental health intervention models. Embedded in the training is the training required for an individual to become a Specialized Child Care provider to care for children either in state custody or at risk of coming into state custody or meet other criteria to be in a [Specialized Child Care](#) setting.

The college coursework to support the Vermont Apprenticeship Program is built upon the Vermont Core Competencies, which include early learning and developmental guidelines, health and safety standards and social-emotional/behavioral and early childhood mental health intervention models.

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)).

N/A

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: 10/01/2018

a) with limited English proficiency

The Division facilitates participation in the Child Care Financial Assistance Program in a variety of ways. The application for family members to become Approved Relative Child Care Providers has the information that application can be translated/interpreted on request. That information is published in seven languages - Bosnian, Burmese, French, Nepali, Somali, Spanish, and Swahili. Interpretation services are provided by the division when providers call with questions. And documents are translated upon request. To support participation by child care providers who are regulated - Family Child Care Homes, Center Based Child Care and Preschool Programs, and Afterschool Programs, the providers are flagged in the Division's child care information system, Bright Futures Information System with the preferred language of the provider. Communications with the provider are translated to the preferred language, and providers needing interpretation services are contacted using the interpretation service. Regulated child care providers that do not have a written language are supported either

through the phone interpretation services, or by a visit by a CDD representative and in person interpreter.

b) who have disabilities

The Division's websites that contain Child Care Financial Assistance Program information are Section 508 compliant and are accessible through screen readers and other devices. Outreach materials are written in plain language and at an 8th grade reading level or lower whenever possible. All electronic materials are in file formats that are accessible.

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)).

The CDD works through NL@CCV ([training calendar](#), [NL@CCV 2018 trainings](#)), Vermont Afterschool, Inc ([Professional Development Trainings](#)), Vermont Association for the Education of Young Children ([Annual Conference](#) and [Strengthening Families](#)) and Prevent Child Abuse Vermont ([Training Workshops](#)) to provide training offerings that meet the annual professional development requirements for child care licensing. Some also meet specific training requirements for child care licensing qualifications or for Specialized Child Care training requirements. The array of trainings includes offerings that meet the needs of providers who: work with children of different age groups; work with children with developmental delays and disabilities; etc. In addition, they are intended to provide options for professionals at different levels of experience and/or knowledge with particular topics. For example:

Training specific to **Infants and Toddlers**: [Social-Emotional Development of Infants and Toddlers](#) This training will describe social-emotional development, including self-concept and self-esteem for children in different stages of infancy/toddlerhood. The role of relationships, the environment, and curriculum will be discussed.

Training Specific to **School-Age Children**: [Creating a Learner-Centered Environment](#) Afterschool professionals today need to recognize the importance of fostering a positive,

trusting relationship among individuals in the community. Empowering learners to take ownership for their learning establishes a democratic setting where there is support for a person's talents and needs. As you become a more effective reflective practitioner contemplating your own thoughts and beliefs about learning, you will focus on managing behaviors and developing the self-regulation behaviors of your students.

Training that covers working with children who are **English-language learners**, who have **developmental delays and disabilities** or who are from **different cultural and ethnic backgrounds (which would include Indians and Native Hawaiians-n/a)**: [Basic Specialized Care](#) This training is a requirement for early childhood providers wishing to attain "Basic Specialized Care Provider" status, and offers valuable information for anyone supporting children and families when special needs of the family (or child) or abuse/neglect are involved. Topics include typical child development, the impact of stress and abuse on development, red flags, working with families and the system, as well as mandated reporting responsibilities. Resources for working with children with special needs will also be shared. A pre-requisite to taking Basic Specialized Care course is to complete the online 2.5 hour module: Vermont On-Line Mandated Reporter Training (from Vermont Agency of Human Services and KidSafe Collaborative Inc.)

Effective Date: 10/01/2018

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: 09/18/2019

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).

- Professional development related to homelessness has been identified and access is publicized on the [Child Care Training Requirements](#) page of the NL@CCV website. [Supporting Children and Families Experiencing Homelessness](#) and [Addressing Homelessness: The Role of the Early Childhood Educator](#)
- Strengthening Families trainings that address family stress including homelessness continue to be offered through VtAEYC for 2018 and then has been identified as a required topic for Northern Lights @ CCV to include in their [annual trainings](#) to regulated

child care providers

- Training on trauma-informed practice (including for families experiencing homelessness) has been identified as a required topic for Northern Lights @ CCV to include in their [annual trainings](#) to regulated child care providers.
- [Basic Specialized Care training](#) is required for all child care providers wishing to care for a child in state protective custody or otherwise considered at risk and addresses homelessness broadly.
- One of the Child Care Financial Assistance Program enrollment categories is [Family Support Child Care](#) which means that the family is experiencing significant stress in areas such as shelter, safety, emotional stability, substance abuse, children's behaviors, and parenting issues. When homelessness is identified as a service need, [Specialized Child Care services](#) through CDD Children's Integrated Services begins, which can provide additional supports to the child care provider. For the child care program, this includes the connection with a regional Child Care Coordinator who is able to assist with technical assistance and connecting providers to additional training resources,

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).

The CDD has been working with the Office of Economic Opportunity within DCF and has designed and offered shared training and TA around child trauma directly related to homelessness. The audience for this training includes lead agency staff and designated entities like our child care support agencies who host our child care eligibility and referral socialists. The CDD continues to work with the Agency of Human Services on a plan to end homelessness by 2020 and CDD efforts is in partnership with this statewide plan.

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: 10/01/2018

- 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.

Payroll invoices are monitored weekly to ensure billing integrity. Any issues found results in a phone call, email or visit by the Program Integrity Investigator. In addition, random unannounced visits to providers are conducted to check attendance sheets and provide additional billing training if necessary.

- Other

Describe:

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 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.

[Vermont licensing regulations](#) require center-based program directors to either hire a business manager or obtain coursework related to program management, business practices and legal and financial issues related to operating a sustainable child care program. Support is offered through the following:

[Vermont Early Childhood and Afterschool Program Director Credential](#) (offered through the Northern Lights @ CCV) Coursework related to business practices includes: Program Management, Leadership, Mentoring/Supervision, Human Resources Management, Legal and Financial Issues.

[SharedServicesVT.org](#) -website includes business supports for child care providers including topics related to program administration and business operations, marketing, human resources.

Starting Points Networks - Made up of local groups of early childhood professionals

across 12 regions in Vermont who take initiative through leadership, professional development and peer support to encourage, learn and grow. together. Issues related to business development are often primary topics at Starting Points trainings and monthly network meetings.

The Vermont Small Business Development Center provides no-cost, confidential business advising and low-cost training services to all small businesses and new ventures in Vermont.

b) Check the topics addressed in the state/territory's strategies. Check all that apply.

- Fiscal management
- Budgeting
- Recordkeeping
- Hiring, developing, and retaining qualified staff
- Risk management
- Community relationships
- Marketing and public relations
- Parent-provider communications, including who delivers the training, education, and/or technical assistance
- Other

Describe:

<http://www.vtsbdc.org>/Understanding legal issues related to operating a child care program.

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: 10/01/2018

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 Vermont Early Learning guidelines for children birth through 8](#) (VELS) were approved August 2015. VELS is aligned with and supports the use of developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula and learning environments. The newly revised VELS are aligned with the following:

- Developmentally Appropriate Practices (NAEYC) and Division of Early Childhood (DEC) Recommended Practices;
- The 2015 Federal Office of Head Start's Head Start Early Learning Outcomes Framework, Ages Birth to Five;
- The Common Core State Standards for English Language Arts and Mathematics
- The Next Generation Science Standards,
- The Collaborative for Academic, Social, and Emotional Learning (CASEL)
- Vermont's Grade Level Expectations

b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry.

VELS make explicit the goals for each and every child's learning and development from birth through grade 3. Regardless of whether children are at home, preschool, elementary school, childcare, neighborhood playgroup/event; whether they are typically developing or have diverse abilities and needs; whether they are learning to speak one language or many, the VELS represent common goals for development and learning across the early childhood years. The VELS is a resource tool for adults who are responsible to understand these goals, and provide the opportunities and experiences that allow all children to make progress toward or achieve them, including making adaptations and accommodations for children's unique circumstances.

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

Emotional development

Physical development

Approaches toward learning

Other

Describe:

d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.

The Vermont Agency of Education (AOE) is the lead agency responsible for developing and implementing the Vermont Early Learning Standards (VELS). AOE implements the VELS in consultation with an advisory body that includes representatives from CDD, the Vermont Head Start State Collaboration Office, the Vermont Department of Health, AOE, Head Start, child care, pre-k programs, and higher education institutions. In addition, the VELS is developed and implemented in consultation with several oversight bodies including the BBF State Advisory Council, the BBF Professional Preparation and Development Committee and the Vermont State Board of Education.

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

Vermont's first Early Learning Standards were published in 2003. The first revision to the Vermont Early Learning Standards was completed and approved in 2015. Beginning in 2012, a cross-section of early childhood development and education stakeholders was convened to begin the task of revising the VELS. This groups work was reviewed and approved by the Building Bright Futures, Vermont's State Advisory Council and the Vermont State Board of Education. Using a similar process, in 2018 VELS will be revised to align with updated/current national standards in physical education, science and social studies.

f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards

[Vermont's Early Learning Standards](#) encompass ages birth through grade 3. Vermont has Afterschool Core Competencies that were developed for Afterschool Professionals.

g) Provide the Web link to the state/territory's early learning and developmental guidelines.

<http://vels.education.vermont.gov/standards>

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 VELs is a resource tool for adults who are responsible to understand the common goals for development and learning across the early childhood years and provide the opportunities and experiences that allow all children to make progress toward or achieve them, including making adaptations and accommodations for children's unique circumstances.

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 on these quality improvement investments through CCDF in three ways:

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

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

- Supporting the training and professional development of the child care workforce
- Improving on the development or implementation of early learning and developmental guidelines
- Developing, implementing, or enhancing a tiered quality rating and improvement system for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)

- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

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

The Vermont Child Development Division invests in quality activities based on [Vermont's Early Childhood Framework](#) and its companion document, [Vermont's Early Childhood Action Plan](#), which charts a course of action to help Vermont achieve the Framework's six goals. Building Bright Futures, the state's early childhood advisory council, is the steward of the framework and the plan which is intended to be a living document that is regularly updated through a process managed by Building Bright Futures and refined as new voices and partnerships inform how the work envisioned in this Plan is implemented. [Vermont's Early](#)

[Childhood Framework](#), which was finalized in October 2013, lays out six goals to unify Vermonters in our efforts to ensure the wellbeing of Vermont's young children and their families. [Vermont's Early Childhood Action Plan](#) provides specific strategies to ensure the six goals of the Framework are realized. Both documents reflect a shared responsibility to provide a good start for all Vermont's children and a belief that all Vermonters benefit when our youngest citizens and their families are thriving. In 2013, a nine-month process involving the Governor's office, the Vermont Agencies of Human Services and Education and a diverse early childhood community lead to the development of [Vermont's Early Childhood Framework](#), which includes six goals and twelve guiding principles for individual and collective action aimed at realizing the promise of every child. [Vermont's Early Childhood Action Plan](#) was developed by a statewide committee that was jointly convened by the Governor's Office and Doug Racine, Secretary of the Agency of Human Services. The committee was comprised of representatives from state government, the non-profit sector, Building Bright Futures, Head Start, advocacy organizations, K-3 education, private funders and the business community. The Action Plan reflects input gathered through ten focus sessions leading up to the Governor's Early Childhood Summit (October 2013), eight action planning forums held during the winter of 2013- 2014, online surveys, and multiple conference calls. To bring together public and private partners, families and communities the Early Childhood Action Plan has devised a [structure and implementation cycle](#) coordinated by the BBF Early Childhood Action Plan Director. CDD engages in BBF Committees responsible for action plan implementation and we align our quality spending with the implementation plans of these committees.

Effective Date: 09/18/2019

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.

[The Vermont Early Childhood Action Plan](#)

EARLY CHILDHOOD FRAMEWORK GOALS and EARLY CHILDHOOD ACTION PLAN RESULTS

Goal 1: A Healthy Start for All Children: All children have a healthy start.

Goal 2: Families and Communities Play a Leading Role: Families and communities play a leading role in children's well-being.

Goal 3: High-Quality Opportunities for All Children: All children and families have access to high-quality opportunities that meet their needs.

Goal 4: Invest Now for Our Future: Vermont invests in prevention and plans for the future success of children.

Goal 5: Know We're Making a Difference: Data and accountability drive progress in early childhood outcomes.

Goal 6: An Innovative and Connected System: The early childhood system is innovative and integrated across sectors in order to better serve children and families.

Effective Date: 09/18/2019

7.2 Use of Quality Funds

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

Effective Date: 03/18/2020

- 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:

State General Funds, MCO, ELCG/RTT (ends Dec 2018)TANF, State Professional Development Grant (SPDG)

- 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:

ELCG/RTT (ends Dec 2018); State Education Fund)

- Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

ELCG/RTT (ends Dec 2018)

- 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:

State General Funds, TANF, ELCG/RTT (ends dec 2018)TANF, State Professional Development Grant (SPDG),

- 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:

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:

State General Funds, TANF

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:

Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

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

CCDF funds

Other funds

Describe:

During the COVID-19 child care closure period, Vermont operates a child care stabilization and essential persons grant program for regulated child care programs.

Child Care Stabilization:

This program is intended to support child care programs financially when children cannot attend their programs due to the COVID closure. This pays up to 50% of tuition costs (or co-payment for Child Care Financial Assistance) for infants, toddlers, and preschoolers. *It does not pay for school age children.*

Essential Persons Incentives and Tuition Payments

This program is a program to help parents that are essential persons pay for child care during the crisis, and provide an incentive to the child care program to serve these children.

Incentives - child care programs will receive \$125 per week per child that is an essential persons' child. This amount is not for tuition and can be used by the program for other needs.

Infant, toddler, and preschool tuition payments for essential persons: If an essential person needed to use a new child care program due to their program closing, the state will pay 100% of the tuition up to \$360 per week.

School age tuition payments for essential persons: This program pays for a school age child of an essential person. It pays up to \$200 tuition per week for each school age child. The provider cannot charge the family any difference over the \$200 per week while this program is in effect.

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: 10/01/2018

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:

The state uses CCDF to fund [Northern Lights at CCV](#) (**NL@CCV**), the hub and connector of the professional development system in Vermont for early childhood and afterschool professionals. Working with key partners, [NL@CCV](#) supports and enhances a unified system of professional development for early childhood and afterschool practitioners, including offering annual trainings that meet the annual professional development requirements for child care licensing. Some also meet specific training requirements for child care licensing qualifications or for Specialized Child Care training requirements. NL@CCV's [List of Annual Trainings](#) includes: Trauma Informed Practice; Social-Emotional Development of Infants and Toddlers; Preschool STEAM; Fundamentals for Early Childhood Professionals; There are several state and local professional development providers who offer a variety of training on these topics that are scientifically-based, developmentally appropriate and age-appropriate. Some of the partners in this effort include the Vermont Association for the Education of Young Children, the Vermont Department of Health, the Vermont Agency of Education, Prevent Child Abuse Vermont, the Vermont Child Care Industry and Careers Council, Vermont Afterschool, and Vermont Birth to Five.

- 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:

The state uses CCDF to fund [Northern Lights at CCV](#) (NL@CCV), the hub and

connector of the professional development system in Vermont for early childhood and afterschool professionals. Working with key partners, [NL@CCV](#) supports and enhances a unified system of professional development for early childhood and afterschool practitioners, including offering annual trainings that meet the annual professional development requirements for child care licensing. Some also meet specific training requirements for child care licensing qualifications or for Specialized Child Care training requirements. NL@CCV's [List of Annual Trainings](#) includes: Trauma Informed Practice; Social-Emotional Development of Infants and Toddlers; Fundamentals for Early Childhood Professionals; Basic Specialized Care. Training on this topic has been offered across the state through the Center for the Study of Social Emotional Foundations of Early Learning (CSEFEL) curriculum and several individuals have been trained to offer this curriculum. The Vermont Agency of Education has received a federal State Professional Development Grant (SPDG) to offer Early Multi-Tiered Systems of Support which utilizes a multi-tiered framework of universal promotion, prevention and intervention in early literacy, numeracy and social emotional development. Early MTSS incorporates the Foundations of Early Learning pyramid model developed by the Center on the Social and Emotional Foundations for Early Learning (CSEFEL)

- [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:

The state uses CCDF to fund [Northern Lights at CCV](#) ([NL@CCV](#)), the hub and connector of the professional development system in Vermont for early childhood and afterschool professionals. Working with key partners, [NL@CCV](#) supports and enhances a unified system of professional development for early childhood and afterschool practitioners, including offering annual trainings that meet the annual professional development requirements for child care licensing. Some also meet specific training requirements for child care licensing qualifications or for Specialized Child Care training requirements. NL@CCV's [List of Annual Trainings](#) includes: Trauma Informed Practice; Fundamentals for Early Childhood Professionals; Basic Specialized Care and a Strengthening Families introduction. Vermont has invested in promoting the Strengthening Families™ Framework to support positive parenting relationships and skills by offering trainings in this approach in all areas of the state for

a wide range of professionals working with families in a variety of roles. VT uses our ELC-RTT grant to offer the Strengthening Families Toolbox (17hr) training and supports a Community of Practice for childcare programs receiving Strengthening Families Grants funded through Medicaid investment dollars under our global commitment waiver.

- [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:

The state uses CCDF to fund [Northern Lights at CCV](#) (NL@CCV), the hub and connector of the professional development system in Vermont for early childhood and afterschool professionals. Working with key partners, [NL@CCV](#) supports and enhances a unified system of professional development for early childhood and afterschool practitioners, including offering annual trainings that meet the annual professional development requirements for child care licensing. Some also meet specific training requirements for child care licensing qualifications or for Specialized Child Care training requirements. CCV @ Northern Lights (under the CDD contract) ensures pedagogical training is aligned with [The Vermont Early Learning guidelines](#) for children birth through 8 (VELS). VELS is aligned with and supports the use of developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula and learning environments. NL@CCV's [List of Annual Trainings](#) includes: Preschool STEAM; Fundamentals for Early Childhood Professionals. The Vermont Agency of Education (AOE) supports professional development opportunities The [Vermont Early Childhood Educator Summer Institute at Castleton State College](#) is an annual event that was seeded with ELCG/RTT and has sustained. All courses are aligned with the Vermont Early Learning Standards (VELS) and the Vermont Guiding Principles for Full Participation of Each and Every Child. The Vermont Agency of Education has received a federal State Professional Development Grant (SPDG) to offer Early Multi-Tiered Systems of Support which utilizes a multi-tiered framework of universal promotion, prevention and intervention in early literacy, numeracy and social emotional development.

- 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:

Vermont has invested in promoting the Strengthening Families™ Framework to support positive parenting relationships and skills by offering trainings in this approach in all areas of the state for a wide range of professionals working with families in a variety of roles. VT uses our ELC-RTT grant to offer the Strengthening Families Toolbox (17hr) training and supports a Community of Practice for childcare programs receiving Strengthening Families Grants funded through Medicaid investment dollars under our global commitment waiver. These practices support development of five protective factors in families including parental resilience, social connectedness and concrete support in times of need. Providers implementing these practices understand how to connect families with the community supports that promote stability and strength. These practices, which promote the well-being of the child in the context of the well-being of the family is a critical element of comprehensive services.

- Using data to guide program evaluation to ensure continuous improvement

Describe:

Vermont has formally adopted Teaching Strategies GOLD as the approved and required child observation and assessment tool to be used in STARS (Vermont's QRIS) and in publicly funded prek programs. Training on the appropriate use of this tool and how data from its use can and should be used to continuously improve the program and individualize instruction for children is offered through AOE.

- Caring for children of families in geographic areas with significant concentrations of poverty and unemployment

Describe:

- Caring for and supporting the development of children with disabilities and developmental delays

Describe:

Through Children's Integrated Services (CIS), Vermont provides services to children with developmental delays eligible for Part C services through the use of contracted

providers within each community. These Early Intervention services include service coordination, developmental education, physical therapy, occupational therapy, speech therapy, nutrition or nursing supports. Services provided under Part C are delivered within the child's natural setting as identified with the family. This may be the child's home or even child care. Child care providers are included as members of the child's team whenever applicable and with the permission of the child's parent/guardian(s). Additionally, CIS provides consultation to families and child care providers to support children's inclusion in early childhood development programs (such as child care programs). These consultation services may be from a person specializing in Early Intervention, Early Childhood and Family Mental Health, Nursing or Specialized Child Care services. Early Childhood Education (child care) providers in Vermont may seek to receive specialized child care provider designation by taking additional advanced level trainings, provided by child care resource and referral agencies, and maintaining a high quality rating and clear regulatory history with the State of Vermont Child Development Division.

CIS also has a Professional Development Committee that actively meets to plan professional development for those working with children through CIS. Typically, there is a conference or institute every year and Community of Practice calls scheduled on a monthly basis. These are often available to child care providers in collaboration with their CIS Child Care Coordinator.

[Supporting the positive development of school-age children](#)

[Describe:](#)

[Vermont Afterschool, Inc.](#) has been a key partner in supporting these activities and receives funding from the CDD as well as the Agency of Education and other entities to provide support to individuals and organizations in providing quality afterschool, summer, and expanded learning experiences so that Vermont's children and youth have the opportunities, skills, and resources they need to become healthy, productive members of society. VA staff work with afterschool programs, advocates, and partners throughout the state to strengthen out-of-school time programming for children and youth in Vermont, to expand the number and types of programs being offered, and to improve access for all children and youth in the state. Specific services provided include training and technical assistance to afterschool programs via the Individualized System of Support for Afterschool Programs (ISS-AP) model, access to college courses, Afterschool Essentials training (a 45-hour introductory-level training),

implementation of the Vermont Afterschool Professional Credential, STEM and other content-specific training, an annual conference and more.

Other

Describe:

b) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply

Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling

Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities

Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education

Other

Describe:

7.3.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

The state measures the number of individuals with Vermont level certificates or credentials and/or degrees, and looks for an increase in this information. The number of individuals with state certificates or credentials (duplicate count) increased from 786 in 2013 to 1823 in 2017.

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: 10/01/2018

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.

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.

[STARS \(STep Ahead Recognition System\)](#) is Vermont's quality recognition system for child care, preschool, and afterschool programs. STARS is administered statewide through an agreement between CDD and the Mary Johnson Children's Center (MJCC). The STARS oversight committee advises MJCC and CDD on the administration of the program and includes representatives from stakeholder groups including child care providers.

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.

7.4.2 QRIS participation

Effective Date: 09/01/2019

a) Are providers required to participate in the QRIS?

Participation is voluntary

Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).

Participation is required for all providers.

b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS? Check all that apply

Licensed child care centers

Licensed family child care homes

License-exempt providers

Early Head Start programs

Head Start programs

State prekindergarten or preschool programs

Local district-supported prekindergarten programs

Programs serving infants and toddlers

Programs serving school-age children

Faith-based settings

Tribally operated programs

Other

Describe:

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?

Effective Date: 10/01/2018

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:

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

Effective Date: 10/01/2018

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

Describe:

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

Effective Date: 10/01/2018

- No
- Yes. If yes, check all that apply
 - One time grants, awards, or bonuses.
 - Ongoing or periodic quality stipends
 - Higher subsidy payments
 - Training or technical assistance related to QRIS.
 - Coaching/mentoring.
 - Scholarships, bonuses, or increased compensation for degrees/certificates
 - Materials and supplies
 - Priority access for other grants or programs
 - Tax credits (providers or parents)
 - Payment of fees (e.g., licensing, accreditation)

Other

Describe:

7.4.6 Describe the measurable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

The state measures the increase in percent of programs participating at 3, 4, or 5 star level of QRIS, and the capacity at the 3, 4, and 5 star level. The percentage of programs achieving 3 or more STARS has increased from 21% in state fiscal year 2010 (July 1, 2009 to June 30, 2010) to 59% in state fiscal year 2018 (July 1, 2017 to June 30, 2018). The percentage of regulated child care capacity has increased from 45% in state fiscal year 2014 (July 1, 2013 to June 30, 2014) to 65% in state fiscal year 2018 (July 1, 2017 to June 30, 2018).

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.

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: 09/18/2019

- 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:

[Vermont Parent Child Centers](#) - Parent Child Centers (PCC's) were established in statute in 1988 and funded initially with general funds. The 15 PCC's are community-based organizations located across Vermont. PCC's serve young children and their families in their designated geographic regions. PCC's implement practices aligned with the National Center for the Study of Social Policy (CSSP). These practices are designed to strengthen families and protect children from abuse or neglect. The Department for Children and Families also supports the CSSP framework for strengthening families.

Early Head Start - The Early Head Start Program provides early, continuous, intensive, and comprehensive child development and family support services to low-income infants and toddlers and their families, and pregnant women and their families. The Early Head Start Program goals are:

- Providing safe and developmentally enriching caregiving which promotes the physical, cognitive, social and emotional development of infants and toddlers, and prepares them for future growth and development;
- Supporting parents, both mothers and fathers, in their role as primary caregivers and teachers of their children, and families in meeting personal goals and achieving self-sufficiency across a wide variety of domains;
- Mobilizing communities to provide the resources and environment necessary to ensure a comprehensive, integrated array of services and support for families; Ensuring the provision of high quality responsive services to family through the development of trained and caring staff.

[Seven Head Start programs](#) have centers and sites located throughout the State that offer services designed to meet family needs. (see 6.1.1 for more information) Vermont's four Early Head Start programs have centers and sites in every county with the exception of Bennington, Rutland, and Windsor Counties.

Early Head Start-Child Care Partnerships - The goals of the Early Head Start-Child Care Partnership grant are to increase the supply of high-quality Early Head Start services to infants, toddlers, and their low-income families, raise the quality of center-based child care and family child care to that of Early Head Start, and increase the compensation of child care and family child care staff to that of Early Head Start staff. Of the four community-based organizations running Early Head Start programs, two receive federal Early Head Start-Child Care Partnership Grants from the Office of Head Start to run Early Head Start-Child Care Partnership programs. Capstone Community Action and Champlain Valley Office of Economic Opportunity each received a federal Early Head Start - Child Care Partnership grant in 2015 to partner with high quality child care centers and family child care providers serving infants and toddlers from low-income families to developing and implementing innovative and collaborative services. Capstone Community Action's Early Head Start-Child Care Partnership program serves infant and toddlers and their low-income families in Lamoille, Orange, Washington counties, and Champlain Valley Office of Economic Opportunity's Early Head Start-Child Care Partnership program serve infants, toddlers and their low-income families throughout Franklin, Grand Isle, Chittenden and Addison counties (see 6.1.1 for more information)

[Establishing or expanding the operation of community- or neighborhood-based family child care networks.](#)

[Describe:](#)

[Starting Points Networks](#) are made up of local groups of early childhood professionals across 12 regions in Vermont who take initiative through leadership, professional development and peer support to encourage, learn and grow together.

[Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers](#)

[Describe:](#)

The state uses CCDF to fund [Northern Lights at CCV](#) (NL@CCV), the hub and connector of the professional development system in Vermont for early childhood and afterschool professionals. Working with key partners, [NL@CCV](#) supports and enhances a unified system of professional development for early childhood and afterschool practitioners, including offering annual trainings that meet the annual professional development

requirements for child care licensing. Some also meet specific training requirements for child care licensing qualifications or for Specialized Child Care training requirements. NL@CCV's 2018 [List of Annual Trainings](#) and [Northern Lights Training Guide 2019-2020](#) includes: Trauma Informed Practice; Social-Emotional Development of Infants and Toddlers; Fundamentals for Early Childhood Professionals; There are several state and local professional development providers who offer a variety of training on these topics that are scientifically-based, developmentally appropriate and age-appropriate. Some of the partners in this effort include the Vermont Association for the Education of Young Children, the Vermont Department of Health, the Vermont Agency of Education, Prevent Child Abuse Vermont, the Vermont Child Care Industry and Careers Council, Vermont Afterschool, and Vermont Birth to Five.

- [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:](#)

- [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 Child Development Division hosts the Part C Administrator in the Children's Integrated Services unit. Part C support services are connected with Specialized Child Care Coordinators housed at community agencies across the state to provide supports and services to meet each child's unique needs and the needs of their family in their home and community. Payment for services comes from a variety of sources, including insurance, Medicaid, participating agencies, local schools, family cost share, etc. By assisting in the coordination of locally available services, Children's Integrated Services is working to ensure that Vermont's young children and their families have access to the widest possible array of early intervention services.

- [Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments](#)

[Describe:](#)

- Developing infant and toddler components within the state/territory's child care licensing regulations

Describe:

Regulations specific to infants and toddlers include:

- General ratio requirements,
- Increased supervision requirements, include naptime,
- safe sleep practices,
- food, nutrition and feeding requirements,
- diapering, toilet learning/training,
- rules around gates and stairways,
- swimming ratios,
- car seat safety,
- ratio changes for non-ambulatory children transported in vehicles,
- appropriate curriculum requirements specifically for infants and toddlers

- Developing infant and toddler components within the early learning and developmental guidelines

Describe:

[Vermont Early Learning Standards](#). The domains and Standards are presented in nine age categories; some of which overlap intentionally in an effort to demonstrate the variation that is typical of early childhood development. The age breakdowns include chronological age as well as conventional terminology. There are three sections for infants and toddlers as follows: Infants: Birth to 12 months Younger Toddlers: 9-18 months Older Toddlers: 18-36 months.

- 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:

- The CDD has a webpage on [child care for parents](#) that includes information about finding and paying for childcare. Each resource has information specific to Infants and Toddlers. A toll-free number is provided for supporting parents in recognizing and finding high-quality infant and toddler care.
- This information is available through the [12 local Community Child Care Support Agencies](#) when accessing referral services for child care.
- [Help Me Grow Vermont](#) provides a variety of human services supports to Vermonters including child development information. Families can access information by

speaking with a HMG Vermont Child development specialist (calling 211) or through the [Help Me Grow website](#).

- The Vermont Early Learning Standards website includes a [Family resources section](#) that supports families in understanding and supporting their child's development.

- 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:

- Coordinating with child care health consultants.

Describe:

- Coordinating with mental health consultants.

Describe:

- Other

Describe:

7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures

The state measures the total desired capacity for infants and toddlers in 3, 4 and 5 star programs in the state. The desired capacity has increased from 3,683 slots in 2015 to 4,321 in 2017. This data is tracked by state, county, and Agency of Human Services districts. The information is available to the public here:

http://humanservices.vermont.gov/ahs_community-profiles/

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.

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

N/A

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:

CDD Licensers provide technical assistance to providers on the regulations through a variety of means including but not limited to webinars and individual support.

The State provides professional development services to meet the regulatory requirements through our grant agreement with Northern Lights @ Community College of Vermont. This includes the core basic Fundamentals Course for newly hired staff and others. The State contracted with Better Kid Care to design an online Orientation that meets the requirements

of our Regulations. The VT Orientation will be offered at no cost through 2018 and will remain available at low cost thereafter.

The State will be helping individuals and programs with the cost of fingerprinting as the new regulations become effective. As the new licensing regulations become effective, more resources are likely needed to help with costs related to water testing, carbon monoxide and smoke alarms, etc.

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

- 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

The child care regulations were revised and effective in September 2016. Since that time child care licensing has focused on providing technical assistance to regulated child care programs in learning the new regulations. The state measures what the top violations are that are cited each fiscal year, and provides technical assistance related to those regulations.

Technical assistance is provided in a variety of ways including information in the guidance manuals, licensing newsletter and visits. In state fiscal year 2017 the top violations cited at Afterschool Child Care Programs were rule 10.9, 5.11, and 4.4; in state fiscal year 2018 the top violations cited were for rule 10.9 and 4.4. Rule 5.11 was no longer one of the top cited. In Center Based Child Care and Preschool Programs the top violations cited in FY17 and FY18 were the same, rule 3.4.3 and 3.7.2.2. In Family Child Care Homes the top violations were similar, with rules 3.3.6.1, 3.3.3, 5.10.1.2.5 were all in the top violations cited in both fiscal years. It is anticipated that with the technical assistance and information provided in SFY19 to all program types the number of violations cited on these rules will be less.

Effective Date: 10/01/2018

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

7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services 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

The state measures the quality of child care programs in child care centers and family child care homes using the state's QRIS, called STARS. Embedded in the STARS process is several tools child care programs can use to achieve points, including Environmental Rating Scales and the Strengthening Families Self-Assessment.

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

The state measures the increase in percent of programs participating at 3, 4, or 5 star level of QRIS, and the capacity at the 3, 4, and 5 star level. The percentage of programs achieving 3 or more STARS has increased from 21% in state fiscal year 2010 (July 1, 2009 to June 30, 2010) to 59% in state fiscal year 2018 (July 1, 2017 to June 30, 2018). The percentage of regulated child care capacity has increased from 45% in state fiscal year 2014 (July 1, 2013 to June 30, 2014) to 65% in state fiscal year 2018 (July 1, 2017 to June 30, 2018).

Effective Date: 10/01/2018

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

The State funds accreditation and report fees for the National Association for the Education of Young Children, the National Association of Family Child Care, Council on Accreditation, and National Early Childhood Program Accreditation. In addition, programs receive bonuses for achieving these accreditations.

- 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

- Focused on child care centers

Describe:

- Focused on family child care homes

Describe:

- 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

The state measures the number of regulated child care programs and family child care homes that are nationally accredited. The number of nationally accredited programs has decreased from 81 programs in 2012 to 60 programs in 2017.

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

The STARS program was developed through a collaborative process with other state entities, private partners and child care programs. The STARS work is overseen by an Oversight Committee that is made up of stakeholders including providers. The Oversight Committee continually uses best practices, research and feedback from the field to determine how to improve STARS.

Effective Date: 10/01/2018

7.10.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

The state measures the increase in percent of programs participating at 3, 4, or 5 star level of QRIS, and the capacity at the 3, 4, and 5 star level. The percentage of programs achieving 3 or more STARS has increased from 21% in state fiscal year 2010 (July 1, 2009 to June 30, 2010) to 59% in state fiscal year 2018 (July 1, 2017 to June 30, 2018). The percentage of regulated child care capacity has increased from 45% in state fiscal year 2014 (July 1, 2013 to June 30, 2014) to 65% in state fiscal year 2018 (July 1, 2017 to June 30, 2018).

Effective Date: 10/01/2018

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)).

CCDF quality funds are not used to develop, maintain or implement early learning and development guidelines.

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:

During the COVID-19 response period 3/18/2020-5/31/2020, Vermont operates a child care stabilization and essential persons grant program for regulated child care programs.

Effective Date: 03/18/2020

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:

Effective Date: 10/01/2018

- Train on policy manual

Describe:

Eligibility for Child Care Financial Assistance occurs at 12 regional community child care support agencies. Each community agency has on site a Child Care Financial Assistance policy and procedure binder. When an Eligibility Specialist is hired by an agency they receive one-on-one training by the State of Vermont Grant Monitors on the policy binder and the use of BFIS to determine eligibility. To ensure program integrity all new staff eligibility determinations are monitored for a period of 3-6 months.

Train on policy change notices

Describe:

Policy change notices are distributed to each eligibility specialist at the local community agency. A conference call or regional meeting is then set up with all agencies to discuss the policy change and answers/clarify any questions the specialist may have. In addition, the State Grant Monitor follows up to ensure that the policy is utilized correctly during the determination process.

Ongoing monitoring and assessment of policy implementation

Describe:

The Child Care Financial Assistance Grant Monitors visit each community based resource and referral agency twice monthly. They monitor the processing of case files to ensure new requirements are being met. Case file audits are conducted on 10-15 files per agency per month to ensure eligibility policies and procedures are implemented correctly.

Other

Describe:

8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices 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: 10/01/2018

Verifying and processing billing records to ensure timely payments to providers

Describe:

Providers submit attendance in two-week intervals call service periods. The invoice may be submitted immediately after the end of the service period. Payments are processed every week to pick up any late payments submitted by providers. Invoices submitted each week by Wednesday at noon are processed on Thursday with checks issued on Friday. Each provider payment goes through a two-step approval process. During this process 10-15% of the total number of invoices submitted receive a secondary screening of authorized child care hours versus attendance hours submitted. Providers are contacted if the hours, coded days or payment amount does not look accurate or if the provider submitted for the incorrect service period.

Fiscal oversight of grants and contracts

Describe:

Invoices are submitted on a quarterly basis and reviewed for expenditures prior to approval. Budget to actuals are verified and grantees must produce source documents supporting the use of funds upon request.

Tracking systems to ensure reasonable and allowable costs

Describe:

CDD uses a web-based, centralized integrated data system that includes a rules engine for the determination of eligibility for CCFAP. This use of an automated attendance reporting and payment system (BFIS) simplifies attendance reporting and significantly reduces time between provider reporting and payment.

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: 10/01/2018

Conduct a risk assessment of policies and procedures

Describe:

Each year, all grantees undergo a risk assessment prior to authorization of a new grant. The assessment includes a review of performance measure compliance. These performance measures include improper payments percentages and eligibility determination requirements. Funds accountability, and agency audit practices are also assessed.

Establish checks and balances to ensure program integrity

Describe:

Use supervisory reviews to ensure accuracy in eligibility determination

Describe:

The Community Child Care Support Agencies (CCCSA) processes are monitored through the following processes:

- Performance based agreements specifying the quality and accuracy of eligibility determination activities required by the CDD. Data is pulled from case reviews and BFIS to determine if performance measures are met;
- Regular on-site monitoring to ensure compliance with regulations and quality assurance including individual case reviews by CDD CCFAP Grant Monitors;
- Regular on-site technical assistance from CDD CCFAP Grant Monitors

Other

Describe:

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.

Effective Date: 10/01/2018

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

A data bridge between the CDD Bright Futures database and the Economic Services database provides income information to BFIS daily. Eligibility Specialist can access this information to verify information provided by the client applying for Child Care Financial Assistance. If a discrepancy is noted, the information is sent to the Program Integrity Investigator for further processing. If fraud is found, the client is removed from subsidy and if necessary recoupment of funds is initiated.

- Run system reports that flag errors (include types).

Describe:

BFIS generates regular reports related to enrollment of subsidized children at or above licensed capacity, children with multiple providers, and providers with consistently high subsidy payments. If issues are found, the appropriate CDD unit is notified and corrective action is taken. These actions may include licensing sanctions, change in payment certificates, recoupment of funds, or additional training for staff or child care providers.

- Review enrollment documents and attendance or billing records

Describe:

The Child Care Financial Assistance Grant Monitors visit each community agency twice monthly. They review subsidy case files to ensure all required eligibility documents are present. Audits are conducted on 10-15 files per agency per month with an emphasis placed on eligibility percentage, authorized child care hours and attendance hours of child.

Conduct supervisory staff reviews or quality assurance reviews.

Describe:

Audit provider records.

Describe:

During the payroll process 10-15% of the total number of invoices submitted receive a secondary screening of authorized child care hours versus attendance hours submitted. Providers are contacted if the hours, coded days or payment amount does not look accurate.

Train staff on policy and/or audits.

Describe:

All CDD Child Care Financial Assistance Program staff are trained on eligibility policies and procedures. During this training, Identification of fraud and potential program violations is reviewed. In addition, each CCFAP staff member is actively involved with the state and federal audit process.

Other

Describe:

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:

Run system reports that flag errors (include types).

Describe:

Eligibility, enrollment, attendance and payment data is aggregated into program reports and regularly reviewed to detect any trends warranting further inquiry or investigation One FTE Program Integrity Investigator dedicated to the CCFAP runs

audits on these reports to determine if administrative errors have occurred.

[Review enrollment documents and attendance or billing records](#)

Describe:

The Child Care Financial Assistance Grant Monitors visit each community agency twice monthly. They review subsidy case files to ensure all required eligibility documents are present. Audits are conducted on 10-15 files per agency per month with an emphasis placed on eligibility percentage, authorized child care hours and attendance hours of child.

[Conduct supervisory staff reviews or quality assurance reviews.](#)

Describe:

[Audit provider records.](#)

Describe:

During the payroll process 10-15% of the total number of invoices submitted receive a secondary screening of authorized child care hours versus attendance hours submitted. Providers are contacted if the hours, coded days or payment amount does not look accurate or if the provider submitted for the incorrect service period.

[Train staff on policy and/or audits.](#)

Describe:

All CDD Child Care Financial Assistance Program staff are trained on eligibility policies and procedures. During this training, Identification of fraud and potential program violations is reviewed. In addition, each CCFAP staff member is actively involved with the state and federal audit.

[Other](#)

Describe:

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:

A data bridge between the CDD Bright Futures database and the Economic Services database provides income information to BFIS daily. Eligibility Specialist can access this information to verify information provided by the client applying for Child Care Financial Assistance. The State Grant Monitors also utilize this information when conducted on-site case reviews to determine the accuracy of the eligibility determination.

- Run system reports that flag errors (include types).

Describe:

- Review enrollment documents and attendance or billing records

Describe:

During a case review, the CDD Grant Monitor compares enrollment documents to the child care provider's BFIS attendance invoice. If discrepancies are found, the eligibility specialist is notified and the case is flagged for correction. A secondary review is scheduled to ensure that the error has been resolved. Additional training is provided to the eligibility specialist if on-going errors are noted.

- Conduct supervisory staff reviews or quality assurance reviews.

Describe:

- Audit provider records.

Describe:

- Train staff on policy and/or audits.

Describe:

All Child Care Financial Assistance eligibility specialists are trained on subsidy policies and procedures. During this training, identification of fraud and potential program violations is reviewed. In addition, the Child Care Benefits Administrator meets annually with the 12 community agencies to review the results of State or Federal

audits and to make recommendations for additional training if needed.

Other

Describe:

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: 10/01/2018

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:

\$1.00

Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

Recover through repayment plans.

Describe:

In cases of suspected intentional program violation by a subsidy client or child care provider, the case is referred to the Program Integrity Investigator in the CCFAP Unit. If fraud is committed by a client, they are excluded from further participation in the CCFAP and a payment plan is established to recover overpayments. This may include tax intercepts. The Attorney General's office makes decisions on whether to accept these cases for prosecution. If fraud is committed by a child care provider, a recoupment plan set up to deduct money from future invoices submitted by the provider.

Reduce payments in subsequent months.

Describe:

Recover through state/territory tax intercepts.

Describe:

Tax intercepts will be utilized when a client refuses to set up a payment plan with CDD. If a child care provider is no longer in operation and repayment has stopped, a tax intercept will be initiated.

Recover through other means.

Describe:

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

One program integrity investigator, assigned to the CCFAP Unit, is specifically educated to CCFAP improper payments. The Child Care Benefits Administrator assigns cases, where fraud is suspected, to this individual and works closely with them on ensuing investigation and recovery.

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:

\$1.00

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

- Recover through repayment plans.

Describe:

In cases of unintentional program violation by a child care provider, the case is referred to the Program Integrity Investigator in the CCFAP Unit. If the improper payment is confirmed and the billing window is still open, an adjustment is done to the original invoice. If the billing window is closed, a repayment plan is set up with the provider. In cases of unintentional program violation by a client, the Eligibility Specialist and State Grant Monitor meets with the parent to verify the eligibility information. If an improper payment occurred, a repayment plan is established with the client to recover the overpayment.

- Reduce payments in subsequent months.

Describe:

- Recover through state/territory tax intercepts.

Describe:

Tax intercepts will be utilized when a client refuses to set up a payment plan with CDD. If a child care provider is no longer in operation and repayment has stopped, a tax intercept will be initiated

- Recover through other means.

Describe:

- Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

One program integrity investigator, assigned to the CCFAP Unit, is specifically educated to CCFAP improper payments. The CCFAP manager assigns cases, where UPV is suspected, to this individual and works closely with them on ensuing investigation and repayment plan.

Other

Describe:

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

Describe:

Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

Recover through repayment plans.

Establish a unit to investigate and collect improper payments.

Reduce payments in subsequent months.

Describe:

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:

Other

Describe:

No recoupment will occur if the improper payment is due to an agency eligibility specialist error. Additional training is provided by the State Grant Monitors to ensure that the eligibility specialist understands how/why the error occurred and what can be done to prevent any further eligibility determination errors. The Child Care Financial Assistance client is notified that an error occurred in their favor and eligibility will be redetermined to correct the error. The client is given 30 day notice of this change in eligibility.

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: 10/01/2018

- Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.**

Describe:

In cases of suspected intentional program violation, the case is referred to the Program Integrity Investigator in the CCFAP Unit. If fraud is substantiated, the Child Care Financial Assistance client is excluded from further participation in the CCFAP and a payment plan is established to recover overpayments. This may include tax or other income intercepts. Child Care Financial Assistance clients may appeal to the DCF Commissioner and the Vermont Human Services Board if they feel they have been unfairly excluded from participation in the CCFAP. This process includes a review and decision by a designee of the Commissioner in which the client has an opportunity to present their perspective on the grounds for exclusion. If the client is not satisfied with the Commissioner's Review decision they can continue their appeal to an impartial Human Services Board.

- Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified.**

Describe:

In cases of suspected intentional program violation, the case is referred to the Program

Integrity Investigator in the CCFAP Unit. If fraud is substantiated, the child care provider may be excluded from further participation in the CCFAP and a payment plan is established to recover overpayments. This may include tax or other income intercepts. Child Care providers may appeal to the DCF Commissioner and the Vermont Human Services Board if they feel they have been unfairly excluded from participation in the program. This process includes a review and decision by a designee of the Commissioner in which the provider has an opportunity to present their perspective on the grounds for exclusion. If the provider is not satisfied with the Commissioner's Review decision they can continue their appeal to an impartial Human Services Board.

[Prosecute criminally.](#)

[Describe:](#)

The Attorney General's office makes decisions on whether to accept these cases for prosecution.

[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

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.

Vermont is asking for additional time for existing staff to comply with the new requirement now that they have the Fingerprint Authorization Certificate needed to submit to fingerprinting. Additional time is also being requested to implement this check for family child care home adult, household members, who do not assist with child care services and are not left alone with children.


Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

It will allow pre-existing staff and family child care home providers to continue within their

current roles and businesses which allows sustainability of our child care capacity.

[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.](#)

Vermont has been conducting non-fingerprint supported in-state criminal registry or repository checks for years. Of the thousands of background checks Vermont has conducted for in-state criminal convictions, this process has yielded the same answers as a fingerprint supported check.

 **Appendix A.2: In-state sex offender registry requirements for existing staff. (See related question at 5.4.2 (b))**

[Describe the provision from which the state/territory seeks relief.](#)

Vermont is asking for additional time to implement the in-state sex offender registry check for existing household members, who are 18 years of age or older, and existing staff for all licensed and regulated programs.

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

It will allow pre-existing staff, family child care home providers, and family child care home household members to continue within their current roles, to provide continuity of residency, and for businesses to be able to serve their enrolled children and families which allows sustainability of our child care capacity.

[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.](#)

A check of the in-state sex offender registry check is an added assurance check.

Typically, this matches the criminal conviction record which is checked by a Licensing Technician and is checked by the Vermont Crime Information Center (VCIC) when they process the fingerprint check. These checks have already been implemented for existing staff and for existing family child care home household members. Licensing Technicians have completed 100% of the in-state criminal conviction checks for all staff and for all family child care home household members who are 18 years of age or older. While VCIC has processed 66% of the fingerprint checks for in-state criminal convictions, we haven't had one case in which the results were different than Licensing Technicians' findings. In addition, VCIC has processed 66% of the fingerprint checks against the FBI

fingerprint check and NSOR. This has assisted with ensuring that Vermont has identified out of state sex offenders required to report to Vermont's sex offender registry. This is a more accurate search. Out of the thousands of clearances processed, Vermont has not identified anyone prohibited as a sex offender through the fingerprint process.

 **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.](#)


Vermont is asking for additional time for existing staff to comply with the new requirement now that they have the Fingerprint Authorization Certificate needed to submit to fingerprinting. Additional time is also being requested to implement this check for family child care home adult, household members, who do not assist with child care services and are not left alone with children.

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

It will allow pre-existing staff and family child care home providers to continue within their current roles and businesses which allows sustainability of our child care capacity.

[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.](#)

Vermont has been conducting background clearances for years. Of the thousands of background checks we have conducted, we have received less than 4 that have had unidentified out-of-state convictions.

 **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.](#)

Vermont is asking for additional time to determine the course of action for family child care home adult, household members, who do not assist with child care services and are not left alone with children.

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

It will allow family child care home providers to continue their businesses which allows sustainability of our child care capacity.

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.

Children's safety is not compromised by granting this waiver because a child care staff member is present and providing direct supervision with children ensuring their protection. Also, it is common for the family child care home adult, household members, to whom this variance applies, to be at work outside the family child care home during child care hours.

 **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.


Additional time is being requested to implement this check for family child care home adult, household members, who do not assist with child care services and are not left alone with children.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

It will allow family child care home providers to continue their businesses which allows sustainability of our child care capacity.

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.

Children's safety is not compromised by granting this waiver because a child care staff member, fully cleared, is present and providing direct supervision with children ensuring their protection. Also, it is common for the family child care home adult, household members, to whom this variance applies, to be at work outside the family child care home during child care hours.

 **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.

Vermont is seeking additional time to finish implementing our interstate child abuse and


neglect registry checks which consists of developing a payment process for states who require payment.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

It will allow programs and family child care providers to fill staff vacancies which allows sustainability of our child care capacity.

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.

Vermont has already implemented the other background clearance requirements for new staff. There is minimal evidence at this point to indicate that this additional check will yield significantly relevant data.

 **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.

Vermont is seeking additional time to finish implementing our interstate child abuse and neglect registry checks which consists of developing a payment process for states who require payment.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

It will allow pre-existing staff and family child care home providers to continue within their current roles and businesses which allows sustainability of our child care capacity.

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.

Vermont has already implemented the other background clearance requirements for existing staff. There is minimal evidence at this point to indicate that this additional check will yield significantly relevant data.

 **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.

Vermont is requesting to allow new staff to begin work provisionally after the background clearance request has been submitted as long as the new staff member is not left alone with children. This will allow Vermont time to revise our regulations and to adjust our process which will result in a reduction in time for receiving fingerprint supported checks.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

It will allow programs and family child care providers to fill staff vacancies which allows sustainability of our child care capacity.

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.

Children's safety is not compromised by granting this waiver because a child care staff member, fully cleared, is present and providing direct supervision with children ensuring their protection.