Child Care and Development Fund (CCDF) Plan

for

State/Territory ______

FFY 2016-2018

This Plan describes the CCDF program to be administered by the State/Territory for the period 6/1/2016 – 9/30/2018. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

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

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

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

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Introduction and How to Approach Plan Development

Access to stable, high quality child care and early learning experiences improves the odds of success for two generations – parents and children who rely on child care across the country. The Child Care and Development Fund (CCDF) provides resources to State, Territory, and Tribal grantees that enable low-income parents to work or pursue education and training so that they may better support their families while at the same time promoting the learning and development of their children. The CCDF also provides funding to enhance the quality of child care for all children.

On November 19, 2014, President Obama signed the bipartisan-supported Child Care and Development Block Grant (CCDBG) Act of 2014 into law (Pub. L. 113-186) (https://www.acf.hhs.gov/sites/default/files/occ/child_care_and_development_block_grant_markup.pdf). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for State and Territory grantees. The law establishes minimum child care assistance eligibility periods, health and safety standards and training requirements for providers, monitoring, consumer information and other components that when fully implemented will strengthen child care in this country and support child and family success.

States and Territories must comply with the provisions of the Child Care and Development Block Grant (CCDBG) Act, as revised by reauthorization. The Office of Child Care (OCC) has provided interpretive guidance on the new requirements of the law through Program Instructions or responses to Frequently Asked Questions, which are available at: http://www.acf.hhs.gov/programs/occ/ccdf-reauthorization. Pending the issuance of implementing regulations, States and Territories are to comply with the law based on their reasonable interpretation of the requirements in the revised CCDBG statute. Further Federal clarification through guidance and regulation is forthcoming. Once final rules are issued, any States and Territories that do not fully meet the requirements of the regulations will need to revise their policies and procedures to come into compliance, and file appropriate Plan amendments related to those changes.

CCDF Plan Overview. The Administration for Children and Families (ACF) re-designed the CCDF Plan to assist State and Territory grantees to plan for full implementation of the law. We recognize that the CCDBG Act of 2014 includes a significant number of changes, some of which are straightforward to implement, while others are complex and will be phased-in over several years. The level of effort needed for implementation will vary across the country depending on the number of changes a State or Territory needs to make. We encourage all States and Territories to take time to think systematically and consider large-scale changes to advance a coherent vision for their child care programs and achieve the goals of the reauthorization – that is, to improve the health, safety, and quality of child care and to improve low-income working families’ access to child care assistance and care that promotes child development. Some States and Territories will need time to enact changes through their legislatures or rulemaking processes. In addition, some requirements will take time to fully operationalize. ACF will work with States and Territories to ensure that adoption and implementation of these important changes are done in a thoughtful and comprehensive manner.
The Plan process continues to be the primary mechanism by which ACF will determine State and Territory compliance with requirements in the new law. The CCDBG Act of 2014 changed the Plan cycle from a biennial to a triennial Plan period; thus, this Plan will cover a 3-year period. 

(658E(b)) States and Territories are required to submit their FY 2016-2018 CCDF Plans by March 1, 2016, and approved Plans will become effective June 1, 2016. This Pre-Print will provide a tool for States and Territories to describe to ACF their implementation plans to:

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

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

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The State/Territory acknowledges its responsibility to adhere to them regardless of these modifications. The Plan contains definitions where provided by law. For terminology not defined in the law, some illustrative examples may be provided. These should only be considered examples, and not requirements, for purposes of responding. If no definitions are provided, States/Territories should respond based on their own definitions for those terms.

**CCDBG Implementation Deadlines.** In some cases, the CCDBG Act of 2014 specifies a particular date when a provision is effective. Where the law does not specify a date, the new requirements became effective upon the date of enactment and States/Territories have until September 30, 2016 to implement the new statutory requirement(s). ACF has determined that when a State or Territory cannot certify compliance with a specific requirement at the time of CCDF plan submission (March 1, 2016), the grantee must provide a State/Territory-specific implementation plan for achieving compliance with such provision(s). The implementation plan must provide sufficient information to support approval of the Plan for funding.

Specifically, as part of its implementation plan, States/Territories will be asked to describe:

- Overall target completion date (no later than appropriate effective date deadline)
- Current overall status for any requirement in this section (not yet started, partially implemented, substantially implemented, other) including describing progress to date for any requirements already implemented and listing any unmet requirements that are not yet fully implemented
Specific steps (activities) you will take to complete implementation of the unmet requirement(s) (e.g., secure legislative or rule changes, modify agreements with coordinating agencies, etc.)

Timeline for implementation including projected start date and end date for each step

Agency/entity responsible for completing implementation of the goal/objective, and partners who will work with the responsible agency to complete implementation of the goal/objective.

We recognize that it will take multiple steps and interim activities toward complete implementation of the requirement. We have included spaces to allow respondents to outline those interim steps and associated timelines (projected start and end dates) for those interim steps to be outlined. A comprehensive summary of the topical implementation plans across sections will be generated electronically to facilitate monitoring of progress towards completion.

ACF will work with States and Territories to monitor progress towards achievement of these requirements and will conduct ongoing reviews of implementation plans until fulfillment of the requirement. As part of the ongoing reviews, States and Territories will be asked to complete regular updates to the implementation plan through the e-submission site. Upon completion of the implementation plan, the State/Territory will submit a Plan amendment to certify fulfillment of the requirement(s). These updates and amendments can be submitted at any time prior to the effective date of the requirement. For example, States and Territories may, and are encouraged to, submit amendments to certify compliance with requirements upon completion, but no later than the effective date of the requirements (refer to the Program Instruction on Effective Dates for these deadlines https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02 and corresponding timeline of effective dates https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02-attachment-timeline-of-effective-dates-for-States-and-Territories-ccdbg-act-of-2014).

Lead Agencies can access a variety of federal technical assistance resources to support implementation of the new requirements at: https://childcareta.acf.hhs.gov/ccdf-reauthorization In addition to these materials, States and Territories will continue to receive support through the Office of Child Care’s Technical Assistance Network (CCTAN) to assist with implementation of the new law. ACF recommends reviewing these resources prior to starting and completing each section of the Plan.

CCDF Plan Submission. States and Territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions in the ACF-118 site may be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities (see http://www.section508.gov/ for more information). Until the final draft is approved, States and Territories may use the draft CCDF Plan preprint templates as they work to implement the new law. In responding to questions, States and Territories are asked to provide brief, specific summary text and/or bullet points only. Do not use tables or copy and paste charts, attachments or manuals into the Plan.
All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing CCDBG compliance monitoring efforts. In cases where the CCDBG Act of 2014 did not change CCDF regulatory requirements (e.g., Public Hearing requirements), the CCDF regulations are still in effect and relevant questions are included in this Plan.

The CCDF Plan does not contain the Quality Performance Report (QPR) appendix included in previous Plans. The CCDBG Act of 2014 requires ongoing collection of some information that was included in the QPR. ACF will issue a separate information collection tool for public comment and approval linked to the CCDF Plan and updated based on the new requirements in the law.

1 Define CCDF Leadership and Coordination with Relevant Systems

Implementation of the requirements of the CCDBG Act of 2014 will require leadership and coordination between the child care assistance program and other child- and family-serving agencies, services, and supports at the state and local levels. ACF recognizes that each grantee must identify the most appropriate entities and individuals to lead and participate in implementation based on the context within that State or Territory. This will include those that manage various components of CCDF-funded activities and requirements (fiscal, subsidy, health and safety monitoring, and continuous quality improvement) as well as other public and private partners.

This section collects information to help ACF understand the stakeholders convened and consulted to develop the Plan, where authority lies to make policy decisions and program changes, and who is responsible for implementing the blueprint for action the Plan describes. For example, the law requires that, at the option of the Tribes, State/Territory Lead Agencies must collaborate and coordinate with Indian tribes or tribal organizations in the State in a timely manner in the development of the CCDF Plan. ACF expects that new requirements in the law will necessitate that grantees build partnerships with other agencies and organizations to better link the children and families receiving financial assistance to information, services and resources regarding other programs for which they may be eligible, including developmental screenings for children, and other resources (also in section 2). In addition, States and Territories must describe how public-private partnerships are being used to increase the supply and quality of child care services.

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

Identify the Lead Agency or joint inter-agency office designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals, and disallowance notifications to the designated contact identified here. (658D(a))

Name of Lead Agency: Ohio Department of Job and Family Services (ODJFS)
Address of Lead Agency: 30 East Broad Street, 32nd Floor, Columbus, Ohio 43215
Name and Title of the Lead Agency Official: Cynthia C. Dungey, Director
Phone Number: 614-466-6283
E-Mail Address: Cynthia.Dungey@jfs.ohio.gov
Web Address for Lead Agency (if any): http://jfs.ohio.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/Territory’s CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information.

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: Tracey Chestnut
Title of CCDF Administrator: Chief, Bureau of Child Care Policy and Technical Assistance
Address of CCDF Administrator: 4200 E. Fifth Avenue, Columbus, Ohio 43215, P.O. Box 183204, Columbus, Ohio 43218-3204
Phone Number: 614-752-0481
E-Mail Address: Tracey.Chestnut@jfs.ohio.gov

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

Name of CCDF Co-Administrator _____
Title of CCDF Co-Administrator _____
Phone Number _____
E-Mail Address _____
Description of the role of the Co-Administrator _____

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any): 1-877-302-2347
Web Address for CCDF program (for the public) (if any):
http://jfs.ohio.gov/cdc/childcare.stm

Web Address for CCDF program policy manual (if any):
http://jfs.ohio.gov/cdc/rules_forms.stm

Web Address for CCDF program administrative rules (if any)
http://jfs.ohio.gov/cdc/rules_forms.stm

1.1.3 Identify the agency/department/entity that is responsible for each of the major parts of CCDF administration and the name of the lead contact responsible for managing this portion of the Plan.

☐ Outreach and Consumer Education (section 2):
  o Agency/Department/Entity ODJFS/Office of Family Assistance (OFA)
  o Name of Lead Contact Tracey Chestnut

☐ Subsidy/Financial Assistance (section 3 and section 4):
  o Agency/Department/Entity ODJFS/OFA
  o Name of Lead Contact Tracey Chestnut

☐ Licensing/Monitoring (section 5):
  o Agency/Department/Entity ODJFS/OFA
  o Name of Lead Contact Jeffery VanDeusen

☐ Child Care Workforce (section 6):
  o Agency/Department/Entity ODJFS/OFA
  o Name of Lead Contact Tracey Chestnut

☐ Quality Improvement (section 7):
  o Agency/Department/Entity ODJFS/OFA
  o Name of Lead Contact Tracey Chestnut

☐ Grantee Accountability/Program Integrity (section 8):
  o Agency/Department/Entity ODJFS/Office of Fiscal and Monitoring Services (OFMS)
  o Name of Lead Contact Lou Tomlin-King

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

1.2.1 Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level? In other words, identify whether CCDF program rules and policies are established by the State or Territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies. Check one.

☒ All program rules and policies are set or established at the State/Territory level.
Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.

☐ Eligibility rules and policies (e.g., income limits) are set by the:
  ☑ State/Territory
  ☐ County. If checked, describe the type of eligibility policies the county can set _____
  ☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity(ies) can set _____
  ☐ Other. Describe _____

☐ Sliding fee scale is set by the:
  ☑ State/Territory
  ☐ County. If checked, describe the type of sliding fee scale policies the county can set _____
  ☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity(ies) can set _____
  ☐ Other. Describe _____

☐ Payment rates are set by the:
  ☑ State/Territory
  ☐ County. If checked, describe the type of payment rate policies the county can set _____
  ☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set _____
  ☐ Other. Describe _____

☑ Other. List and describe (e.g., quality improvement systems, payment practices) Tiered quality rating and improvement system (TQRIS) set by ODJFS in conjunction with the Ohio Department of Education (ODE).

1.2.2 How is the CCDF program operated in your State/Territory? In other words, which agency(ies) implement or perform these CCDF services and activities and how will the State/Territory ensure that Federal CCDF requirements are fully implemented by other governmental or nongovernmental agencies. ACF recommends minimizing differences in eligibility or other policies across counties or other jurisdictions to ease family
burden and confusion. Check all that apply and describe the services performed by the entity and how the State/Territory ensures accountability that federal requirements are fully implemented by other agency(ies).

a) Who determines eligibility?

☐ CCDF Lead Agency
☐ TANF agency. Describe. _____
☐ Other State/Territory agency. Describe. _____
☒ Local government agencies such as county welfare or social services departments. Describe. Local county departments of job and family services (CDJFS) determine all eligibility for publicly funded child care (PFCC).
☐ Child care resource and referral agencies. Describe. _____
☐ Community-based organizations. Describe. _____
☐ Other. Describe. _____

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

☐ CCDF Lead Agency
☐ TANF agency. Describe. _____
☐ Other State/Territory agency. Describe. _____
☒ Local government agencies such as county welfare or social services departments. Describe. Local CDJFS agencies provide some consumer education as they are determining eligibility.
☒ Child care resource and referral agencies. Describe. Child Care Resource and Referral Agencies (CCR&R) throughout the state provide consumer education.
☐ Community-based organizations. Describe. _____
☒ Other. Describe. The ODJFS also maintains a website listing all licensed providers with contact and basic demographic information including if the provider has an agreement for PFCC, if they participate in the child and adult care food program (CACFP), and ages served.

c) Who issues payments?

☒ CCDF Lead Agency
☐ TANF agency. Describe. _____
☐ Other State/Territory agency. Describe. _____
☐ Local government agencies such as county welfare or social services departments. Describe. _____
☐ Child care resource and referral agencies. Describe. _____
☐ Community-based organizations. Describe. _____
Other. Describe. _____

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 three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government. (658D(b)(2)) General purpose local governments is defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf

The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

1.3.1 Check who and describe how the Lead Agency consulted with these entities in the development of the CCDF Plan (check all that apply). For example, did the entity participate in a drafting committee, review drafts, sign off on the final version, or develop a memorandum of understanding with the Lead Agency to meet requirements to share information or services for CCDF subsidy families, or other manner of participation? This list includes entities required by law along with a list of optional CCDF Plan consultation partners that Lead Agencies potentially would consult with in their developing their CCDF Plan.

X [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns. The CDJFS agency staff participate on the ODJFS’s Child Care Advisory Council (CCAC) and its sub-committees. The CCAC Policy Sub-Committee reviews draft rules and provides feedback on changes to Ohio Administrative Code (OAC), some that are a direct result of CCDBG. The CCAC Information Technology committee reviews system changes that support policy. Systems are utilized by the provider community and state and county staff. Additionally, the ODJFS consults with the Ohio Job and Family Services Director’s Association (OJFSDA) which represents the CDJFS agencies. The ODJFS staff meets with OJFSDA regularly about the current plan and upcoming goals; feedback from this group is used to shape and fine tune our goals and plan.

X [REQUIRED, IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). Describe The Early Childhood Advisory Council (ECAC) provides feedback throughout the year regarding the implementation of PFCC, Ohio TQRIS Step Up To Quality (SUTQ), and child care licensing. Kara Wente, Deputy Director of the Office of Family Assistance, is a member of the ECAC and presents policies/procedures/goals, some of which are included in the state plan, to the ECAC for feedback.

○ If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?

X Yes

□ No.
If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy.

☐ [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes. Describe, including which Tribe(s) you consulted with. Check N/A if no Indian Tribes and/or Tribal organizations in the State

X State/Territory agency responsible for public education. Describe The ODE and the ODJFS staff meet regularly to develop common goals within the early learning system. Discussions include professional development, funding, regulatory and quality standards and alignment. The ODE also has an ex-officio seat on the CCAC. The ODE staff worked with the ODJFS and the Administration for Children and Families, Office of Child Care (OCC) to better understand the CCDBG requirements and ensure compliance. The ODE staff consulted with the ODJFS staff to further explore options for requirements and to review draft documents to meet the state plan goals.

X State/Territory agency/agencies responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool). Describe The ODJFS works with staff from the Ohio Department of Health (ODH) throughout the year on the workgroups to promote safe, healthy and nutritious environments for young children. The ODH administers the Part C program in Ohio and has an ex-officio seat on the CCAC. The ODE administers section 619 for preschool and has an ex-officio seat on the CCAC.

☐ State/Territory institutions for higher education, including community colleges. Describe

X State/Territory agency responsible for child care licensing. Describe The ODJFS regulates community-based child care programs and all family child care (FCC) homes that serve 12 or more children or are participating in PFCC. The ODE regulates school-operated (public and chartered, non-public) programs. The ODE also has an ex-officio seat on the CCAC. The ODE staff worked with the ODJFS and the OCC to better understand the CCDBG requirements and ensure compliance. The ODE staff consulted with the ODJFS to further explore options for requirements and to review draft documents.

X State/Territory office/director for Head Start State collaboration. Describe The Head Start (HS) Collaboration Grant is housed within the ODE. The ODJFS seeks input from the HS community throughout the year. The HS Collaboration Director worked with the ODJFS staff to better understand the CCDBG requirements. The HS Collaboration Director provided feedback on the plan for meeting requirements.

X State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe Child care providers, including providers participating in the Early Head Start (EHS)-Child Care Partnership (CCP) grants participate on the CCAC and the CCAC Policy Sub-Committee. The Policy Sub-Committee reviewed drafts and provided feedback on changes to the OAC that are a result of the CCDBG.
X State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe The ODE is the lead agency for the CACFP. The ODE has an ex-officio seat on the CCAC.

X State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe The ODJFS works with staff from the ODH throughout the year on the workgroups to promote safe, healthy and nutritious environments for young children. The ODH administers the WIC program in Ohio and has an ex-officio seat on the CCAC. The ODJFS participated in the Pediatric Obesity Collaborative Improvement and Innovation Network (CoIIN) with representatives from the ODH, the ODE, and the Ohio Head Start Association (OHSA). Results of this effort included changes to the licensing rules for all provider types.

☐ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services. Describe Not at this time.

X State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe The Ohio Department of Mental Health and Addiction Services (ODMHAS) and the ODH provide feedback throughout the year and are represented on the ECAC, has an ex-officio seat on the CCAC, as well as other statewide collaborative initiatives.

☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe Not at this time.

☐ McKinney-Vento State coordinators for Homeless Education. Describe Not at this time.

X State/Territory agency responsible for public health. Describe A representative from the ODH sits on the CCAC Policy Sub-Committee that reviewed drafts and provided feedback on changes to the OAC that were a result of the CCDBG.

X State/Territory agency responsible for mental health. Describe The ODMHAS provides feedback throughout the year and is represented on the ECAC, has an ex-officio seat on the CCAC, as well as other statewide collaborative initiatives.

X State/Territory agency responsible for child welfare. Describe The child care program consults with the Ohio Children’s Trust Fund (OCTF), as well as the Bureau of Protective Services (BPS) within the Office of Families and Children (OFC) to promote the prevention of child abuse and neglect. Both entities are housed within the ODJFS.

☐ State/Territory liaison for military child care programs. Describe Not at this time.

☐ State/Territory agency responsible for employment services/workforce development. Describe Not at this time.

X State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe The child care program consults with the Bureau of Cash and Food Assistance Policy (BCFAP) routinely. Both bureaus are housed within the OFA.

X State/community agencies serving refugee or immigrant families. Describe The child care program consults with the BCFAP routinely, which oversees the state refugee program. Both bureaus are housed within the OFA.

X Child care resource and referral agencies. Describe The Ohio Child Care Resource and Referral Association (OCCRRA) and the local CCR&Rs provide feedback throughout the year and have representation on the CCAC. The ODJFS, the OCCRRA and the
CCR&Rs have quarterly meetings to discuss outcomes, goals and activities that support child care including items identified in the CCDBG.

X Provider groups or associations. Describe The Ohio Afterschool Network (OAN), the Ohio Association of Child Care Providers (OACCP), groundWork, and the American Federation of State, County and Municipal Employees (AFSCME), local Council 8 provides feedback through the year. Representatives from various provider groups attend the CCAC and the ECAC and work with the OFA routinely. Input is also provided during the Clearance process for any rule packages.

X Labor Worker organizations. Describe The AFSCME, local Council 8 provides feedback throughout the year and attends the CCAC meetings. However, effective June 30, 2015, family child care programs no longer have the right to collective bargain and therefore are not formally represented by AFSCME.

X Parent groups or organizations. Describe The CCAC is required to have parent representation. The CCAC provides recommendations throughout the year.

X Other. Describe The CCAC provides feedback and advises the department throughout the year regarding the implementation of the PFCC program, the SUTQ program and child care licensing.

1.3.2 Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)). Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

a) Date(s) of notice of public hearing January 29, 2016 Reminder - Must be at least 20 calendar days prior to the date of the public hearing.

b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice. The public hearing notice was posted on the ODJFS child care website, sent through a Really Simple Syndication (RSS) feed, and distributed through stakeholder email listerves.

c) Date(s) of public hearing(s) February 19, 2016 Reminder - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.

d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed The hearing site is centrally located in the state, 4020 East Fifth Avenue, Columbus, Ohio 43219

e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s) A notice of the draft plan was posted on the Child Care website.

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? The public was able to electronically submit written comments prior to the public hearing in addition to comments submitted
during the hearing. All comments were reviewed and considered for incorporation into
the plan.

1.3.3 Describe the strategies used by the Lead Agency to make the CCDF Plan and Plan
Amendments available to the public. Check all that apply and describe the strategies below,
including any relevant links as examples.

X Working with advisory committees. Describe The OFA has gathered information from
stakeholder groups over the past year to incorporate those ideas into the plan.

X Working with child care resource and referral agencies. Describe The OCCRA
listserve was used to distribute notification of the plan posting and hearing.

☐ Providing translation in other languages. Describe ______

X Making available on the Lead Agency website. List the website The draft and final
plans are available on the Child Care website. http://jfs.ohio.gov/CDC/childcare.stm

☐ Sharing through social media (Twitter, Facebook, Instagram, email, etc.). Describe
______

X Providing notification to stakeholders (e.g., provider groups, parent groups). Describe
An email was sent to all stakeholder groups requesting to distribute notification of the
plan posting and public hearing to their listerves.

X Other. Describe The ODJFS utilizes an RSS feed as a method of communicating with
the provider community and stakeholders. The RSS feed can be received by any
individual who signs up for the information. An RSS feed was sent informing of the
plan posting and public hearing.

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

The CCDBG Act of 2014 added a requirement that the Plan describe how the State/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.

1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate
child care services with the following programs to expand accessibility and continuity of care,
and assist children enrolled in early childhood programs to receive full-day services that meet
the needs of working families. (658E(c)(2)(O)) Please describe 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 quality of services,
linking comprehensive services to children in child care settings or developing supply of
quality care for vulnerable populations. NOTE that this list appears similar to the list provided
in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however,
this list includes entities required by law, along with a list of optional CCDF Plan coordination
partners that Lead Agencies potentially would coordinate with over the next 3 years to expand
accessibility and continuity of care, and assist children enrolled in early childhood programs to
receive full-day services. Check and describe all that apply.
X [REQUIRED] Programs operating at the Federal, State and local levels for children in pre-
school programs (e.g., state-or locally-funded pre-k, Head Start, school-based programs,
public and private preschools, programs serving preschool children receiving special
education services, etc.). Describe The ODJFS and the ODE will establish the following in
common between the ODE funded programs and the ODJFS funded programs for fiscal
year 2017: application, program eligibility, funding, attendance policy and attendance
tracking. Eligible families may receive PFCC beyond the standard early childhood
schedule. Additionally, beginning July 1, 2020 PFCC may be provided only by a provider
that is rated through SUTQ. The ODE and the ODJFS meet weekly to ensure the alignment
of procedures and policy specific to child care licensing and SUTQ.

X [REQUIRED, IF APPLICABLE] Tribal early childhood programs. Describe, including
which Tribe(s) coordinating with not applicable

X Check N/A if no Indian Tribes and/or Tribal organizations or programs in the State.

X [REQUIRED] Other Federal, State, local early childhood programs serving infants and
toddlers with disabilities. Describe The ODE and the ODJFS are the state agencies that
regulate early childhood programs, including those serving infants and toddlers. The
ODJFS and the ODE will establish the following in common between the ODE funded
programs and the ODJFS funded programs for state fiscal year 2017: application, program
eligibility, funding, attendance policy and attendance tracking. Eligible families may
receive PFCC beyond the standard early childhood schedule. Additionally, beginning July
1, 2020 PFCC may be provided only by a provider that is rated through SUTQ. The ODE
and the ODJFS meet weekly to ensure the alignment of procedures and policy specific to
child care licensing and SUTQ.

X [REQUIRED] Early childhood programs serving homeless children (as defined by the
McKinney-Vento Homeless Education Assistance Act). Describe Current OAC allows
immediate eligibility for PFCC for a homeless family for a maximum of ninety calendar
days in a twelve month period, or the period of time that the caretaker and child reside in an
emergency shelter, or the period of time when the caretaker and child are homeless,
whichever period is shorter.

X [REQUIRED] Early childhood programs serving children in foster care. Describe Current
OAC defines a family as a caretaker who is a foster parent and all of the minor children
who reside with the caretaker in the same household. Child care services would be an
option if the family meets eligibility requirements.

X State/Territory agency responsible for child care licensing. Describe The ODJFS is
responsible for both child care licensing and the CCDF.

X State/Territory agency with Head Start State collaboration grant. Describe The ODE, the
HS Collaboration Director and the ODJFS meet to ensure the alignment of procedures and
policy specific to child care licensing, SUTQ, and to incorporate HS best practices. The HS
Collaboration Grant is housed within the ODE. The ODJFS seeks input from the HS
community throughout the year.

X State Advisory Council authorized by the Head Start Act. Describe The ECAC provides
feedback throughout the year regarding the implementation of PFCC, SUTQ and child care
licensing. The ODJFS is a member of the ECAC and presents policies/procedures/goals,
some of which are included in the state plan, to the ECAC for feedback.
X State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe Child care providers, including providers participating in the EHS-CCP grants participate on the CCAC and the CCAC Policy Sub-Committee.

☐ McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons. Describe Not at this time.

X Child care resource and referral agencies. Describe The OCCRRA and the CCR&Rs provide feedback throughout the year and have representation on the CCAC and ECAC. The ODJFS, the OCCRRA and the CCR&Rs have quarterly meetings to discuss outcomes, goals and activities that support child care.

X State/Territory agency responsible for public education. Describe The ODE and ODJFS staff meet regularly to develop common goals within the early learning system. Discussions include professional development, funding, regulatory, and quality standards and alignment. The ODE also has an ex-officio seat on the CCAC.

X State/Territory institutions for higher education, including community colleges. Describe The ODJFS staff participated in a Higher Education Summit to assist in workforce development in early childhood, specifically with articulation agreements for child care courses/professional development experiences. Work continues with this effort.

X State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe The ODE is the lead agency for the CACFP. The ODE has an ex-officio seat on the CCAC.

X State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe The ODJFS works with staff from the ODH throughout the year on the workgroups to promote safe, healthy and nutritious environments for young children. The ODH administers the WIC program in Ohio and has an ex-officio seat on the CCAC. The ODJFS participated in the Pediatric Obesity CoIIN with representatives from the ODH, the ODE, and the OHSA. Results of this effort included changes to the licensing rules for all provider types.

☐ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services. Describe Not at this time.

X State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant. Describe The ODMHAS and the ODH provide feedback throughout the year and are represented on the ECAC, has an ex-officio seat on the CCAC, as well as other statewide collaborative initiatives.

☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe Not at this time.

X State/Territory agency responsible for public health. Describe A representative from the ODH sits on the CCAC Policy Sub-Committee that reviewed drafts and provided feedback on changes to the OAC that were a result of the CCDBG.

X State/Territory agency responsible for mental health. Describe The ODMHAS provides feedback throughout the year and is represented on the ECAC, has an ex-officio seat on the CCAC, as well as other statewide collaborative initiatives.

X State/Territory agency responsible for child welfare. Describe The child care program consults with the OCTF, as well as the BPS within the OFC to promote the prevention of child abuse and neglect. Both entities are housed within the ODJFS.
☐ State/Territory liaison for military child care programs. Describe Not at this time.
☐ State/Territory agency responsible for employment services/workforce development. Describe No at this time.
☒ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe The child care program consults with the BCFAP routinely. Both bureaus are housed within the OFA.
☐ State/Territory community agencies serving refugee or immigrant families. Describe Not at this time.
☒ Provider groups or associations. Describe The OAN, the OACCP, groundWork, and AFSCME, Ohio Council 8 provide feedback through the year.
☒ Labor Worker organizations. Describe AFSCME, Council 8 provides feedback throughout the year and attends the CCAC meetings.
☒ Parent groups or organizations. Describe The CCAC is required to have parent representation. The CCAC provides recommendations throughout the year.
☒ Other. Describe The CCAC provides feedback and advises the department throughout the year regarding the implementation of the PFCC program, the SUTQ program and child care licensing.

1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O)(ii)) Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high 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 county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits (https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) 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 the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.
1.5.1 Will you combine CCDF funds with the funds for any program with which you coordinate (described in 1.4.1)?

X Yes. If yes, describe at a minimum:

- How do you define “combine”? Ohio defines “combine” to mean that we direct charge TANF so all funding goes toward services but funds from three different streams are used to support eligible families utilizing child care.
- Which funds will you combine? CCDF funds are combined with TANF direct charge and General Revenue funds.
- Goal(s) of combining funds (why?) and expected outcomes, 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. Combining funds allows Ohio to serve more children and families, without a waiting list for PFCC. Additionally, Ohio allows HS families who are no longer eligible for PFCC to continue receiving extended day services for the current HS year.
- Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?) All funding is maintained and combined at the state level. Payments to providers are issued from the state as well.

How are the funds tracked and method of oversight? The ODJFS funds providers and CDJFS agencies through two processes. The first process provides funding via agreements. These agreements and sub-agreements with our partners and staff are monitored, to ensure the quality of work and providing oversight and technical assistance to our partners. A grant manager from the Agreement & Monitoring section has been assigned to manage the agreements and is responsible for monitoring programmatic and fiscal activities of the partners.

ODJFS’s partners are responsible for day-to-day operations of the grant with the ODJFS providing technical assistance and monitoring. The ODJFS staff require and review monthly status reports and updates with the sub-grantees, conduct desk reviews and have regular communication with the sub-grantees. Expenditures are reviewed on a monthly basis for allowable costs. If goals are not being met, the ODJFS meets with all parties to determine what program changes can be made to help meet the goals.

The second process involves providing funding for the child care program by county allocation to the eighty-eight CDJFS agencies. The ODJFS provides a yearly county allocation to each county to provide, operate, and maintain local child care services. The allocation process follows an approved cost allocation plan methodology approved by U.S. Department of Health and Human Services. The allocation process is managed by the Department’s County Finance bureau. The bureau is responsible for distributing allocations, draws, and reimbursements to county agencies. The bureau also provides reporting on the expenditures and progress of funding for the child care program. Monitoring of the CDJFS agencies is performed by the Bureau of Monitoring in the Office of Fiscal and Monitoring.
1.6 Public-Private Partnerships

The CCDBG Act of 2014 adds a new provision that requires States and Territories to describe in the Plan how the State/Territory encourages partnerships among State/Territory and public agencies, tribal organizations, private entities, faith based organizations and/or community-based organizations to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services for children through age 12, such as by implementing voluntary shared services alliance models (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 reauthorization.

1.6.1 Describe the entities with whom and the levels at which the State/Territory is partnering (level - State/Territory, county/local, and/or programs), the goals of the partnerships, method of partnering. Include in your description examples of activities that have resulted from partnerships with other State/Territory and public agencies, tribal organizations, private entities, faith based organizations or community-based organizations, and how the partnerships are expected to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services. The ODJFS currently has an appointed member on the ECAC. The Council consists of members from the Governor’s office, state agencies, provider organizations, providers, higher education, foundations and other groups. The Governor’s office leads the ECAC. The ECAC focuses on children from birth to kindergarten entry and is charged with advising the Governor on ways to improve results for children in Ohio through the creation and coordination of policy and financing strategies. The ECAC has developed four project teams (Quality, Accessing and Financing; Professional Development; Standards and Assessment; and Family Engagement) to develop specific recommendations on how to improve the early childhood delivery system. The ODJFS has representation on each of the project teams. Work that has resulted from this council includes: revising Ohio’s Early Childhood Core Knowledge and Competencies which communicates the critical areas of knowledge and skills that are necessary for early childhood professionals; creating an Ohio Approved Professional Development designation that represents the consolidation of several state agencies’ professional development approval process, including thresholds for training including alignment with Ohio’s Core Knowledge and Competencies; creating a Family Engagement website to better serve families (this is not live yet).

Additionally, the ODE and the ODJFS have worked together and continue strengthening our partnership. Through the Race to the Top (RTT) Early Learning Challenge Grant (ELCG), the two agencies have worked side-by-side on SUTQ Quality policies and procedures. We continue to meet weekly to maintain open communication specific to SUTQ and child care licensing. ODE and ODJFS also are working to align in the following areas: application, program eligibility, funding, attendance policy and attendance tracking for PFCC. The ODE and the ODJFS are charged with identifying strategies for appropriately rating small (type B) family child care homes to increase the accessibility of high quality child care for families utilizing this child care setting.
1.7 Coordination with Local or Regional Child Care Resource and Referral Systems

States and Territories may use funds to establish or support a system of local or regional child care resource and referral organizations (CCR&R) 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 (also see section 7.4). If they do, the law identifies specific requirements for that entity or system receiving CCDF funds. (658E(c)(3)(B)(iii)) These include:

- Provide families with information on a full range of child care options (including faith-based, community-based child care centers and family child care homes, nontraditional hours and emergency child care centers) in their local area or region.
- To the extent practicable, work directly with families who receive child care assistance to offer the families support and assistance in making an informed decision about child care options in an effort to ensure families are enrolling their children in the most appropriate child care setting to suit their needs and that is of high quality as determined by the State/Territory.
- Collect data and provide information on the coordination of services and supports, including services provided through the Individuals with Disabilities Education Act for children with disabilities.
- Collect data and provide information on the supply of and demand for child care services in local areas or regions of the State/Territory and submit such information to the State/Territory.
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care centers and family child care homes providers, to increase the supply and quality of child care services in the State/Territory.
- As appropriate, coordinate their activities with the activities of the Lead Agency and/or local agencies that administer CCDF.

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

1.7.1 Does the State/Territory fund a system of local or regional CCR&R organizations?

X Yes. The State/Territory funds a CCR&R system. See also related follow-up questions in Section 7.1 and 7.4. If yes, Describe the State/Territory’s written agreement or contract with the CCR&R, what services are provided through the CCR&R, and any other activities for which the State partners with the CCR&R. Ohio partners with 12 CCR&R agencies to serve the regions of Ohio which provide training, technical assistance, and outreach services to the child care providers in their respective regions. The CCR&R develop and implement programs to increase knowledge of professionals, and the implementation and delivery of early care and education services. Additionally,
the CCR&Rs increase the knowledge and awareness of families, community partners, and community stakeholders regarding the importance and availability of early care and education services to increase the demand for high quality services.

☐ No. The State/Territory does not fund a CCR&R system and has no plans to establish. Use section 7.4 to describe plans, if any, to establish a CCR&R system.

1.8 Disaster Preparedness and Response Plan

The CCDBG Act of 2014 added a requirement that States and Territories must include a Statewide Child Care Disaster Plan for coordination of activities with the State/Territory human services agency, emergency management agency, child care licensing agency, State/Territory local resource and referral agencies, and the State Advisory Council (SAC) or other state-designated cross-agency body if there is no SAC. (658E(c)(2)(U)) The Statewide Child Care Disaster Plan must include:

- Guidelines for continuing CCDF assistance and child care services after a disaster, which may include provision of temporary child care, and temporary operating standards for child care after a disaster.
- Requirements that child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.
- Requirements that child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.

1.8.1 Describe the status of State/Territory’s Statewide Child Care Disaster Plan.

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan _____

X Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) September 30, 2016
Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) partially implemented

Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable The ODJFS has a departmental continuation of operations plans that includes child care. The ODE currently requires all licensed programs to develop and adopt a comprehensive emergency management plan. This plan was developed in partnership with Ohio Homeland Security.

Unmet requirement - Identify the requirement(s) to be implemented In addition to the requirement being set forth in a procedure letter, the requirements will be added to the Child care rules set forth in Ohio Administrative Code to further strengthen the requirements for disaster plans including shelter in place, reunification, lock down drills, etc will be effective in Fall 2016. The rules are currently moving through the formal legislative rule making process. Additionally, the ODJFS has developed a plan to assist child care providers in continuing their operations in the case of widespread emergencies. This plan includes new rule language allowing for the temporary relocation of programs (to be effective in Fall 2016) as well as draft executive order language allowing the ODJFS to waive applicable licensing requirements in the event of a widespread emergency.

Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Rule change

- Projected start date for each activity in progress
- Projected end date for each activity September 30, 2016
- Agency – Who is responsible for complete implementation of this activity ODJFS – child care policy
- Partners – Who is the responsible agency partnering with to complete implementation of this activity

2 Promote Family Engagement through Outreach and Consumer Education

Parents are their children’s most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12.

The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit
their needs. A new purpose of CCDBG is to “promote involvement by parents and family members in the development of their children in child care settings.” States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children’s teacher and advocate. Key new provisions include:

1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
   a) the availability of child care assistance,
   b) the quality of child care providers (if available),
   c) Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children’s Health Insurance Program (SCHIP)) for which families may also qualify.
   d) Individuals with Disabilities Education Act (IDEA) programs and services,
   e) Research and best practices in child development, and
   f) State/Territory policies regarding social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on the expulsion of preschool-aged children (children from birth to five for purposes of this requirement) from early childhood programs receiving CCDF.

2. Information related to the health and safety of children in child care settings. The plan must certify that the State/Territory will make public certain information about the results of health and safety monitoring (described in section 5) using a website that is consumer-friendly and in an easily accessible format, including:
   a) Provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints; 2) last date of inspection; and 3) information on corrective actions taken (if applicable).
   b) Aggregate annual information about: 1) the annual number of deaths; 2) the annual number of serious injuries; and 3) annual number of incidences of substantiated child abuse in child care settings.
   c) State/Territory processes for: 1) licensing child care providers; 2) conducting background checks and the offenses that would keep a provider from being allowed to care for children; and 3) conducting monitoring and inspections of child care providers.

2.1 Information about Child Care Financial Assistance Program Availability and Application Process

   Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care assistance services. (658E(c)(2)(E)(i)(1))

2.1.1 Describe how the State/Territory informs families of availability of services.
a) How does the State/Territory identify populations and areas of potentially eligible families (e.g., using available federal, State/Territory and local needs assessments to identify potentially eligible families?) The county department of job and family services (CDJFS) agencies work with families who may be eligible for child care subsidy.

b) What partners help with outreach? For example, child care resource and referral agencies, home visitors, pediatricians, faith-based services, State/Territory or local agencies and organizations or other familiar and safe access points serving vulnerable or low-income populations. The CDJFS agencies, other government agencies, the Child Care Resource and Referral (CCR&R) agencies, contractors, community based organizations.

c) What outreach strategies do the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach? Child Care web site including a child care search, family engagement website (go live scheduled for 2016)

2.1.2 How can parents apply for services? Check all that apply.

☐ Electronically via online application, mobile app or email. Provide link ______
X In-person interview or orientation. Describe agencies where these may occur the CDJFS agencies.

☐ Phone
☐ Mail
☐ At the child care site
☐ At a child care resource and referral agency
☐ Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations. Describe ______
☐ Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time). Describe ______
X Other strategies. Describe Application can be sent via FAX

2.2 Consumer and Provider Education Information

The CCDBG Act of 2014 added a purpose of the child care program “to promote involvement by parents and family members in the development of their children in child care settings.” (658A(b)(3)) The consumer education requirements address multiple topics that parents and family members need in order to make informed choices and act as their most important teacher and advocate. Lead agencies must certify that they will collect and disseminate the following information through resource and referral agencies or other means. (658E(c)(2)(E))

2.2.1 The State/Territory certifies that it collects and disseminates the following information to parents, providers and the general public:

- Information about the availability of the full diversity of child care services that will promote informed child care choices,
- Availability of child care assistance,
- Quality of child care providers (if available),
• Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children’s Health Insurance Program (SCHIP)) for which families may also qualify,
• Individuals with Disabilities Education Act (IDEA) programs and services,
• Research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement,
• State/Territory policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (children from birth to five for purposes of this requirement)) in early childhood programs receiving CCDF.

☐ Yes. The State/Territory certifies as of March 1, 2016 that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.87 below.

☒ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

a) Overall Target Completion Date (no later than September 30, 2016) September 30, 2016

• Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Partially Implemented

  o Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable Currently, the Child Care website has a search feature that includes: Information about the availability of the full diversity of child care services that will promote informed child care choices; availability of child care assistance; quality of child care providers (if applicable); inspection reports for center and large family child care homes (Type A); the Step Up To Quality (SUTQ) rating for every rated provider including center, and family child care homes (Type A and Type B providers). Additionally, links to the following are available on the child care website: TANF, SNAP, Medicaid and SCHIP.
Unmet requirement - Identify the requirement(s) not fully to be implemented. The following information will be added to our child care web page so families can find resources in one place: Head Start (HS) and Early Head Start (EHS), LIHEAP, WIC, CACFP, IDEA programs and services, research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement; State policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (children from birth to five for purposes of this requirement) in early childhood programs receiving CCDF.

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Add links to other resources from the child care web page. Post information on other programs families may be eligible to receive, post information on child development, state policies for behavioral health and on developmental screenings.
  - Projected start date for each activity December 18, 2015
  - Projected end date for each activity September 30, 2016
  - Agency – Who is responsible for complete implementation of this activity The Ohio Department of Job and Family Services (ODJFS)
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity N/A

2.2.2 Describe how the State/Territory makes information available about the full diversity of child care services that will promote informed child care choices, including consumer-friendly strategies such as materials that are culturally responsive and in multiple languages as needed that reflect the literacy levels of consumers, and are easy to access, including accessible to persons with disabilities.

a) Describe how the State/Territory makes information about the full diversity of child care services available to 1) parents of eligible children, 2) providers and 3) the general public http://www.jfs.ohio.gov/CDC/childcare.stm has links and resources specifically labeled for parents, providers and other resources.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) The website is updated in real time with communications sent to providers and caretakers. Communications are sent to providers either via email or a Really Simple Syndication (RSS) feed. Communications are sent to caretakers through the United Postal Service mail.
c) Describe who you partner with to make information about the full diversity of child care choices available. The ODJFS partners with the Ohio Department of Education (ODE) and the Ohio Child Care Resource and Referral Association (OCCRRA).

2.2.3 Describe how the State/Territory makes information about the quality (such as through a quality rating and improvement system, if available, nationally-recognized accreditation, or other means) of child care services available to the public, including consumer-friendly strategies such as messages that are designed to engage intended audiences and are easy to understand.

a) Describe how the State/Territory makes information about child care quality available to 1) parents of eligible children, 2) providers and 3) the general public. The ODJFS child care web site, [http://www.jfs.ohio.gov/CDC/childcare.stm](http://www.jfs.ohio.gov/CDC/childcare.stm) has a link to the SUTQ resources for providers and families. When searching for a child care program, the SUTQ star rating is also designated next to the program name. Since SUTQ is jointly implemented by the ODJFS and the ODE, SUTQ updates are also housed at the Early Childhood Ohio (ECO) website, [www.earlychildhoodohio.org](http://www.earlychildhoodohio.org) – this website is designed for ODE and ODJFS licensed providers as a one-stop-shop to access SUTQ related documents including the program standards and guidance documents.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) The ECO website and the ODJFS child care website are updated in real time with SUTQ updates and communications. Communications are emailed to our SUTQ providers. The CCR&Rs provide technical assistance and training to providers. These sessions can be in-person or via a training housed in the Ohio Professional Registry (OPR).

c) Describe who you partner with to make information about child care quality available. The ODJFS partners with the OCCRRA, the ODE and the CCR&Rs.

2.2.4 Describe how the State/Territory shares information with eligible parents about other available human service programs. For example, does the State/Territory share information about these other programs through linkages from the online application, universal applications, through intake process/front line workers, providers, child care resource and referral agencies or other trusted advisors such as home visitors, pediatricians, faith-based services, etc.? At a minimum, include in your description how you provide information to eligible parents, what you provide and by what methods, and which partners you work with to provide information about other available service programs.

a) Temporary Assistance for Needy Families (TANF) The Child Care website [http://www.jfs.ohio.gov/ofam/index.stm](http://www.jfs.ohio.gov/ofam/index.stm) offers links to apply for TANF online or in person. Also, the Ohio Benefit Bank does program eligibility quick checks for TANF. TANF resource links will be added to the child care page.

b) Head Start and Early Head Start Programs Head Start and Early Head Start programs can be found on the child care web page in the resource for families’ link at the top of the page [http://jfs.ohio.gov/CDC/childcare.stm](http://jfs.ohio.gov/CDC/childcare.stm)
c) Low Income Home Energy Assistance Program (LIHEAP) The Ohio Benefit Bank does program eligibility quick checks for HEAP and lists general information and how to apply. HEAP resource links will be added to the child care page.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps) The child care website has link to SNAP. http://jfs.ohio.gov/ofam/foodstamps.stm offers information regarding SNAP and how to apply online. The Ohio Benefit Bank also does program eligibility quick checks for SNAP and offers general information and how to apply. SNAP resource links will be added to the child care page.

e) Women, Infants, and Children Program (WIC) http://jfs.ohio.gov/ofam/foodstamps.stm links to WIC at the bottom of the page. WIC resource links will be added to the child care page.

f) Child and Adult Care Food Program(CACFP) CACFP is housed within the USDAs Food and Nutrition Services (FNS) office. A link will be added to the child care website.

g) Medicaid http://www.jfs.ohio.gov/ofam/index.stm has “Related Links” which links to Medicaid. The Ohio Benefit Bank does a program eligibility quick check for Medicaid and gives general information and how to apply.

h) Children's Health Insurance Program (CHIP) CHIP is housed at the Ohio Department of Medicaid (ODM). The Ohio Benefit Bank gives general information regarding CHIP and how to apply.

i) Individuals with Disabilities Education Act (IDEA) This is housed at the US Department of Education. A link will be added to the child care webpage.

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten) N/A

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program) N/A

2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs. For example, does the State/Territory provide information to providers through CCR&R outreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc.?

a) Temporary Assistance for Needy Families (TANF) The Child Care website http://www.jfs.ohio.gov/ofam/index.stm offers links to apply for TANF online or in-person. Also, the Ohio Benefit Bank does program eligibility quick checks for TANF. TANF resource links will be added to the child care page.

b) Head Start and Early Head Start Program HS and EHS programs can be found on the child care website resources for families’ link at the top of the page. http://jfs.ohio.gov/edc/BCCD.stm
c) Low Income Home Energy Assistance Program (LIHEAP) The Ohio Benefit Bank does program eligibility quick checks for HEAP and lists general information and how to apply. HEAP resource links will be added to the child care page.

Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)

d) The Child Care website has a link to SNAP. [http://jfs.ohio.gov/ofam/foodstamps.stm](http://jfs.ohio.gov/ofam/foodstamps.stm) offers information regarding SNAP and how to apply online. The Ohio Benefit Bank also does program eligibility quick checks for SNAP and offers general information on how to apply. SNAP resource links will be added to the child care page.

e) Women, Infants, and Children Program (WIC) [http://jfs.ohio.gov/ofam/foodstamps.stm](http://jfs.ohio.gov/ofam/foodstamps.stm) links to WIC at the bottom of the page. WIC resource links will be added to the child care website.

f) Child and Adult Care Food Program (CACFP) CACFP is housed within the USDAs Food and Nutrition Services (FNS) office. A link will be added to the child care website.

g) Medicaid [http://www.jfs.ohio.gov/ofam/index.stm](http://www.jfs.ohio.gov/ofam/index.stm) has “Related Links” which links to Medicaid. The Ohio Benefit Bank does a program eligibility quick check for Medicaid and give general information and how to apply.

h) Children's Health Insurance Program (CHIP) CHIP is housed at the ODM. The Ohio Benefit Bank gives general information regarding CHIP and how to apply.

i) Individuals with Disabilities Education Act (IDEA) This is housed at the US Department of Education. A link will be added to the child care webpage.

j) Other State/Federally Funded Child Care Programs (example-State Pre-K) N/A

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program) N/A

2.2.6 Describe how the State/Territory makes available information to parents of eligible children, the general public, and where applicable, providers (see also section 6) about research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement. (658E(c)(2)(E)(VI))

a) Describe how the State/Territory makes information about research and best practices in child development available to 1) parents of eligible children, 2) providers and 3) the general public. Information regarding child development will be included as a resource on the ODJFS Child Care website with the expected target completion date of 9/1/16.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) Linkage to resources on the ODJFS Child Care website.

c) Describe who you partner with to make information about research and best practices in child development available. The ODJFS will gather information from the Ohio Department of Health (ODH), Redtreehouse.org, HS, the ODE, the ODHMAS and other online parental educational resources in order to provide the most information regarding child development from across many areas.
2.2.7 Describe how information on the State/Territory’s policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (from birth to five for purposes of this requirement), in early childhood programs receiving CCDF is collected and disseminated to 1) parents, 2) providers and 3) the general public. (658E(c)(2)(E)(i)(VII))

a) Describe how the State/Territory makes information regarding social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to parents of eligible children, providers and the general public. At minimum, describe what you provide (e.g., early childhood mental health consultation services to child care programs) and how (i.e., methods such as written materials, direct communication, etc.) for each group:

i. Parents Child Care web site links to various other agency websites and resources, including the Ohio Department of Mental Health and Addiction Services (ODMHAS)

ii. Providers Early Childhood Mental Health Consultants, Health Consultants provide on site assistance to providers.

iii. General public Child Care web site links to various other agency websites as resources, including ODMHAS.

b) Describe any partners used to make information regarding social-emotional/behavioral and early childhood mental health of young children available CCR&Rs and OCCRA, Early Childhood Mental Health Consultants

c) Does the State have a written policy regarding preventing expulsion of:

- Preschool-aged children (from birth to five) in early childhood programs receiving child care assistance?

  □ Yes. If yes, describe how the State/Territory makes information about that policy available to parents, providers and the general public (what you provide, how you provide and any partners used) and provide a link _____

  X No.

- School-age children from programs receiving child care assistance?

  □ Yes. If yes, describe how the State/Territory makes information about that policy available to 1) parents, 2) providers and 3) the general public (what you provide, how you provide and any partners used) and provide a link _____

  X No.

2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

The State/Territory must develop and describe procedures for providing information on and referring families to existing developmental screening resources and services. (658E(c)(2)(E)(ii))

At a minimum, the State/Territory must establish procedures to provide information to families
and child care providers on: (1) 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.); and (2) a description of how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children receiving CCDF who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays. Describe the status of the State/Territory’s procedures for providing information on and referring families to existing developmental screening services.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency policy citation(s) and:

a) Describe procedures, including timelines for when infants, toddlers and preschoolers should be screened

b) Describe how CCDF families or child care providers receiving CCDF may utilize the resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays

X Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

c) Overall Target Completion Date (no later than September 30, 2016) September 30, 2016

d) Current Overall Status – Describe the State/Territory’s overall status toward completion of implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Substantially implemented

   ○ Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable

   ○ Early and Periodic Screening, Diagnosis and Treatment (PSDT) program – This program requires that state officials periodically screen Medicaid eligible children for health problems and, if identified, requires the program to provide necessary health care, diagnostic services and treatment. This is completed through the physician’s office. Ohio requires all children in child care to annually complete a medical statement that is signed by a physician.

   ○ The Health Promotion Consultant (HPC) network, which is funded by the Early Learning Challenge Grant (ELCG) through the ODH in
collaboration with partner agencies, provides no-cost training on the Ages and Stages Questionnaire (ASQ) and the Ages and Stages Questionnaire: Social-Emotional (ASQ:SE). The HPCs target early learning professionals serving children with high needs, specifically publicly funded child care (PFCC), and provide them with both training on how to use the developmental screening tools, as well as information on where to refer children if concerns are identified. Parents and caregivers with concerns regarding their child’s development can have their infant or toddler evaluated by an interdisciplinary team at absolutely no cost to the family. Children are evaluated for delays in the areas of adaptive, cognitive, communication, physical, and social-emotional development using appropriate diagnostic tools. Should intervention be deemed necessary, individualized services are provided to the child and family through a Service Coordinator who guides the family through every aspect of the process, from program entry until the child transitions out by age 3.

- The Early Childhood Mental Health (ECMH) consultants, funded through the OHMAS, also offer training, as well as intervention, regarding the social emotional domain to providers and families.

- Unmet requirement - Identify the requirement(s) not fully to be implemented Add to licensing rules for all provider types that providers must notify their parents of the program policy on screening and assessments.
  - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
    - Legislative change in the current rule rewrite package
      - Projected start date for each activity In progress
      - Projected end date for each activity September 30, 2016.
      - Agency – Who is responsible for complete implementation of this activity ODJFS
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity N/A

2.2.9 Describe how the State/Territory meets the requirement to maintain a record of substantiated parental complaints. (658E(c)(2)(C))
  a) How does the State/Territory define substantiated parental complaint? A substantiated complaint is defined as any alleged rule non-compliance determined to be accurate.
  b) How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format)? The CDJFS agencies must keep records of complaints investigated against licensed
Type B Home providers and certified In-Home Aides and must make the results available upon request by the public. The ODJFS maintains records of complaints investigated against licensed Type A Home providers and centers, and also makes the results available upon request by the public. For centers and Type A Homes, records are maintained in a database and electronic copies of the report are available following the agencies record retention policies. The records are available for programs for five years following the inspection or two years after the program closes. The CDJFS agencies maintain records for licensed Type B Homes. The ODE maintains all complaints concerning the operation of programs regulated by ORC sections 3301.52 to 3301.59 in an electronic file for five years.

c) How does the State/Territory make substantiated parental complaints available to the public on request? Any individual may receive a copy of any complaint following the agencies’ public records policy. Individuals must contact the state or the CDJFS to request the information. Substantiated complaint reports are also available on the ODJFS Child Care website: [http://jfs.ohio.gov/cdc/childcare.stm](http://jfs.ohio.gov/cdc/childcare.stm). The ODE complaint information is available upon request and included as a part of an annual report posted on the ODE website for public view.

d) Describe how the State/Territory defines and maintains complaints from others about providers. All complaints are maintained in the same manner regardless of the source of the complaint. The ODE complaint information is available upon request and included as a part of an annual report posted on the ODE website for public view.

2.2.10 How will the Lead Agency or partners provide outreach and services to eligible families for whom English is not their first language?

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

- [X] Application in other languages (application document, brochures, provider notices)
- [ ] Informational materials in non-English languages
- [ ] Training and technical assistance in non-English languages
- [ ] Website in non-English languages
- [ ] Lead Agency accepts applications at local community-based locations

- [X] Bilingual caseworkers or translators available
- [ ] Bilingual outreach workers
- [ ] Partnerships with community-based organizations
- [ ] Other _____
- [ ] None

2.2.11 If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that
the State/Territory has the ability to have translation/interpretation in all primary and secondary languages – Spanish and Somali

2.2.12 Describe how the Lead Agency or partners provide outreach and services to eligible persons with disabilities Ohio Administrative Code (OAC) 3301-51-01 to 3301-51-09, 3301-51-11 and 3301-51-21 contain the Ohio Operating Standards for the Education of Children with Disabilities outlining state requirements related to the federal Part B IDEA requirements that apply to the provision of special education and related services to children with disabilities. The child’s school district of residence is responsible for ensuring that a child over the age of 3 with a disability has a Free Appropriate Public Education (FAPE) available to them.

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing the State/Territory processes for licensing and monitoring child care providers, processes for conducting criminal background checks as required by law (see section 5.3), and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse in child care settings.

The State/Territory also must make public certain information about the results of such monitoring as required by law for both licensed and unlicensed providers receiving CCDF (see section 5.2) on a website in a way that is consumer-friendly and in an easily accessible format. (658E(c)(2)(D)) In order for a website to be a useful tool for parents, it should be easy to navigate, with a minimum number of clicks, and in plain language. States and Territories must post the results of the monitoring and inspection reports on the website no later than November 19, 2017. All other components of the website must be completed no later than September 30, 2016.

2.3.1 Describe the status of State/Territory’s consumer education website.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Provide the link to the website [link] and describe how the consumer education website meets the requirements to:

a) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations). Describe [description]

b) Include a description of health and safety requirements and licensing or regulatory requirements for child care providers. Describe [description]

c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers. Describe [description]

d) Provide annual aggregate information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe [description]

e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in
plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate. Describe

X Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date. Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

f) Overall Target Completion Date (no later than September 30, 2016 for all components of the website except posting the results of the monitoring on the website which is November 19, 2017) September 30, 2016 and November 19, 2017

g) Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) In progress and partially completed

h) Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable

o Unmet Requirement(s) – Identify the requirement(s) that is not fully to be implemented to date if applicable. Currently, the ODJFS website shares provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations) except for Type B Home providers- this will be added with the release of the system in the Fall of 2016. Policy regarding health and safety requirements and licensing regulatory requirements are found in the OAC. Child care centers regulatory requirements are found in Chapter 5101:2-12, Type A Homes are found in Chapter 5101:2-13 and Type B Home requirements are found in Chapter 5101:2-14. The ODJFS is in the process of a rule re-write set to be effective in the Fall of 2016 with the release of the system updates. This re-write will combine Type A and Type B home provider rules into one chapter. Access to rules online is found here [http://jfs.ohio.gov/cdc/rules_forms.stm](http://jfs.ohio.gov/cdc/rules_forms.stm) for providers. A link will be added to the family resource page to access the rules online. The ODE website provides an online directory of preschool and school-age programs licensed by the ODE. Health and safety licensing inspection information is currently required to be posted at each program site in a conspicuous location. Inspection reports will be accessible through the consumer education website scheduled for release Fall of 2016. Health and safety requirements are found in
OAC. Access to these rules online can be found here http://education.ohio.gov/Topics/Early-Learning/Preschool-Licensing

- Unmet Requirement(s) – Identify the requirement(s) that is not fully to be implemented The ODE and Type B Home provider inspection reports will be listed on the website as will the number of deaths once the system is updated in the Fall of 2016. ODJFS is currently reviewing the website to make it more user friendly (requiring fewer clicks, making headings more clear, etc.)

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
  Type B Home provider, In-Home Aide, Approved Day Camp and the ODE inspection reports will be added to the website at the time of the system release but no later than November 19, 2017.
  Revamping the child care website has already begun with an expected completion date of September 30, 2016.

  - Projected start date for each activity Already begun
  - Projected end date for each activity September 30, 2016 and November 19, 2017.
  - Agency – Who is responsible for complete implementation of this activity ODJFS
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity N/A

3 Provide Stable Child Care Financial Assistance to Families

The expanded purposes of CCDBG highlight the opportunities States and Territories have to “deliver high-quality, coordinated early childhood care and education services to maximize parents’ options and support parents trying to achieve independence from public assistance”; and “to improve child care and development of participating children.” (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements – and the opportunity for children to form trusting relationships with teachers – are often interrupted and unstable. Child care financial assistance policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).
The CCDBG Act of 2014 included requirements to establish minimum 12-month eligibility and redetermination periods, requiring that States and Territories have 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 job search of not less than three (3) months, and to describe policies for graduated phase-out of assistance. The definition of an eligible child includes that a family’s assets may not exceed $1,000,000 (as certified by a member of such family). Procedures for enrollment of homeless children and children in foster care if served pending completion of documentation are also now required. There is nothing in statute to prohibit States from establishing policies that extend eligibility beyond 12 months or establish other similar policies to align program requirements that allow children enrolled in Head Start, Early Head Start, state or local pre-kindergarten and other collaborative programs to finish the program year and to promote continuity for families receiving services through multiple benefits programs.

3.1 Eligible Children and Families

At the point in time when eligibility is determined, children must (1) be under the age of 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 such family); and who (3)(a) resides with a parent or parents who are working or attending a job training or educational program; or (b) is receiving, or needs to receive, protective services and resides with a parent or parents not described in (3a.).

3.1.1 Eligibility Criteria Based upon Child’s Age

a) The CCDF program serves children from birth (weeks/months/years) to through 12 years (through age 12).

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))

   X Yes, and the upper age is 18 years old (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity “Special needs” means providing child care services to a child who is under eighteen years old who does not function according to age appropriate expectations in one or more of the following areas of development: social/emotional, cognitive, communication, perceptual-motor, physical, or behavioral development, or the child has chronic health issues. The child's delays/conditions affect development to the extent that the child requires special adaptations, modified facilities, program adjustments or related services on a regular basis in order to function in an adaptive manner.

   [ ] No.

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))

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

   X No.
3.1.2 How does the Lead Agency define the following eligibility terms?

a) residing with –

1. One or more caretaker(s) and all minor children who reside with the caretaker in the same household.
2. A caretaker, the caretaker's minor child and the child of the minor child when all reside in the same household unless the minor child is participating in the LEAP program; or
3. A caretaker who has shared custody of minor children when all the children reside with the caretaker in the caretaker's household; or
4. A caretaker who is a foster parent or stepparent and all of the minor children who reside with the caretaker in the same household or
5. Married caretakers and all minor children who reside with the caretakers in the same household.
6. Unmarried caretakers who live in the same household with a common child and all of the minor children who reside with them. Both caretakers shall be a caretaker for all the children in the family.

b) in loco parentis – "In loco parentis" means an adult who is the caretaker of a child, including a relative, foster parent or stepparent, who is charged with the rights, duties and responsibilities of a parent and whose presence in the home is needed to perform these rights, duties and responsibilities.

3.1.3 Eligibility Criteria Based on Reason for Care

a) How does the Lead Agency define “working, attending job training and education” for the purposes of eligibility at the point of determination? Provide a brief description below, including allowable activities and if a minimum number of hours is required by State/Territory (not a federal requirement).

- **Working:** Working means to permit the caretaker to participate in paid employment on a full-time or part-time basis. A caretaker, who is currently eligible for child care, shall be approved for up to thirty days of child care if the county department of job and family services (CDJFS) agency has documentation that an approved activity is scheduled to begin within the thirty-day period.

- **Attending job training:** Attending job training means to permit the caretaker to participate in education that is directly related to the individual’s employment goal and is approved by an accredited institution of higher education, an institution that has a certificate issued or has authorization from the Ohio Board of Regents, or an institution that has a registration from the State Board of School and College Registration. Job skills training activities may include, but are not limited to:
  - classroom job skills training
  - supervised on-the-job skills training
○ refresher job skills training

• Attending education: Attending education means allowing the caretaker to attending basic education classes and/or post-secondary education activities.

  Basic education classes include:
  ○ High school or equivalent education
  ○ Remedial high school education
  ○ Adult basic and literacy education (ABLE)
  ○ Education for individuals with limited English proficiency
  ○ The classes must take place at an official practice center site or part of a limited English proficiency program where an instructor is present.

  Post-secondary education activities include college classes, technical classes or vocational classes that are part of a course of study leading to a degree, a certificate or a license.

  ○ The classes shall be approved by an accredited institution of higher education, an institution that has a certificate issued or has authorization from the Ohio Board of Regents, or an institution that has a registration from the State Board of School and College Registration.

  ○ When educational activities are accessed via electronic media, the number of hours approved for child care shall not exceed the number of credit hours per week for the course, as defined by the educational institution.

  ○ Applicants who have previously completed the requirements for a baccalaureate degree do not qualify for assistance, unless the education is necessary to meet specific requirements associated with maintaining employment, certification or licensure.

  ○ Applicants, who have completed one hundred forty-four undergraduate semester hours or two hundred sixteen undergraduate quarter hours, or the combined equivalent, are not eligible for child care benefits for post-secondary education.

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)?

  X Yes.

  □ No. If no, describe additional requirements ______

c) Does the Lead Agency provide child care to children in protective services?

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

  1) Definition of protective services –
“Protective services” means publicly funded child care (PFCC) services provided to assist in the care and protection of a child. One of the following requirements shall be met for protective child care:

- A case plan is prepared and maintained for a child and caretaker. The case plan shall indicate a need for protective child care to permit the caretaker to complete requirements of the case plan. Protective child care may be authorized only for a child who resides in the home of the caretaker for whom the case plan is written.

- The caretaker and child either temporarily reside in a facility providing emergency shelter for homeless families, or are determined by the CDJFS agency to be homeless, and the caretaker is not participating in an approved activity. Homeless protective child care is limited to ninety calendar days in a twelve month period, or the period of time that the caretaker and child reside in an emergency shelter, or the period of time when the caretaker and child are homeless, whichever period is shortest.

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

☐ Yes.
☐ No.

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

☐ No

3.1.4 Eligibility Criteria Based on Family Income

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

- Definition of income – -- "Gross earned income" means the total amount of gross earnings received in a month by all of the employed individuals in the family including wages legally obligated to all members of the family but which are diverted to a third party. "Gross unearned income" means the total amount of unearned income that is received in the month by all members of the family. Unearned income is income that is not gross earned income or is not gross earned income from self-employment, as defined in this rule. Unearned income includes cash contributions received by the
family from absent caretakers, persons, organizations or assistance agencies, Social Security Administration (SSA) disability, death or retirement benefits, and child support payments.

b) Provide the CCDF income eligibility limits in the table below. Complete columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete columns (c) and (d) ONLY IF the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum “exit” eligibility level if applicable and below the federal limit of 85% of current SMI. Note – If the income eligibility limits are not statewide, check here □. Describe how many jurisdictions set their own income eligibility limits □. Fill in the chart based on the most populous area of the state.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a) 100% of State Median Income (SMI) ($/month)</th>
<th>(b) 85% of State Median Income (SMI) ($/month)</th>
<th>(c) (IF APPLICABLE) “Entry” Income Level if lower than 85% Current SMI</th>
<th>(d) (IF APPLICABLE) % of SMI Maximum Income Level if lower than 85% Current SMI</th>
<th>(e) (IF APPLICABLE) $/month Maximum Income Level if lower than 85% Current SMI</th>
<th>(f) (IF APPLICABLE) % of SMI Maximum Income Level if lower than 85% Current SMI</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>0%</td>
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</tr>
<tr>
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<td>$2720</td>
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<td>54%</td>
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<td>NA</td>
</tr>
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<td>NA</td>
</tr>
<tr>
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<td>$2628</td>
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</tr>
<tr>
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<td>$4850</td>
<td>$3079</td>
<td>54%</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

Reminder - Income limits must be provided in terms of current State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. Federal poverty guidelines are available at [http://aspe.hhs.gov/poverty/index.cfm](http://aspe.hhs.gov/poverty/index.cfm).

c) SMI Source and year US Census, 2014

d) These eligibility limits in column (c) became or will become effective on September 28, 2015, outgoing eligibility is currently 300% federal poverty level (FPL) which is greater than 85% SMI.

e) Provide the link to the income eligibility limits [http://emanuals.odjfs.state.oh.us/emanuals/GetDocument.do?docLoc=C%3A%2Fodjfs%2FRea dy4Build%2F99_CCM.htm%3ASRC%23%2F1%2F2%F1%2F3%2F7%2F1&locSource=input&docId=Document(storage%3DREPOSITORY%2CdocID%3D%23node-id(439179))&titleIndx=6&version=8.0.0](http://emanuals.odjfs.state.oh.us/emanuals/GetDocument.do?docLoc=C%3A%2Fodjfs%2FReady4Build%2F99_CCM.htm%3ASRC%23%2F1%2F2%F1%2F3%2F7%2F1&locSource=input&docId=Document(storage%3DREPOSITORY%2CdocID%3D%23node-id(439179))&titleIndx=6&version=8.0.0)

3.1.5 Graduated Phase-Out of Assistance

The CCDBG Act of 2014 added a provision that requires States and Territories to provide for a graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income.
Providing a graduated phase-out supports long-term family economic stability by allowing for wage growth and a tapered transition out of the child care subsidy program. (658E (c)(2)(N)(iv)) This might be achieved through policies such as establishing a second income eligibility threshold at redetermination (e.g., establishing a different eligibility threshold for families first applying for assistance and those already receiving assistance, sometimes called and “exit threshold”) or by granting a sustained period of continued assistance to the family before termination.

Describe the status of the State/Territory’s policy regarding graduated phase-out of assistance.

X Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency’s policy citation(s) and describe the policies and procedures for graduated phase-out. Families remain eligible until income is at or above 300% FPL, which is greater than 85% SMI.

☐ Not implemented. The State must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) ______
- Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) ______
  - Implementation progress to date – Identify any requirement(s) partially or substantially implemented to date if applicable ______
  - Unmet requirement - Identify the requirement(s) not fully to be implemented ______
    - Tasks/Activities – What steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) ______
      - Projected start date for each activity ______
      - Projected end date for each activity ______
      - Agency – Who is responsible for complete implementation of this activity ______
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity ______
3.1.6 Fluctuation in Earnings

The CCDBG Act of 2014 added a requirement that the Plan shall demonstrate how the State/Territory’s (or designated local entity) processes for initial determination and redetermination take into account irregular fluctuations in earnings. (658E(c)(2)(N)(i)(II))

Note – this change requires that States and Territories have policies to account for the fact that some parents with seasonal or other types of work schedules may have irregular earnings over the course of a year, including changes that temporarily exceed 85% of SMI. States and Territories should have procedures to guide how eligibility and copayments are set in a manner to take such circumstances into account. For example, averaging family income over a period of time to broaden the scope of income verification to be more reflective of annual income rather than tied to a limited time frame that may have seasonal irregularities.

Describe the status of the State/Territory’s policy related to the fluctuation in earnings requirement.

X Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency’s policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement: If the income from the prior four week period is not representative of current or future income, the CDJFS agency shall project income based on a best estimate. The best estimate shall consider the following variables which may affect the determination. These variables include:

(i) There are more than four weeks of pay stubs available and the individual states that an average of a longer period of time is more representative, because the income received in the most recent four weeks was less or greater than the average. The county agency shall use all available income related information for the immediately preceding three month period. This includes situations when the individual disagrees with the use of income from the past four week period as representative of future income. The CDJFS agency shall use all available income related information, including the individual's projection of future earnings, to determine a representative figure. Some pay stubs reflect year-to-date earnings, which is an acceptable method of determining average income for longer than the four week period. (ii) If there are fewer than four weeks of pay stubs available, the CDJFS agency shall use all available income related information to arrive at a representative figure. This includes situations when the employed individual disagrees with the use of earnings from the past four week period as indicative of future earnings. (iii) If there are no pay stubs available because the employment is new, the CDJFS agency shall require written documentation from the employer. The documented amount shall be converted to gross monthly income as directed in this rule.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

i) Overall Target Completion Date (no later than September 30, 2016) _____
j) **Current Overall Status** – Describe the State/Territory’s overall status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) ______

k) **Implementation progress to date** - Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable ______

l) **Unmet requirement** - Identify the requirement(s) not fully to be implemented ______

   o) **Tasks/Activities** – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) ______
      - Projected start date for each activity ______
      - Projected end date for each activity ______
      - Agency – Who is responsible for complete implementation of this activity ______
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity ______

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information. Check the information that the Lead Agency documents and include in the description what information is required and how often. There are no federal requirements for specific documentation or verification procedures.

- **Applicant identity.** Describe The Ohio Department of Job and Family Services (ODJFS) allows the following to serve as verification: a birth certificate, driver’s license, passport, client statement on application.
- **Applicant’s relationship to the child.** Describe ODJFS allows the following to serve as verification: a birth certificate or client statement on application.
- **Child’s information for determining eligibility (e.g., identity, age, etc.).** Describe U.S. citizenship must be verified for eligibility determination. Birth certificates or hospital verification may be used. Verification that child is a qualified alien may also be documented.
- **Work.** Describe Pay stubs or employer verification required.
- **Job training or Educational program.** Describe Official school schedule or written verification required.
- **Family income.** Describe All forms of income must be verified using official documentation.
- **Household composition.** Describe Client statement on application.
- **Applicant residence.** Describe Client statement on application.
- **Other.** Describe ______

**Reminder** – Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who
is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start – Child Care Partnerships, or public educational standards which may include pre-k settings (http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01).

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

X Time limit for making eligibility determinations. Describe length of time 30 days from receipt of application.

☐ Track and monitor the eligibility determination process

☐ Other. Describe ______

☐ None

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

Per CCDF regulations, 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 under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization, however Lead Agencies may wish to re-examine those definitions in light of new purposes articulated in Reauthorization and to promote alignment across programs. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State/Territory TANF agency in accordance with section 407(e)(2) of the Social Security Act.

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

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

State/Territory TANF Agency ODJFS

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

- "appropriate child care" In determining if good cause exists for nonparticipation with a work requirement for a work eligible individual, the county agency shall determine if child care is a necessary supportive service when a single custodial parent caring for a minor child under age six proves a demonstrated inability for one or more of the following reasons:
(a) Unavailability of a licensed or certified child care provider within a reasonable distance from the parent's home or work site. "Reasonable distance" is defined by each county agency and is based on availability of transportation.

(b) Unavailability or unsuitability of informal child care by a relative or other arrangements. "Unsuitability of informal child care" is a decision made by the county agency and is based on information received from the Public Children Services Agency (PCSA) that the PCSA determines is relevant to share with the county agency in order to protect children pursuant to rule 5101:2-33-21 of the Administrative Code.

(c) Unavailability of appropriate and affordable formal child care arrangements. "Affordable child care arrangements" means that work eligible individuals are guaranteed eligibility for child care subsidy with copayments based on family size and income.

- "reasonable distance" Defined by each CDJFS agency and is based on availability of transportation.
- "unsuitability of informal child care" A decision made by the CDJFS agency and is based on information received from the Public Children Services Agency (PCSA) that the PCSA determines is relevant to share with the CDJFS agency in order to protect children pursuant to rule 5101:2-33-21 of the Administrative Code.
- "affordable child care arrangements" The work eligible individuals are guaranteed eligibility for child care subsidy with copayments based on family size and income.

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

X In writing
□ Verbally
□ Other. Describe _______
□ List the citation to this TANF policy 5101:2-1-3-13 of the Ohio Administrative Code (OAC).

3.1.10 The Lead Agency certifies that it will require a family member to certify that the family assets do not exceed $1,000,000. A check-off on the application is sufficient.

X Yes. The Lead Agency certifies that it will require families to certify that the family assets do not exceed $1,000,000 no later than September 30, 2016.

3.2 Increasing Access for Vulnerable Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. This did not change under reauthorization. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B))
3.2.1 Describe how the Lead Agency will prioritize or target child care services for the following children and families (658E(c)(3)(B)), including definitions, any time limits, grace periods or priority rules in the description:

a. Provide definition of “Children with special needs” A child who is under eighteen years old who does not function according to age appropriate expectations in one or more of the following areas of development: social/emotional, cognitive, communication, perceptual-motor, physical, or behavioral development, or the child has chronic health issues. The child's delays/conditions affect development to the extent that the child requires special adaptations, modified facilities, program adjustments or related services on a regular basis in order to function in an adaptive manner, and describe how services are prioritized Care for children with special needs is paid at a higher rate (5% increase with low documentation requirements and 100% increase more stringent documentation detailing the accommodations needed by the provider.

b. Provide definition of “Families with very low incomes” Families with income at or below 100% of the FPL and describe how services are prioritized Families who meet this definition do not have a copayment.

c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act) Families receiving TANF qualify for child care as long as they are completing the activities detailed in their self-sufficiency plan, even if those activities would not otherwise meet the requirements for a qualifying activity. Additionally, these families do not have copayments. Families receiving TANF will be prioritized for child care should Ohio ever institute a waitlist.

3.2.2 Improving Access for Homeless Children and Families.

The CCDBG Act of 2014 places greater emphasis on serving homeless children and families. Stable access to high-quality child care provides tremendous benefits to all children, especially our most vulnerable children. Children and families who experience homelessness face many challenges. Improving access to child care can buffer children and families from the challenges and risks associated with homelessness by supporting children’s learning and development in safe, stable and nurturing environments. Under the new law, States and Territories are required to use CCDF funds to 1) allow homeless children to receive CCDF assistance after an initial eligibility determination but before providing required documentation (including documentation related to immunizations); 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and 3) conduct specific outreach to homeless families. (658E(c)(3))

States and Territories also must establish a grace period that allows homeless children and children in foster care (if served by the Lead Agency) to receive CCDF assistance while their families are taking the necessary actions to comply with immunization and other health and safety requirements as described in Section 5. This flexibility will make it significantly easier for these vulnerable families to access child care services. This language is consistent with current requirements established through
CCDF regulations in 1998, which required a grace period in which children can receive services while families take the necessary actions to comply with the immunization requirements. (658E(c)(2)I)(i)(I)) ACF recommends States and Territories consult the definition of homeless in the McKinney-Vento Act (section 725 of subtitle VII-B) as you implement the requirements of this section as that definition is consistent with the required CCDF administrative data reporting requirements.

Describe the status of the State/Territory’s procedures to enroll and provide outreach to homeless families and establish a grace period for children in foster care, if served, for meeting immunization requirements

X Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

Describe the following:

a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements Licensing regulations already allow all families to enroll in a child care program and then provide a medical statement (including immunization information) within 30 days of the first day of care. The only information required upon starting care is a short enrollment form completed by the parent/caretaker.

b. Procedures to conduct outreach to homeless families to improve access to child care services. The CDJFS agencies throughout the 88 counties in Ohio do a variety of outreach to homeless families to improve access to child care services. County agencies work closely with homeless shelters to assist families in need and also work with local domestic violence shelters to help those displaced due to domestic violence issues. Many county agencies have constant communication with homeless shelters. County agency staff participates in meetings such as the homeless task force where information is shared with all agencies involved in homelessness. County agencies also coordinate bi-monthly Linkage meetings that social service providers in the county attend (including the school homeless coordinators, homeless shelters, and many others). Providers give updates and share information in order to better address the needs of the homeless population. Other county agencies provide outreach by giving child care applications at the county's Project Homeless Connect event each year. This is a one day service event for those who are homeless or housing insecure. Some county agencies send pamphlets to all known area homeless shelters explaining the program and how to secure child care services. School districts in certain counties have grants for homeless outreach coordinators and will connect families with those resources, including our child care program. Homeless Shelters and Homeless Services Providers in certain counties bring the customers to the county agency and assist them with completing the Child Care Application. The County has a Homeless Event every January that coincides with the "Point in Time Count" where agencies share information with the customers on what is available to them within the county.

The Child Care Resource and Referral (CR&R) agencies also provide outreach to homeless families. Relationships have been established with homeless shelters and schools in their regions. Consumer Education information is made available at food banks, homeless shelters, public preschools. CCR&R staff work directly with homeless families to assist in finding child care.
c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services. Licensing regulations already allow all families to enroll in a child care program and then provide a medical statement (including immunization information) within 30 days of the first day of care. The only information required upon starting care is a short enrollment form completed by the parent/caretaker.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

m) Overall Target Completion Date (no later than September 30, 2016) ________

n) Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) ________

  o Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable

  o Unmet requirement - Identify the requirement(s) not fully to be implemented ________

  o Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) ________

  o Projected start date for each activity ________

  o Projected end date for each activity ________

  o Agency – Who is responsible for complete implementation of this activity ________

  o Partners – Who is the responsible agency partnering with to complete implementation of this activity ________

3.3 Protection for Working Parents

3.3.1 Twelve-Month Eligibility

The CCDBG Act of 2014 establishes a minimum 12-month eligibility and redetermination period for CCDF families. States and Territories are required to demonstrate in the Plan that no later than September 30, 2016 each child who receives assistance will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for a minimum of 12 months before the State/Territory redetermines the eligibility of the child, regardless of changes in income (as long as income does not exceed the federal threshold of 85% of State median income) or temporary changes in participation in work, training, or education activities. (658E(c)(2)(N)(i) & (ii))
Note that this change means a State/Territory 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% SMI.

In addition, this change means the State/Territory may not terminate assistance prior to the end of the 12-month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. Examples of temporary changes include but are not limited to: absence from employment due to maternity or extended medical leave, changes in seasonal work schedule, or if a parent enrolled in training or educational program is temporarily not attending class between semesters.

Describe the status of the State/Territory’s establishment of 12-month eligibility and redetermination periods for CCDF families.

X Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

List the Lead Agency’s policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination Ohio grants twelve months of eligibility with no mid-year required update. Families are required to notify the CDJFS agency of any changes in household composition, income or work participation. This is not required if the caretaker works a job that changes work hours frequently. Ohio's ongoing eligibility goes beyond 85% SMI to 300% FPL. Additionally, if a caretaker loses a qualifying activity (example, losing a job, goes on maternity leave, or has an extended hospital stay) eligibility continues for 13 weeks or until the end of the current 12 month eligibility period, whichever is shorter. If a new job is established during that gap period, "traditional" eligibility is resumed through the end of the current period.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

o) Overall Target Completion Date (no later than September 30, 2016) _____

p) Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____

  o) Implementation progress to date - Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date _____

  o) Unmet requirement - Identify the requirement(s) not fully to be implemented _____

  o) Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____

    o) Projected start date for each activity _____
3.3.2  State and Territory option to terminate assistance prior to 12 months

The CCDBG Act of 2014 provides States and Territories the option – but does not require them – to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible.

(658E(c)(2)(N)(iii)) Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and redetermination period if families are eligible at the end of their job search, training or education attendance period.

Note that unless the State allows a minimum 3-month job search period – the State/Territory may not exercise the option to terminate assistance based on a parent’s non-temporary job loss or cessation of attendance at a job training or educational program prior to the end of the minimum 12-month eligibility and re-determination period. The statute does not specify any documentation that States/Territories must require parents to submit regarding activities during periods of job search or finding training or education program requirements for this period.

Does the State/Territory terminate assistance prior to 12 months due to a parent’s non-temporary loss of work or cessation of attendance at a job training or education program?

X Yes, the State/Territory terminates assistance prior to 12 months due to parent’s loss of work or cessation of attendance at a job training or education program ONLY. List the Lead Agency’s policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs. As described in section 3.3.1, Ohio allows 13 weeks of continued eligibility after the loss of a qualifying activity. If the caretaker does not have a new qualifying activity at the end of the 13 weeks, eligibility is terminated.

☐ No, the State/Territory does not allow this option.

3.3.3  Prevent Disruption of Work

The CCDBG Act of 2014 added a requirement that States and Territories must describe in the Plan the procedures and policies in place to ensure that parents (especially parents in families receiving assistance under TANF) are not required to unduly disrupt their employment, education or job training activities in order to comply with the State/Territory’s or designated local entity’s requirements for redetermination of eligibility for assistance. (658E(c)(2)(N)(ii)) Examples include implementing re-determination strategies to verify income and employment electronically as opposed to more onerous practices such as asking parents and families to come
to the subsidy office for an in-person visit, or aligning eligibility with other early care and education or public benefits programs to collect information centrally. The process by which States and Territories collect eligibility documentation represents a potential barrier to services, particularly when documentation can only be provided in-person during standard work hours. States and Territories can offer a variety of family-friendly mechanisms for submitting documentation for eligibility determinations and/or re-determination.

Describe the status of the State/Territory’s redetermination procedures and policies to ensure that parents (especially parents receiving TANF) do not have their employment, education or job training unduly disrupted in order to comply with the State/Territory’s or designated local entity’s requirements for redetermination of eligibility.

X Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency’s policy citation(s) and describe the policies and procedures for not unduly disrupting employment Ohio has a shortened redetermination form with all of the known content prepopulated for the family. Families submit income verifications and only submit qualifying activity information if the activity has recently changed. There is no requirement for this to be completed in person – the verifications can be faxed, mailed, dropped off at the front desk of the CDJFS agency, or scanned and emailed. Ohio is also working to align the eligibility periods with cash and food assistance.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

q) Overall Target Completion Date (no later than September 30, 2016) ______

r) Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) ______

○ Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable ______

○ Unmet requirement - Identify the requirement(s) not fully to be implemented ______

○ Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) ______

○ Projected start date for each activity ______

○ Projected end date for each activity ______

○ Agency – Who is responsible for complete implementation of this activity ______

○ Partners – Who is the responsible agency partnering with to complete implementation of this activity ______
3.4 **Family Contribution to Payment**

The statute requires Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care that is not a barrier to families receiving CCDF. (658E(c)(5) In addition to income and size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. The sliding fee scale is subject to review by ACF as part of ongoing monitoring efforts to CCDBG compliance.

3.4.1 Provide the CCDF copayments in the chart below according to family size for one child in care. Note – If the sliding fee scale is not statewide, check here and describe how many jurisdictions set their own sliding fee scale. Fill in the chart based on the most populous area of the State.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Minimum “Entry” Income Level Where Copayment First Applied</th>
<th>What is the monthly copayment for a family of this size upon initial entry into CCDF?</th>
<th>What is the percent of income for (b)?</th>
<th>Maximum “Entry” Income Level Before No Longer Eligible</th>
<th>What is the monthly copayment for a family of this size upon initial entry into CCDF?</th>
<th>What is the percent of income for (e)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>2</td>
<td>$1329</td>
<td>$97.27</td>
<td>7%</td>
<td>$1661</td>
<td>$149.86</td>
<td>9%</td>
</tr>
<tr>
<td>3</td>
<td>1675</td>
<td>$122.03</td>
<td>7%</td>
<td>2094</td>
<td>$188.56</td>
<td>9%</td>
</tr>
<tr>
<td>4</td>
<td>2022</td>
<td>$147.83</td>
<td>7%</td>
<td>2527</td>
<td>$228.24</td>
<td>9%</td>
</tr>
<tr>
<td>5</td>
<td>2369</td>
<td>$172.65</td>
<td>7%</td>
<td>2961</td>
<td>$266.94</td>
<td>9%</td>
</tr>
</tbody>
</table>

a) What is the effective date of the sliding fee scale(s)? September 28, 2015

b) Provide the link to the sliding fee scale

   http://emanuals.odjfs.state.oh.us/emanuals/DataImages.srv/emanuals/pdf/pdf_forms/COPAYMENTCHARTDESKAID.PDF

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

- [ ] Fee is a dollar amount and
- [ ] Fee is per child with the same fee for each child
- [ ] Fee is per child and discounted fee for two or more children
- [ ] Fee is per child up to a maximum per family
- [ ] No additional fee charged after certain number of children
- [ ] Fee is per family

- [X] Fee is a percent of income and
- [ ] Fee is per child with the same percentage applied for each child
☐ Fee is per child and discounted percentage applied for two or more children
☐ Fee is per child up to a maximum per family
☐ No additional percentage applied charged after certain number of children
X Fee is per family
☐ Contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe _____
☐ Other. Describe _____

3.4.3 Will the Lead Agency use other factors in addition to income and family size to determine each family's copayment? (658E(c)(3)(B))

☐ Yes, and describe those additional factors using the checkboxes below.
☐ Number of hours the child is in care
☐ Lower copayments for higher quality of care as defined by the State/Territory
☐ Other. Describe other factors _____
X No.

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 (98.42(c)). Will the Lead Agency waive family contributions/co-payments for families whose incomes are at or below the poverty level?

X Yes, the Lead Agency waives family contributions/co-payments for families with income at or below the poverty level for families of the same size. The poverty level used by the Lead Agency for a family size of 3 is $1674 per month.

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

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

X Limits the maximum co-payment per family. Describe The copayment is set at the family level and does not increase if there are multiple providers per child or multiple children receiving care.

☐ Limits combined amount of copayment for all children to a percentage of family income. List the percentage of the copayment limit and describe _____

X Minimizes the abrupt termination of assistance before a family can afford the full cost of care (“the cliff effect”) as part of the graduated phase-out of assistance discussed in 3.1.5. Describe The co-payment is determined as a percentage of the family’s income. The percentage increases gradually from 0% for families under 100% of the Federal Poverty Level (FPL) to a maximum of 27% for families at 300% FPL.
X Does not allow providers to charge families the difference between the maximum payment rate (addressed in section 4) and their private pay rate in addition to the copayment they are paying. Describe Charging the difference between the state reimbursement rate the provider's private pay rate is prohibited by rule 5101:2-16-41 of the OAC.

☐ Covers all fees (such as registration, supplies, field trips) to minimize the additional fees charged to the families by the provider. Describe ______

X Other. Describe Co-payments are evenly divided by child and authorization and then rounded down to the nearest dollar to ease in payment by families and collection by providers, which is often handled in cash.

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

The 2014 reauthorization of the CCDBG Act is designed to help States and Territories advance improvements to the quality of child care in order to promote the healthy social-emotional, cognitive and physical development of participating children. Ensuring that low-income and vulnerable children can access high-quality care (and remain enrolled to school entry and beyond) is an equally important purpose of CCDBG. Payment levels and policies have a major impact on access.

The CCDBG Act of 2014 revises the requirement for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child. Also, a State/Territory may develop and conduct an alternative methodology for setting payment rates, such as a cost estimation model, to take into account the cost of meeting quality requirements.

To provide stability of funding and encourage more child care providers to participate in the subsidy program, the State/Territory’s payment practices for CCDF child care providers must reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory, such as paying for supplies, field trips, registration fees. In addition, to the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child’s occasional absence due to holidays or unforeseen circumstances such as illness or closures due to emergency.

The CCDBG Act of 2014 added a provision that the State/Territory must also develop and implement strategies to increase the supply and improve the quality of child care services for: (1) children in underserved areas; (2) infants and toddlers; (3) children with disabilities (the CCDBG Act of 2014 added a new definition of child with disability (658(P)(3))); and (4) children who receive care during non-traditional hours. With respect to investments to increase access to programs providing high-quality child care and development services, the State/Territory must give priority to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs. (658 E(c)(2)(M))
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 enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A)) This did not change under the CCDBG Act of 2014.

4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2)) A public searchable database of all child care providers licensed by the Ohio Department of Job and Family Services (ODJFS) or certified by the county department of job and family services (CDJFS) agencies is available online [http://www.odjfs.state.oh.us/cdc/query.asp]. The database can be searched by location, provider type, name etc and includes whether or not the provider has an agreement with ODJFS to provide publicly funded child care (PFCC). The database also includes information about Step Up To Quality (SUTQ) and the programs current rating (if applicable). County agencies also offer lists of providers with agreements to clients.

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

- [ ] Certificate form provides information about the choice of providers, including high quality providers
- [ ] Certificate is not linked to a specific provider so parents can choose provider of choice
- [x] Consumer education materials on choosing child care
- [x] Referral to child care resource and referral agencies
- [ ] Co-located resource and referral in eligibility offices
- [x] Verbal communication at the time of application
- [ ] Community outreach, workshops or other in-person activities
- [x] Other. Describe The ODJFS searchable database includes all available providers regulated by the ODJFS.

4.1.3 Child Care Services Available through Grants or Contracts

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

- [ ] Yes. If yes, describe:
  - the type(s) of child care services available through grants or contracts
    -
  - the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.)

the process for accessing grants or contracts
the range of providers available through grants or contracts
how rates for contracted slots are set through grants and contracts
how the State/Territory determines which entities to contract with for increasing supply and/or improving quality
if contracts are offered statewide and/or locally
X No. If no, skip to 4.1.4.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following (check all that apply):

☐ Increase the supply of specific types of care with grants or contracts for:

☐ 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 ______

☐ Improve the quality of child care programs with grants or contracts for:

☐ Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs
☐ Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-k programs that meet higher quality standards
☐ Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased education requirements to higher compensation
☐ Programs to serve children with disabilities or special needs
☐ Programs to serve infants and toddlers
☐ Programs to serve school-age children
☐ Programs to serve children needing non-traditional hour care
☐ Programs to serve homeless children
Programs to serve children in underserved areas
□ Programs that serve children with diverse linguistic or cultural backgrounds
□ Programs that serve specific geographic areas
   □ Urban
   □ Rural
□ Other. Describe ______

4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access ODJFS rules require unlimited access as condition of licensing or certification.

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

□ 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 number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act. Describe Care is limited to the children who reside in the home and up to 2 of the IHAs own children.
   □ Restricted based on provider meeting a minimum age requirement. Describe ______
   □ Restricted based on hours of care (certain number of hours, non-traditional work hours). Describe ______
   □ Restricted to care by relatives. Describe ______
   □ Restricted to care for children with special needs or medical condition. Describe ______
   □ Restricted to in-home providers that meet some basic health and safety requirements. Describe IHAs must be certified by the CDJFS agency. The certification includes background checks, training requirements, and annual inspections for health and safety requirements.
   □ Other. Describe ______

□ No

4.2 Assessing Market Rates and Child Care Costs
The new law revises the provisions for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the price to parents of child care services by geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because
the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in advance of the Plan submittal in order to avoid delays with Plan approval (see http://www.acf.hhs.gov/programs/occ/resource/ccdf-reauthorization-faq).

The MRS or alternative methodology must be developed and conducted no earlier than two years before the date of submission of the Plan (instead of two years before the effective date of the Plan, as previously required for the MRS).

The State must consult with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State/Territory must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Internet in an easily interpretable and understandable form.

The State/Territory must set CCDF subsidy payment rates in accordance with the results of the current MRS or alternative methodology. When setting payment rates, the law requires States and Territories to take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered reimbursement or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number served as of November 2014. In taking the cost of providing quality into consideration, it is important to consider such key factors as what it takes to support increased stability and reduced provider turnover when setting payment rates.

4.2.1 Developing and Conducting a Market Rate Survey (MRS) and/or an Alternative Methodology. Did the State/Territory conduct a statistically and valid and reliable MRS, alternative methodology or both between July 1, 2013 and March 1, 2016?

X MRS
☐ Alternative Methodology. Describe ______
☐ Both. Describe ______
☐ Other. Describe ______

4.2.2 Describe how the State consulted with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities which could include worker organizations prior to developing and conducting the MRS or alternative methodology. Prior to finalization of the Market Rate Survey ODJFS asked the vendor to present preliminary findings at both the Child Care Advisory Council (CCAC) and the Early Childhood Advisory Council (ECAC). As a result of these discussions several additional questions were raised which included, but were not limited to: 1. Comparison to other States, 2. Outlook of further reducing payment categories (rural vs. urban), comparison of the market rate survey to current payment rates.
In addition, to the above the state also evaluated the use of the survey vs. utilizing the data provided to the Ohio Child Care Resource and Referral Association (OCCRRA). The state continues to look for more reliable ways to establish the payment rates for providers outside of an individualized voluntary survey to further ensure unbiased results. 4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable. To be considered valid and reliable, the MRS or alternative methodology must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variation, 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 models that estimated the cost of delivering services in center- and home-based settings at each level of quality defined by the State/Territory. The last MRS was conducted in the Fall of 2014 and finalized in February 2015. The ODJFS administers the market rate survey through The Ohio State University Statistical Consulting Services Department (OSU, SCS). Each licensed, certified and registered provider is asked to participate in an on-line survey (or alternative method) to report their rates and other information. The response rate for licensed center and large home providers was 39.54%; the response rate for licensed home providers was 25.25%; the overall response rate of all providers was 32.67%. OSU, SCS determined that the response rate was high enough to provide statistically valid and reliable data. The analysis of the survey data resulted in four unique rate structures to which all of Ohio’s 88 counties were assigned. The analysis showed an increase of the cost of child care in Ohio.

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

a) Geographic area (e.g., statewide or local markets) Ohio has 88 counties; four groupings were created so that counties within a single group had the same payment rate for PFCC.

b) Type of provider Licensed Centers, Type A Homes and Type B Homes were offered the survey, the data was separated and analyzed by provider type. IHAs were not surveyed. Head Start (HS) and programs that provide only preschool services were removed because their funding is different and parents don’t privately pay for those services.

c) Age of child Survey questions were structured according to the following age categories: infant, toddler, pre-school and school age.

d) Describe any other key variations examined by the market rate survey, such as quality level N/A

4.2.5 Describe the process used by the State/Territory to prepare a detailed report containing the results and make the report widely available to the public.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016) February 2015

b) Date report containing results was made widely available, no later than 30 days after the completion of the report March 2015
c) How the report containing results was made widely available and provide the link where the report is posted if available. The 2014 Market Rate Survey was posted on the ODJFS website, http://jfs.ohio.gov/cdc/docs/MarketRateSurvey2014.stm

4.3 Setting Payment Rates

4.3.1 Provide the base payment rates and percentiles (based on current MRS or alternative methodology) for the following categories. The ages and types of care listed below are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory or reflective of the terms that your State/Territory may use for particular ages. Please use the most populous geographic region (serving highest number of children). Note – If the payment rates are not set by the State/Territory, check here. Describe how many jurisdictions set their own payment rates.

a) Infant (6 months), full-time licensed center care in most populous geographic region
   - Rate $164.61 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 16th

b) Infant (6 months), full-time licensed family child care (FCC) care in most populous geographic region
   - Rate $138.45 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 16th

c) Toddler (18 months), full-time licensed center care in most populous geographic region
   - Rate $150.51 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 16th

d) Toddler (18 months), full-time licensed FCC care in most populous geographic region
   - Rate $126.23 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 16th

e) Preschooler (4 years), full-time licensed center care in most populous geographic region
   - Rate $131.57 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 16th

f) Preschooler (4 years), full-time licensed FCC care in most populous geographic region
   - Rate $116.21 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   - Percentile 16th
g) School-age child (6 years), full-time licensed center care in most populous geographic region
   • Rate $70.43 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   • Percentile 16th
h) School-age child (6 years), full-time licensed FCC care in most populous geographic region
   • Rate $96.04 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   • Percentile 16th

i) Describe the calculation/definition of full-time care  
   Full time care is defined as 25 hours to 60 hours of care

j) Provide the effective date of the payment rates
   7/1/2009

k) Provide the link to the payment rates
   http://emanuals.odjfs.state.oh.us/emanuals/DataImages.srv/emanuals/pdf/pdf_forms/2-16-41APXA.PDF

4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care. In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., 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 which types of tiered payment or rate add-on, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates, amount or percentage of the tiered rate/add-on, and indicate if the rates were set based on the MRS or another process.

X Tiered rate/rate add-on for non-traditional hours. Describe Ohio pays an additional 5% for non-traditional hours (7pm – 6 am weekdays and 12am Saturday – 6 am Monday) as well as the following holidays: New Year’s day, Thanksgiving day, Christmas day, Memorial Day, Labor Day, Independence Day and Martin Luther King, Jr. day.

X Tiered rate/rate add-on for children with special needs as defined by the State/Territory. Describe Five % with minimal documentation or 100% additional pay for a documented need.

☐ Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on). Describe _____
X Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory. Describe 1-star: 5%, 2-star or accredited: 10%, 3-star: 15%, 4-star: 20%, 5-star: 25%

☐ Tiered rate/rate add-on for programs serving homeless children. Describe ______

☐ Other tiered rate/rate add-on beyond the base rate. Describe ______

☐ None.

4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology Ohio conducted a MRS in 2014 and reviewed the analysis of data collected. The state did not revise the rates established in 2008 due to budget considerations and that the payment rates currently in place have allowed the ODJFS to continue serving a comparable number of families and children through a comparable number of child care providers. Rather than revise base rates, the focus stayed on funding programs in the SUTQ program in order to ensure high quality care.

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014. For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary.

4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access

The CCDF plan shall provide a summary of data and facts relied on by the State/Territory to certify that payment rates are sufficient to ensure equal access. (658E (c)(4)(A)) Equal access is not limited to a single percentile alone but is inclusive of various metrics or benchmarks that would offer children receiving CCDF access to the same services (type of care, quality of care) as children not receiving CCDF.

4.4.1 What data and facts did the State use to determine equal access (i.e., what is your metric or benchmark of equal access – such as percentile that rates cover or proportion of costs covered)? Check all that apply and describe.

☐ Payment rates are set at the 75th percentile or higher of the most recent survey. Describe ______

X Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs.
X Rates based on data on the cost to the provider of providing care meeting certain standards. Describe The state continues to evaluate rates based on the market rate survey, data provided by stakeholders as a result of the provider cost of quality calculator, internal data which includes reviewing authorizations and utilization rates along with other state comparisons.

☐ Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile. Describe _____

X Data on the proportion of children receiving subsidy being served by high-quality providers. Describe The state continues to evaluate rates based on the market rate survey, data provided by stakeholders as a result of the provider cost of quality calculator, internal data which includes reviewing authorizations and utilization rates along with other state comparison.

X Data on where children are being served showing access to the full range of providers. Describe Caretakers who are determined eligible may choose any eligible provider. An eligible provider is a licensed child care center, licensed Type A Home, licensed Type B Home, certified IHA, licensed school child care center, licensed preschool program, licensed school child program, an approved day camp, or a camp accredited by the American Camping Association (ACA). Any of these entities that have entered into a Provider Agreement with the ODJFS may provide PFCC services.

X Data on how rates set below the 75th percentile allow CCDF families access to the same quality of care as families not receiving CCDF. Describe Describe Over the last several years the number of families and children served in the Publicly Funded Child Care Program has remained consistently between 55,000-65,000 families and 110,000-120,000 children per month. The number of providers licensed by ODJFS has remained consistently at approximately 8,000. The data demonstrates that although the payment rates are less than the 75th percentile, the rates allow families’ access to PFCC. Additionally, Ohio does not have a waiting list; all families that apply for PFCC and meet the eligibility requirements are able to receive the benefit.

☐ Feedback from parents, including parent survey or parent complaints. Describe _____

☐ Other. Describe _____

4.4.2 Does the State/Territory certify that payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology?

X Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access by March 1, 2016. Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access Equal access has been
assured in Ohio. The ODJFS conducts a MRS every biennium and establishes rates for each provider type and child age group. During the review process of the most recent market rate survey, conducted by The Ohio State University and completed 2014, the primary goal of the project was to develop reasonable estimates of the distribution of unsubsidized rates charged within well-defined service categories. In addition, a secondary goal was to identify, if they exist, unique market areas within the state where the distributions of rates are both statistically and meaningfully different across the areas.

Four market categories were established. Market rates have been established at the twenty sixth (26th) percentile statewide of the 2008 MRS for all provider types and age groups. Due to funding constraints and other policy considerations, the rates have not increased since 2008.

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

s) Overall Target Completion Date (no later than September 30, 2016) _____

t) Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____

  o Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable _____

  o Unmet requirement - Identify the requirement(s) not fully to be implemented _____

    o Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____

      • Projected start date for each activity _____
      • Projected end date for each activity _____
      • Agency – Who is responsible for complete implementation of this activity _____
      • Partners – Who is the responsible agency partnering with to complete implementation of this activity _____
4.5 Payment Practices and Timeliness of Payments

The CCDBG Act of 2014 added a provision that requires States and Territories to describe in the Plan how the State/Territory’s payment practices for CCDF child care providers reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory —so as to provide stability of funding and encourage more child care providers to participate in the subsidy program. To the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child’s occasional absences due to holidays or unforeseen circumstances such as illness. (658E(c)(2)(S))

4.5.1 Describe the status of State/Territory’s payment practices for CCDF child care providers that reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory.

X Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 4.5.2 through 4.5.3 below.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

u) Overall Target Completion Date (no later than September 30, 2016) _____

v) Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____

   o Implementation progress to date – Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable _____

   o Unmet requirement - Identify the requirement(s) not fully to be implemented _____

   o Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

   _____

   • Projected start date for each activity _____

   • Projected end date for each activity _____

   • Agency – Who is responsible for complete implementation of this activity _____

   • Partners – Who is the responsible agency partnering with to complete implementation of this activity _____
4.5.2 Describe how the payment practices to child care providers who serve CCDF-assisted children reflect generally accepted payment practices of other child care providers in the State/Territory to ensure stability of funding to encourage more child care providers to serve children who receive CCDF assistance. **Check all that apply and describe.** The Lead Agency …

- Pays prospectively prior to the delivery of services. Describe _____

- X Pays within no more than 21 days of billing for services. Describe **The ODJFS has an automated computer system that calculates payments, Ohio Electronic Child Care (ECC). The calculated payment is transmitted to the department’s child care information data system which then issues payments to providers via electronic funds transfer. Weekly payments are made three weeks after the service week. This allows families a three week period to back swipe their benefit card to record attendance for days when care was provided but the card wasn’t used.**

- X Supports fixed costs of providing child care services by delinking provider payments from a child’s occasional absences by paying based on enrollment instead of attendance. Describe including the State/Territory’s definition of occasional absences. **Children are authorized based on the parental needs to support their work or school activity. Authorizations are:**
  - Hourly-up to 6.9 hours per week
  - Part time-7 to 24.9 hours per week
  - Full time-25-59.9 hours per week
  - Greater than full time-over 60 hours

  Providers are paid according to the category of care utilized (hourly, part time, full time or greater than full time).

  A provider can bill up to ten absent days per six months (January 1-June 30 and July 1-December 31) for each child authorized to their care. The absent days are to be billed when a child is absent and care would have been provided had the child attended.

- Supports fixed costs of providing child care services by delinking provider payments from a child’s occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe _____

- Supports fixed costs of providing child care services by delinking provider payments from a child’s occasional absences by providing full payment if a child is absent for a certain number of days in a month. Specify the number of absence days allowed and paid for and describe _____

- X Pays on a full-time or part-time basis (rather than smaller increments such as hourly) **Providers are paid according to defined categories of care. Children are authorized based on the parental needs to support their work or school activity. Authorizations are:**
  - Hourly-up to 6.9 hours per week
  - Part time-7 to 24.9 hours per week
  - Full time-25-59.9 hours per week
  - Greater than full time-over 60 hours
☐ Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.)

X Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment any notice sent to families regarding approvals, changes or denials to child care benefits are also sent to the provider to whom the child is authorized. Confidential information is deleted from the notice prior to sending to the provider.

X Has a timely appeal and resolution process for payment inaccuracies and disputes. Describe The ODJFS has a secure website to which providers have access to view their payment information. This website contains information on each child authorized to their care, the attendance tracked for each week and the amount paid for that care, including any additional rate calculations for accreditation, SUTQ, non-traditional hours and special needs care. Providers who disagree with the payment amount can submit a manual claim for unpaid care and adjustment request for partial payments. Providers have seven weeks from the date care was provided to submit the claim request. County agencies have 30 days to process these claims.

X Other. Describe The ODJFS pays for up to 91 days of care for a family that is receiving PFCC and loses their activity. This allows the family to search for a new activity and the provider can maintain attendance and payment for the children authorized to them. The ODJFS also pays for care while eligibility is being determined. Even if the application is denied, the provider can be paid for care provided during the determination period.

X For those options not checked above, explain why these options are not generally accepted payment practices in your State/Territory Other fees that a provider may charge are the responsibility of the parent and are non-reimbursable from the ODJFS. Providers must provide each parent a copy of their policies and charges.

4.5.3 Check and describe the strategies the State/Territory will use to ensure the timeliness of payments.

☐ Policy on length of time for making payments. Describe length of time ______

☐ Track and monitor the payment process ______

X Use of electronic tools (e.g., automated billing, direct deposit, etc.) Describe The ODJFS has an automated computer system that calculates payments, Ohio ECC. The calculated payment is transmitted to the department’s child care information data system which then issues payments to providers via electronic funds transfer. Weekly payments are made three weeks after the service week. This allows parents a three week period to back swipe their benefit card for days when care was provided but the card was not used.

☐ Other. Describe ______

4.6 Supply Building Strategies to Meet the Needs of Certain Populations

The CCDBG Act of 2014 added a provision that the State/Territory will develop and implement strategies to increase the supply and improve the quality of child care services for children in
underserved areas, infants and toddlers, children with disabilities, and children who receive care during non-traditional hours. (658 E(c)(2)(M))

4.6.1 Has the State/Territory conducted data analysis of existing and growing supply needs?

X Yes. Describe data sources The ODJFS works with the OCCRRA and the Child Care Resource and Referral (CCR&R) agencies who utilize Child Care Aware of America's NACCRAWARE data system to collect and maintain rate, hours, types of care, and various data elements for center-based and family child care-based providers in the state of Ohio. Provider data is updated quarterly by the CCR&Rs.

☐ No. If no, how does the State/Territory determine most critical supply needs?

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

a) Infants and toddlers (check all that apply)

☐ Grants and contracts (as discussed in 4.1.3)
☐ Family child care networks
☐ Start-up funding
X Technical assistance support
☐ Recruitment of providers
X Tiered payment rates (as discussed in 4.4.1)
X Other. Describe Quality Achievement Awards

b) Children with disabilities (check all that apply)

☐ Grants and contracts (as discussed in 4.1.3)
☐ Family child care networks
☐ Start-up funding
X Technical assistance support
☐ Recruitment of providers
☐ Tiered payment rates (as discussed in 4.4.1)
X Other. Describe Ohio offers additional funding for children identified as eligible for a special needs waiver.

c) Children who receive care during non-traditional hours (check all that apply)

☐ Grants and contracts (as discussed in 4.1.3)
☐ Family child care networks
☐ Start-up funding
X Technical assistance support
Recruitment of providers
X Tiered payment rates (as discussed in 4.4.1)
X Other. Describe Ohio pays a 5% differential for non-traditional care.

4.6.3 The CCDBG Act of 2014 requires States to describe the procedures and process it uses, in terms of the investments made to increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and unemployment and that do not have such high-quality programs. (658E(c)(2)(Q)) Describe the status of State/Territory’s process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.

X Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe The CCR&Rs work with child care programs to assist in readiness to become star-rated and to move to higher ratings. The CCR&Rs are located throughout the state and provide services, including technical assistance and training, to providers serving children in PFCC. Additionally, by 2020, Ohio requires that all publicly funded child care programs are participating in SUTQ. This requirement will further increase the quality of programming for all low income families and children across the state.

Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

w) Overall Target Completion Date (no later than September 30, 2016) _____

Homeless children (check all that apply)

☐ Grants and contracts (as discussed in 4.1.3)
☐ Family child care networks
☐ Start-up funding
X Technical assistance support
☐ Recruitment of providers
☐ Tiered payment rates (as discussed in 4.4.1)
X Other. Describe Ohio allows for child care for up to ninety calendar days in a twelve month period, or the period of time that the caretaker and child resides in an emergency shelter, or the period of time when the caretaker and the child are homeless, whichever is shorter.
5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings

The CCDBG Act of 2014 makes child care safer by defining minimum health and safety requirements for child care providers. This includes both the standards that must be established and the pre-service/orientation and ongoing minimum training required. States and Territories must also explain why exemptions to any of the licensing standards do not endanger the health and safety of CCDF children in license-exempt care. States and Territories are required to have standards for CCDF providers regarding group size limits and appropriate child-to-provider ratios based on the age of children in child care.

Pre-licensure and annual unannounced inspections of licensed CCDF providers and annual inspections of license-exempt CCDF providers are now required. The CCDBG Act of 2014 requires States and Territories to establish qualifications and training for licensing inspectors and appropriate inspector-to-provider ratios. It also requires States and Territories to conduct criminal background checks for all child care staff members, including staff members who don’t care directly for children but have unsupervised access to children and lists specific disqualifying crimes. States and Territories must certify that all child care providers comply with child abuse reporting requirements of Child Abuse Prevention and Treatment Act (CAPTA), mandatory reporting of known and suspected instances of child abuse and neglect).

5.1 Licensing Requirements and Standards

Each State/Territory is required to certify it has in effect licensing requirements applicable to all child care services provided within the State/Territory (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(F) Nothing in the statute prohibits the State/Territory from
exempting child care providers from licensing requirements. But, if the State/Territory exempts any child care providers from State/Territory licensing requirements, the CCDBG Act of 2014 requires States and Territories to describe how such licensing exemptions do not endanger the health, safety, and development of children receiving CCDF who are cared for by the license-exempt providers. (658E(c)(2)(F)(ii))

5.1.1 The State/Territory certifies that it has licensing requirements applicable to all child care services provided within the State. (658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care.

**Child care center:** "Child day-care center" and "center" mean any place in which child care or publicly funded child care (PFCC) is provided for thirteen or more children at one time or any place that is not the permanent residence of the licensee or administrator in which child care or PFCC is provided for seven to twelve children at one time. In counting children for the purposes of this division, any children under six years of age who are related to a licensee, administrator, or employee and who are on the premises of the center shall be counted. "Child day-care center" and "center" do not include any of the following:

1. A place located in and operated by a hospital, as defined in section 3727.01 of the Revised Code, in which the needs of children are administered to, if all the children whose needs are being administered to are monitored under the on-site supervision of a physician licensed under Chapter 4731. of the Revised Code or a registered nurse licensed under Chapter 4723. of the Revised Code, and the services are provided only for children who, in the opinion of the child's parent, guardian, or custodian, are exhibiting symptoms of a communicable disease or other illness or are injured;
2. A child day camp;
3. A place that provides child care, but not PFCC, if all of the following apply:
   a. An organized religious body provides the child care;
   b. A parent, custodian, or guardian of at least one child receiving child care is on the premises and readily accessible at all times;
   c. The child care is not provided for more than thirty days a year;
   d. The child care is provided only for preschool-age and school-age children.
Type A Home: "Type A Family Day-Care Home" and "Type A Home" mean a permanent residence of the administrator in which child care or PFCC is provided for seven to twelve children at one time or a permanent residence of the administrator in which child care is provided for four to twelve children at one time if four or more children at one time are under two years of age. In counting children for the purposes of this division, any children under six years of age who are related to a licensee, administrator, or employee and who are on the premises of the Type A Home shall be counted. "Type A Family Day-Care Home" and "Type A Home" do not include any child day camp.

Type B Home: "Type B Family Day-Care Home" and "Type B Home" mean a permanent residence of the provider in which child care is provided for one to six children at one time and in which no more than three children are under two years of age at one time. In counting children for the purposes of this division, any children under six years of age who are related to the provider and who are on the premises of the Type B Home shall be counted. "Type B Family Day-Care Home" and "Type B Home" do not include any child day camp.

The Ohio Department of Education (ODE) licenses preschool programs operated by a school district, educational service center, joint vocational school, county DD board, eligible community school, or eligible nonpublic school. “Preschool Program” is defined as one of the following: A program for preschool children that is operated by a school district board of education, educational service center, joint vocational school, an eligible nonpublic school; or A program for preschool children age three or older that is operated by a county board of DD.

5.1.2 Does your State/Territory exempt any child care providers that can receive CCDF from its licensing requirements?

X Yes. Describe which types of providers that can receive CCDF are exempt from licensing and how such exemptions do not endanger children who receive CCDF services from license-exempt providers IHAs and day camps are exempt from licensing. IHAs must be certified by the county department of job and family services (CDJFS) agency. The certification process includes background checks, training requirements, basic health and safety requirements and an annual inspection. Day camps must be accredited by the American Camp Association (ACA) in order to be eligible to receive CCDF funds and must also follow Ohio background check requirements.

☐ No
5.1.3 Describe the status of the State/Territory’s development and implementation of child care standards for providers receiving CCDF that address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

X Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 5.1.4 and 5.1.5 below.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

y) Overall Target Completion Date (no later than September 30, 2016) __________
z) Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) __________
   o Implementation progress to date: Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable __________
   o Unmet requirement - Identify the requirement(s) not fully to be implemented __________
   o Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) __________
      • Projected start date for each activity ________
      • Projected end date for each activity ________
      • Agency – Who is responsible for complete implementation of this activity ________
      • Partners – Who is the responsible agency partnering with to complete implementation of this activity ________

5.1.4 Describe how the State/Territory child care standards for providers receiving CCDF address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

a) Licensed Center-Based Care/ODE licensed programs
   1. Infant
      • State/Territory age definition “Infant” means a child who is under eighteen months of age
- Ratio for birth and under 12 months is one provider to five infants or two providers to twelve infants in the same room. Ratio for 12 months to 18 months is one provider to six infants.
  - Group size 12

2. Toddler
   - State/Territory age definition  “Toddler” means a child who is at least eighteen months of age but less than three years of age
   - Ratio for 18 months to under two and one half years is one provider to seven toddlers. Ratio for two and one half years to under three years is one provider to eight toddlers.
   - Group size Group size for 18 months to under two and one half years is up to 14 toddlers. Group size for two and one half years to under three years is up to 16 toddlers.

3. Preschool
   - State/Territory age definition  “Preschool child” means a child who is at least three years old, or is four or five years old, but is not age eligible to be enrolled in a grade of kindergarten or above
   - Ratio for three years is one provider to 12 preschoolers. Ratio for four and five years is one provider to 14 preschoolers.
   - Group size Group size for three years is up to 24. Group size for four and five years is up to 28.

4. School-Age
   - State/Territory age definition  “School child” means a child who is enrolled in or is eligible to be enrolled in a grade of kindergarten or above, but is less than fifteen years old
   - Ratio for kindergarten to 11 years is one provider to 18 school-agers. Ratio for 11 years to 14 years is one provider to 20 school-agers.
   - Group size Group size for kindergarten to 11 years is up to 36 school-agers. Group size for 11 years to 14 years is up to 40 school-agers.

5. If any of the responses above are different for exempt child care centers, describe N/A

6. Describe, if applicable, ratios and group sizes for centers with mixed age groups
   Mixed age groups follow ratio and group size for youngest child in the group.

b) Licensed Group Child Care Homes:

1. Infant
   - State/Territory age definition  "Infant" means a child who is under eighteen months of age
   - Ratio 1 provider to 3 infants, unless there is a second staff member present

2. Toddler
3. Preschool
   - State/Territory age definition: "Preschool child" means a child who is at least three years old, or is four or five years old, but is not age eligible to be enrolled in a grade of kindergarten or above
   - Ratio 1 provider to 6 preschool children
   - Group size 12

4. School-Age
   - State/Territory age definition: "School child" means a child who is enrolled in or is eligible to be enrolled in a grade of kindergarten or above, but is less than fifteen years old
   - Ratio 1 provider to 6 school-age children
   - Group size 12

5. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.

6. If any of the responses above are different for exempt group child care homes, describe N/A – Ohio does not have exempt group homes.
   □ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care:

1. Describe the ratios 1 provider to 6 children with no more than 3 under the age of 2, group size 6 children with no more than 3 under the age of 2, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time 6 children with no more than 3 under the age of 2, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size providers own children under age 6, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.

2. If any of the responses above are different for exempt family child care home providers, describe N/A.

d) Any other eligible CCDF provider categories:

Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.
5.1.5 Describe how the State/Territory child care standards address required qualifications for providers appropriate to each type of setting, including the minimum age allowed, minimum education level, any specific content required related to the age of children. (658E(c)(2)(H))

a) Licensed Center-Based Care:

1. Infant lead teacher high school diploma and assistant teacher qualifications high school diploma
2. Toddler lead teacher high school diploma and assistant teacher qualifications high school diploma
3. Preschool lead teacher high school diploma and assistant teacher qualifications high school diploma
4. School-Age lead teacher high school diploma and assistant teacher qualifications high school diploma
5. Director qualifications

For the Ohio Department of Job and Family Services (ODJFS):

A) A child day-care center administrator shall show the director of job and family services both of the following:

(1) Evidence of at least high school graduation or certification of high school equivalency by the state board of education or the appropriate agency of another state;
(2) Evidence of having at least one of the following:
   (a) An associate, bachelor's, master's, doctoral, or other postgraduate degree in child development or early childhood education, or in a related field approved by the director, from an accredited college, university, or technical college;
   (b) A license designated as appropriate for teaching in an associate teaching position in a preschool setting issued by the state board of education pursuant to section 3319.22 of the Revised Code;
   (c) Designation under the career pathways model as an early childhood professional level three;
   (d) Two years of experience working as a child-care staff member in a licensed child care program, designation under the career pathways model as an early childhood professional level one, and, not later than one year after being named as administrator, designation under the career pathways model as an early childhood professional level two;
   (e) Two years of experience working as a child-care staff member in a licensed child care program and, except as provided in division (B) of this section, at least four courses in child development or early childhood education from an accredited college, university, or technical college;
   (f) Two years of experience working as a child-care staff member in a licensed child care program and a child development associate credential issued by the council for professional recognition;
   (g) Two years of training, including at least four courses in child development or early childhood education from an accredited college, university, or technical college;
   (h) An infant and toddler or early childhood credential from a program accredited by the Montessori accreditation council for teacher education.
(B) A person who has two years of experience working as a child-care staff member in a child day-care center and is promoted to or designated as administrator of that center shall have one year from the date of the promotion or designation to complete the courses required by division (A)(1)(e) of this section.

For ODE

(H) The director of the preschool program shall meet one of the following:

(1) A director in a preschool program operated by a public school shall hold either:
   (a) A valid pre-kindergarten teaching certificate, pre-kindergarten endorsement or pre-kindergarten associate license issued under section 3301.50 of the Revised Code.
   (b) A valid educator license (teacher, administrator, or pupil services) issued under sections 3319.22 to 3319.31 of the Revised Code and have completed at least four courses in child development or early childhood education from an accredited college, university, or technical college.
   (c) A valid principal license for grades pre-kindergarten through grade six pursuant to rule 3301-24-05 of the Administrative Code; or
   (d) An early childhood license pursuant to rule 3301-24-05 of the Administrative Code.
   (e) If employed prior to July 1, 1988, a valid kindergarten-primary certificate issued under sections 3319.22 to 3319.31 of the Revised Code.

(2) A director of a preschool special education program operated by a public school or a county board of DD shall hold one of the following:
   (a) A valid intervention specialist license or education of the handicapped certificate with an endorsement in pre-kindergarten special needs or early education of the handicapped;
   (b) A valid pre-kindergarten certificate or endorsement or an early childhood license with an endorsement in pre-kindergarten special needs or early education of the handicapped;
   (c) A valid early childhood intervention specialist license; or
   (d) Meet the requirements of paragraph (I)(1)(b) or (I)(1)(c) of this rule (Ohio Administrative Code 3301-37-04).

(3) A director employed to direct a program operated by an eligible, nontax-supported, nonpublic school shall be considered to meet the requirements of this rule if they hold a valid teaching certificate issued in accordance with section 3301.071 of the Revised Code.

(4) A head teacher who meets educator licensure requirements as a director may be designated the director for purposes of this chapter.

(I) Each class/group in a preschool program shall have assigned a head teacher in accordance with the following:
   (1) Publicly funded programs shall meet the staff criteria established in section 3301.311 of the Revised Code or be highly rated in Ohio's tiered quality rating and improvement system developed under section 5140.30 of the Revised Code;
(2) Preschool programs operated by public schools shall have a head teacher for each class/group of children enrolled that meets one of the following:
   (a) Valid prekindergarten teaching certificate issued under section 3301.50 of the Revised Code; or
   (b) Valid prekindergarten associate license issued under section 3301.51 of the Revised Code

b) Licensed Group Child Care Homes:
   1. Infant lead teacher high school diploma and assistant qualifications high school diploma
   2. Toddler lead teacher high school diploma and assistant qualifications high school diploma
   3. Preschool lead teacher high school diploma and assistant qualifications high school diploma
   4. School-Age lead teacher high school diploma and assistant qualifications high school diploma
   □ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care home provider qualifications

Type A Home: High school diploma and one of the following:

   (a) Two years of college training verified by a transcript including two courses in child development. Two years of training shall be sixty semester or ninety quarter hours from an accredited college, university or technical college. Two courses shall be six semester hours or nine quarter hours from an accredited college, university or technical college. Child development shall be as is defined in rule 5101:2-13-28 of the Administrative Code.

   (b) Twenty-four calendar months, for at least twelve hours a week of experience, working as a child care staff member in a licensed child care center or type A home, or twenty-four calendar months for at least twelve hours a week of experience as a child care home provider verified by documentation from past employers or other documented evidence. Care of one's own children shall not be counted as experience.

   (c) A currently valid child development associate credential issued by the national child development associate credentialing commission. In order to remain as the administrator the child development associate (CDA) credential must be currently valid.

   (d) Completion of a two year vocational child care training program approved by the state board of education verified by a transcript or diploma.

   (e) A prekindergarten associate certificate that is issued by the state board of education.
(f) A Montessori preprimary/early childhood credential from the American Montessori Society, Association of Montessori International, National Center for Montessori Education, or other Montessori program accredited by the Montessori Accreditation Council for Teacher Education.

Type B Home: For those individuals certified or licensed after April 1, 2003, have completed a high school education. All must have at least six months experience in caring for a child twelve years or younger or have obtained at least thirty clock hours of documented training. Parenthood may be considered as experience.

d) Other eligible CCDF provider qualifications

IHA: High School Diploma. Day Camps: No minimum set by the ODJFS.

5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics. (658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

a) The State/Territory certifies that it has health and safety requirements for providers receiving CCDF in the following areas:

- Prevention and control of infectious diseases (including immunization)
- Prevention of sudden infant death syndrome and use of safe sleeping practices
- Administration of medication, consistent with standards for parental consent
- Prevention of and response to emergencies due to food and allergic reactions
- Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
- Prevention of shaken baby syndrome and abusive head trauma
- Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-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))
- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
- First aid and cardiopulmonary resuscitation (CPR) certification
Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas as of March 1, 2016. Provide a citation and a link if available.

No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016)
  September 30, 2016
- Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
  substantially implemented
- Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable
  - Prevention and control of infectious diseases (including immunization)
  - Prevention of sudden infant death syndrome and use of safe sleeping practices ODJFS
  - Administration of medication, consistent with standards for parental consent
  - Prevention of and response to emergencies due to food and allergic reactions
  - Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
  - Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-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))
  - Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
  - Precautions in transporting children (if applicable)
  - First aid and cardiopulmonary resuscitation (CPR) certification

- Unmet requirement - Identify the requirement(s) not fully to be implemented
  Prevention of shaken baby syndrome and abusive head trauma (ODE and ODJFS)
  Prevention of sudden infant death syndrome and use of safe sleeping practices (ODE)
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) rule changes
  - Projected start date for each activity In progress
  - Projected end date for each activity September 30, 2016
  - Agency – Who is responsible for complete implementation of this activity ODJFS
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity N/A

b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above. ACF expects these trainings will be part of a broader systematic approach and progression of professional development (as described in Section 6) within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education. The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children Basics* for best practices and recommended time needed to address these training requirements.

☐ Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above as of March 1, 2016. Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements

X No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

  - Overall Target Completion Date (no later than September 30, 2016) September 30, 2016
  - Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s)
not fully implemented (not yet started, partially implemented, substantially implemented, other) substantially implemented

- Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented all requirements are met with with the exception of shaken baby.

- Unmet requirement - Identify the requirement(s) not not fully to be implemented Ohio is adding shaken baby to the pre-licensing orientation and new staff training.
  
  o Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) rule change
  
  o Projected start date for each activity in progress
  
  o Projected end date for each activity September 30, 2016

  o Agency – Who is responsible for complete implementation of this activity ODJFS

  o Partners – Who is the responsible agency partnering with to complete implementation of this activity N/A

5.1.7 Does the State/Territory have health and safety requirements for any of the following optional areas?

X Nutrition (including age appropriate feeding). Describe Rules require meals and snacks meet USDA guidelines and follow parental requests. The rules are written to align with the Child and Adult Care Food Program (CACFP) as much as possible. (ODE and ODJFS)

X Access to physical activity. Describe Rules require that daily activities include outdoor play and time for large muscle activities (ODJFS)

X Screen time. Describe New language will be effective in Fall 2016 requiring no screens used during meal and snack time for all age groups. (ODJFS)

X Caring for children with special needs. Describe The ODE rules require that children with a disability resulting in an Individual Education Plan (IEP) receive services as outlined in the plan.

X Recognition and reporting of child abuse and neglect. Describe Yes – the rules require reporting of suspected abuse as well as training (ODJFS and ODE)

X Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children’s health and safety. Describe The ODJFS has extensive rules for environmental safety and sanitary conditions as well as child safety,
There are also requirements for appropriate use of discipline, the administration of medication, and the transportation of children.

5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from CCDF health and safety training requirements. Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics? Note this exception applies if the individual cares ONLY for relative children.

☐ Yes, all relatives are exempt from all health and safety training requirements. If the State/Territory exempts all relatives from the CCDF health and safety training requirements, describe how the State ensures the health and safety of children in relative care. _____

☐ Yes, some relatives are exempt from health and safety training requirements. If the State/Territory exempts some relatives from the CCDF health and safety training requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care. _____

☒ No, relatives are not exempt from CCDF health and safety training requirements.

5.2 Monitoring and Enforcement Policies and Practices

5.2.1 The State/Territory certifies that the State/Territory has in effect policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements. (658E(c)(2)(J))

☒ Yes. The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities as of March 1, 2016. List the policy citation 5104.02 ORC for the ODJFS and 3301.53 ORC for the ODE.

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) ______
Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable

Unmet requirement - Identify the requirement(s) not fully to be implemented

Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity

Projected end date for each activity

Agency – Who is responsible for complete implementation of this activity

Partners – Who is the responsible agency partnering with to complete implementation of this activity

5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives). While the law does not specify strategies to meet these requirements, States and Territories could consider implementing a differential monitoring approach as long as the full complement of licensing and CCDF health and safety standards was representative and the frequency was at least annually.

aa) Licensing Inspectors - It will have policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State’s licensure requirements. (658E(c)(2)(K)(i)(I))

X Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State’s licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting:

The ODJFS licensing inspectors are required to meet trainer qualifications as identified in 5101:2-12-28 and 5101:2-13-28 of the OAC. Upon hire, licensing inspectors go through a six month training period which includes all of the ODJFS licensure requirements, Step Up To Quality (SUTQ) standards, training on
different provider types and cultural awareness. CDJFS licensing inspectors must 
complete a state-designed training upon hire.

The ODE state licensing specialists and reviewers receive initial and annual 
training on licensing rules and regulations, SUTQ, policies and procedures and 
additional requirements as needed.

☐ No. If no, the State/Territory must provide a State/Territory-specific 
implementation plan for achieving compliance with this requirement, including 
planned activities, necessary legislative or regulatory steps to complete, and 
target completion date (no later than November 19, 2016). Please provide brief 
text responses and descriptions only. Do not cut and paste charts or tables here. 
Your responses will be consolidated electronically into an Implementation Plan 
summary report.

- Overall Target Completion Date (no later than November 19, 2016) _____
- Current Overall Status – Describe the State/Territory’s overal1 status 
toward complete implementation for anythis requirement(s) not fully 
implemented (not yet started, partially implemented, substantially 
implemented, other) _____
  - Implementation progress to date Implemented requirement(s) – 
    Identify any requirement(s) partially or substantially implemented 
to date if applicable _____
  - Unmet requirement - Identify the requirement(s) not fully to be 
    implemented _____
- Tasks/Activities – What specific steps will you take to 
  implement the unmet requirement (e.g., legislative or rule 
  changes, modify agreements with coordinating agencies, 
etc.) _____
  - Projected start date for each activity _____
  - Projected end date for each activity _____
  - Agency – Who is responsible for complete 
    implementation of this activity _____
  - Partners – Who is the responsible agency 
    partnering with to complete implementation of 
    this activity _____

bb) Inspections for Licensed CCDF Providers - It will require licensing 
inspectors to perform inspections, with not less than one prelicensure 
inspection, for compliance with health, safety, and fire standards, of each such 
child care provider and facility in the State/Territory. It will require licensing 
inspectors to perform not less than annually, one unannounced inspection of
licensed CCDF providers for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time. (658E(c)(2)(K)(i)(II))

X Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for licensed CCDF providers. List the policy citation and describe the inspection requirements including the frequency of announced and unannounced visit

All ODJFS licensed programs get at least 1 unannounced inspection each state fiscal year (July to June). Additionally, new programs get three unannounced inspections during the first year of licensure.

Prelicensure inspection - 5101:2-12-04 (Centers), 5101:2-13-04 (Type A Homes), 5101:2-14-03 (Type B Homes) and 5101:2-14-30 (IHAs) At least one annual unannounced inspection 5101:2-12-07 (Centers), 5101:2-13-07 (Type A Homes), 5101:2-14-03 (Type B Homes) and 5101:2-14-30 (IHA).

The ODE is responsible for the licensing of preschool programs and school child programs and for the enforcement of sections 3301.52 to 3301.59 ORC and rules adopted under those sections. The ODE shall investigate and inspect a preschool program or schoolage program that has been issued a provisional license at least once during operation under the provisional license.

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016) ______
- Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) ______
  - Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable ______
  - Unmet requirement - Identify the requirement(s) not fully to be implemented ______
• Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
  ○ Projected start date for each activity
  ○ Projected end date for each activity
  ○ Agency – Who is responsible for complete implementation of this activity
  ○ Partners – Who is responsible agency partnering with to complete implementation of this activity

c) Inspections for License-Exempt CCDF Providers (except those serving relatives) – It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))

☐ Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for license-exempt CCDF providers. List the policy citation and describe the annual monitoring visit requirements:

X No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Day Camps
• Overall Target Completion Date (no later than November 19, 2016) November 19, 2016.
• Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) partially implemented
  ○ Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable changes to ORC have been requested
  ○ Unmet requirement - Identify the requirement(s) not fully to be implemented Annual inspection of Child Day Camps wishing to receive CCDF funds
    ○ Tasks/Activities – What specific steps will you take to implement the unmet requirement
(e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Legislative and rule changes are required for Child Day Camps to require annual inspections if they choose to accept CCDF funds. Projected start date for each activity in progress:

- Projected end date for each activity: November 19, 2016
- Agency – Who is responsible for complete implementation of this activity: ODJFS
- Partners – Who is the responsible agency partnering with to complete implementation of this activity: American Camping Association

d) **Ratio of Licensing Inspectors** – It will have policies and practices that require the ratio of licensing inspectors to such child care providers and facilities in the State/Territory to be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal, State, and local law. (658E(c)(2)(K)(i)(III))

X Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory ratio of licensing inspectors: The ODJFS practice is to have an average caseload of 75-85 programs. The ODE utilizes both state and contract staff as licensing inspectors. The contracted Licensing Reviewers have an average caseload of 80-100. The state Program Specialists have a lower average caseload of 60-80 because they also conduct monitoring visits for SUTQ.

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016)
- **Current Overall Status** – Describe the State/Territory’s overall status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
o Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable ______

o Unmet requirement - Identify the requirement(s) not fully to be implemented ______

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) ______
  - Projected start date for each activity ______
  - Projected end date for each activity ______
- Agency – Who is responsible for complete implementation of this activity ______
- Partners – Who is the responsible agency partnering with to complete implementation of this activity ______

e) Child Abuse and Neglect Reporting – That child abuse reporting requirements are in place and comply with section of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)) (658E(c)(2)(L))

  X Yes. Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency’s policy citation(s) 5101:2-12-21 (centers); 5101:2-13-21 (Type A Homes); 5101:14-20 (Type B Homes) and 5101:2-14-32 (IHA), ODE: 3301.54.

□ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016) ______
- Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) ______
  - Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable ______
  - Unmet requirement - Identify the requirement(s) not fully to be implemented ______
• Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
  o Projected start date for each activity
  o Projected end date for each activity
  o Agency – Who is responsible for complete implementation of this activity
  o Partners – Who is the responsible agency partnering with to complete implementation of this activity

5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from inspection requirements. Note this exception only applies if the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?

  □ Yes, all relatives are exempt from all inspection requirements. If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care.

  □ Yes, some relatives are exempt from inspection requirements. If the State/Territory exempts some relatives from the inspection requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.

  X No, relatives are not exempt from inspection requirements.

5.3 Criminal Background Checks

The CCDBG Act of 2014 added new requirements for States and Territories receiving CCDF funds to conduct criminal background checks on child care staff members and prospective staff members of child care providers. States and Territories are required to have requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as any other individuals in the household that may have unsupervised access to children. These provisions must be in place no later than September 30, 2017.

The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years. A criminal background check must include a search
of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification; and National Sex Offender Registry.

Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State’s option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.

Timeliness of background checks - 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.

Fees for background checks – Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.

Transparency – The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory’s consumer education website (also see section 2.3) or other publicly available venue.

Appeals process – The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness.

Privacy considerations - Lead Agency may not publicly release the results of individual background checks. They may release aggregated data by crime as long as the data does not include personally identifiable information.

5.3.1 Describe the status of the State/Territory’s requirements, policies, and procedures for criminal background checks for child care staff members and child care providers.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the policy citation within the Lead Agency’s rules ______ and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.

☒ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2017). Please provide brief text
responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2017) September 30, 2017
- Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Partially implemented.
  - Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable All ODJFS licensed and CDJFS certified providers are required to have state and FBI background checks, including residents of child care homes. For owners and administrators of centers and Type A Homes and residents of Type A Homes, the results of the checks are sent directly to the ODJFS to be reviewed. All ODE staff with an educator license have to have FBI and BCI background checks. Results are maintained in the Educator Licensure system at the ODE.
  - Unmet requirement - Identify the requirement(s) not fully to be implemented For staff of centers, Type A Homes and day camps providing PFCC services, the checks are sent to and reviewed by the center/home administrator. For Type B Homes and In-Home Aides, the checks are sent to and reviewed by the county agencies. While Type B Home providers and residents have child welfare checks completed, these are also received and reviewed by county agencies. Currently no other provider types for the ODJFS and the ODE have child welfare checks completed. No provider types in Ohio have the checks run through National Crime Information Center, the state sex abuse registry or the federal sex abuse registry.
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
  1. Administrative Code change – changing rehabilitation standards to some offenses and requiring FBI every 5 years
   - Projected start date for each activity in progress
   - Projected end date for each activity September 30, 2017
   - Agency – Who is responsible for complete implementation of this activity ODJFS and ODE
2. New staffing unit

- Projected start date for each activity ODJFS - March 1, 2016: Hire 4 new licensing specialists who will create process for assessing the 5 required checks.
  - July 2016 – December 2016 – Hire additional staff for the unit and finalize the process for reviewing the checks.
  - January 1 2017: begin assessing currently licensed programs.
- ODJFS – Identify policy, procedures and capacity needed to assess the 5 required checks.
- Projected end date for each activity September 30, 2017
- Agency – Who is responsible for complete implementation of this activity ODJFS and ODE
- Partners – Who is the responsible agency partnering with to complete implementation of this activity N/A

3. Legislative change for sex offender registries, NCIC, child welfare checks (Type A homes, centers, and day camps) and for all checks to be sent to ODJFS. ODJFS has requested a legislative change.

- Projected start date for each activity In progress
- Projected end date for each activity July 2016
- Agency – Who is responsible for complete implementation of this activity ODJFS and ODE
- Partners – Who is the responsible agency partnering with to complete implementation of this activity Ohio General Assembly

4. Administrative Code change – additional sex offender registry, NCIC, child welfare checks (Type A homes, centers, and day camps)

- Projected start date for each activity October 2016
- Projected end date for each activity September 30, 2017
5.3.2 Describe the process and procedures for conducting background checks in a timely manner, including which agency/entity is responsible and how the Lead Agency ensures that background checks performed by a 3rd party meet the requirements, protecting the privacy of child care staff members, and providing opportunities for applicants to appeal the results of background checks.

The Ohio Attorney General’s office (OAG) is responsible for conducting all background checks. The OAG oversees the WebCheck Agencies who facilitate the electronic fingerprinting. The OAG also handles all appeals of the results of the checks.

5.3.3 Describe how the State/Territory is assisting other States process background checks, including any agencies/entities responsible for responding to requests from other states.

The ODJFS and the ODE are not yet implementing this, but will have a process created by September 2017.

5.3.4 Does the State/Territory have a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment?

X Yes. Describe The ODJFS allows an individual with a felony drug offense to be eligible for employment if at least 10 years have elapsed since the person was fully discharged from imprisonment, probation or parole in regard to the conviction. The ODE allows a licensed individual with a felony drug offense to be eligible for employment if the offense was a felony, at least five years have elapsed since the applicant was fully discharged from imprisonment, probation, or parole or the applicant has had the record of his/her conviction sealed or expunged pursuant to section 2953.32 of the Revised Code or any municipal ordinance or law of this state, another state or the United States that is substantially equivalent to section 2953.32 of the Revised Code. Non-licensed may be eligible after 10 years.

☐ No

5.3.5 Does the State/Territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 5.3?

X Yes. Describe For the ODJFS, the prohibitive offenses are listed in division 109.572 (A)(5) of the Ohio Revised Code. (a) A violation of section 2151.421, 2903.01, 2903.02, 2903.03, 2903.04, 2903.11, 2903.12, 2903.13, 2903.14, 2903.15, 2903.16, 2903.21, 2903.22, 2903.34, 2905.01, 2905.02, 2905.05, 2905.11, 2905.32, 2907.02, 2907.03, 2907.04, 2907.05, 2907.06, 2907.07, 2907.08, 2907.09, 2907.19, 2907.21, 2907.22, 2907.23, 2907.24,
For the ODE, a violation of section 2903.01, 2903.02, 2903.03, 2903.04, 2903.11, 2903.12, 2903.13, 2903.16, 2903.21, 2903.34, 2905.01, 2905.02, 2905.05, 2907.02, 2907.03, 2907.04, 2907.05, 2907.06, 2907.07, 2907.08, 2907.09, 2907.21, 2907.22, 2907.23, 2907.25, 2907.31, 2907.32, 2907.321, 2907.322, 2907.323, 2911.01, 2911.02, 2911.11, 2911.12, 2913.01, 2913.02, 2913.03, 2913.04, 2913.041, 2913.05, 2913.06, 2913.11, 2913.21, 2913.31, 2913.32, 2913.33, 2913.34, 2913.40, 2913.41, 2913.42, 2913.43, 2913.44, 2913.441, 2913.45, 2913.46, 2913.47, 2913.48, 2913.49, 2917.01, 2917.02, 2917.03, 2917.31, 2919.12, 2919.22, 2919.224, 2919.225, 2919.24, 2919.25, 2921.03, 2921.11, 2921.13, 2921.14, 2921.34, 2921.35, 2923.01, 2923.12, 2923.13, 2923.161, 2925.02, 2925.03, 2925.04, 2925.05, 2925.06, or 3716.11 of the Revised Code, a violation of section 2905.04 of the Revised Code as it existed prior to July 1, 1996, a violation of section 2919.23 of the Revised Code that would have been a violation of section 2905.04 of the Revised Code as it existed prior to July 1, 1996, had the violation been committed prior to that date, a violation of section 2925.11 of the Revised Code that is not a minor drug possession offense, a violation of section 2923.02 or 2923.03 of the Revised Code that relates to a crime specified in this division, or a second violation of section 4511.19 of the Revised Code within five years of the date of application for licensure or certification.

(b) A violation of an existing or former law of this state, any other state, or the United States that is substantially equivalent to any of the offenses or violations described in division (A)(5)(a) of this section.

No

5.3.6 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from background check requirements. Note this exception only applies if the individual cares ONLY for relative children. Does your State State/Territory exempt relatives from background checks?

Yes, all relatives are exempt from all background check requirements.
☐ Yes, some relatives are exempt from the background check requirements.

Describe if the State/Territory exempts some relatives from background check requirements, describe which relatives are exempt from which requirements (some or all).

X No, relatives are not exempt from background checks.

5.3.7 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 conducted by the State/Territory or a 3rd party vendor or contractor. Lead Agencies can report that no fees are charged if applicable. The ODJFS does not have the authority to regulate the cost for fingerprinting; however, the ODJFS does not charge for the review of checks nor do administrative rules permit child care providers to charge prospective employees more than the cost of the checks.

ODE 3301.541 Criminal records check.

Each preschool program shall pay to the bureau of criminal identification and investigation the fee prescribed pursuant to division (C)(3) of section 109.572 of the Revised Code for each criminal records check conducted in accordance with that section upon the request pursuant to division (A)(1) of this section of the director, head teacher, elementary principal, or site administrator of the preschool program.

A preschool program may charge an applicant a fee for the costs it incurs in obtaining a criminal records check under this section. A fee charged under this division shall not exceed the amount of fees the preschool program pays under division (C)(1) of this section. If a fee is charged under this division, the preschool program shall notify the applicant at the time of the applicant's initial application for employment of the amount of the fee and that, unless the fee is paid, the applicant will not be considered for employment.

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue. Policies and procedures for getting background checks are published on the ODJFS website http://jfs.ohio.gov/cdc/Licensing Information.stm, ODE policies and procedures for getting background checks are published on the ODE website here http://education.ohio.gov/Topics/Teaching/Educator-Licensure/Additional-Information/Background-Check-FAQs#FAQ675.

5.3.9 Does the Lead Agency release aggregated data by crime?

☐ Yes. List types of crime included in the aggregated data ______

X No
6  **Recruit and Retain a Qualified and Effective Child Care Workforce**

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key components of high quality child care. These require a competent, skilled, and stable workforce. Research has shown that specialized training and education, positive and well-organized work environments and adequate compensation promote teacher recruitment, stability, diversity of the early childhood workforce, and effectiveness with young children in child care. In addition, professional development strategies that emphasize on-site mentoring and coaching of teachers have emerged as promising to change practices with children and families. Professional development, whether training, on-site coaching and mentoring, registered apprenticeship, or higher education coursework, should reflect the research and best practices of child development in all domains and cultural competence.

The CCDBG Act of 2014 requires States and Territories to establish professional development and training requirements in key areas such as health and safety, early learning guidelines, responding to challenging behavior and engaging families. States and Territories are required to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. (658E(c)(2)(G)) An example of how a State/Territory might address this is to establish a system or framework of professional development that includes professional standards, a “career ladder” that allows an individual to build knowledge and skills in a cumulative manner from introductory training to advance level education, including obtaining credentials and post-secondary degrees. Professional development should be designed in a manner that aligns to competencies and qualifications that reflect working with children of different ages, English language learners, children with disabilities and the differentiated roles in all settings, such as teachers, teacher assistants, and directors. Training and education supporting professional development is also one of the options States and Territories have for investing their CCDF quality funds. (658G(b)(1)) ACF encourages States and Territories to collaborate and coordinate with other early childhood educator professional development resources, such as Race to the Top Early Learning Challenge grants, quality funds available through the Preschool Development grants, and funds available through Head Start and Early Head Start, to the extent practicable. Responsive, well-qualified adult caregivers are one of the most important factors in children’s development and learning in child care settings. ACF strongly encourages States and Territories to link CCDF health and safety trainings (see Section 5) and child development trainings and education to this broader professional development framework as the foundation for building a knowledgeable early childhood education workforce. Questions related to requirements for recruiting and retaining a qualified and effective child care workforce have been consolidated into Section 6.

6.1  **Training and Professional Development Requirements**

The CCDBG Act of 2014 added a requirement that the State/Territory develop training and professional development requirements designed to enable child care providers to promote the social, emotional, physical and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF across the entire age span from birth through age 12. (658E(c)(2)(G)) Training and professional development should be accessible and appropriate across settings and types of providers, including family child care home providers and child care center staff.
The State/Territory also must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))

For purposes of this section, the term professional development is inclusive of credit bearing coursework, postsecondary degree programs, and technical assistance (targeted assistance such as mentoring, coaching or consultation) activities. Health and safety topics that require renewal of a credential or certification should be considered continuing education unit trainings.

6.1.1 Describe the status of the State/Territory’s professional development system or framework, including training and professional development requirements 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.

The Lead Agency assures that the State/Territory’s training and professional development requirements:

a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and mid-level training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the child care program).

b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.

c) Incorporate knowledge and application of the State/Territory’s early learning and developmental guidelines (where applicable), the State/Territory’s health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)

d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF

e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

X Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 6.1.2 through 6.1.6 below.
Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
  - Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable ______
  - Unmet requirement - Identify the requirement(s) not fully to be implemented ______
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) ______
  - Projected start date for each activity ______
  - Projected end date for each activity ______
  - Agency – Who is responsible for complete implementation of this activity ______
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity ______

6.1.2 Describe how the State/Territory provides ongoing training and professional development that is accessible for the diversity of providers in the State/Territory, provides for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities) and improves the quality and stability of the child care workforce. Use the checkboxes below to identify and describe the elements of the progression of professional development. Check all that apply.

- State/Territory professional standards and competencies. Describe The Ohio’s Early Childhood Core Knowledge & Competencies (EC-CKC) is based on the understanding that there are critical areas of knowledge and skills that are necessary for early childhood professionals to have if young children are to learn and grow under their care. These areas include: child growth and development,
family and community relations, health, safety and nutrition, child observations and assessment, professionalism, and learning environments and experiences. There is an entry, experienced, and advanced level to the EC-CKC.

X Career ladder or lattice. Describe Child Care Staff may attend trainings and send information to the Ohio Professional Registry (OPR) to earn points that can assist the provider in obtaining a Career Pathways Level (CPL) or Administrative Credential Level (ACL).

X Articulation agreements between two- and four-year postsecondary early childhood education or degree programs. Describe The Higher Education Summit, composed of state agency staff, registry staff, and federal partners, is meeting to work on articulation agreements with two and four year colleges in Ohio to create articulation agreements for early childhood programs.

X Community-based training approved by a state regulatory body to meet licensing or regulatory requirements. Describe The Ohio Department of Job and Family Services (ODJFS) with the Ohio Child Care Resource and Referral Association (OCCRRA) and the Child Care Resource and Referral (CCR&R) agencies provide trainings that meet the developmental needs of all age groups served in child care, specialized competencies, and to improve the quality of care of child care workers. Ohio Approved Training is a set of criteria that sets a state standard for professional development. The Ohio Department of Education (ODE) utilizes State Support Teams made up of consultants who follow the state standards in providing professional development to ODE licensed providers.

X Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework. Describe The Early Childhood Advisory Council (ECAC) and state agencies partner on a Professional Development workgroup to determine needs and next steps for creating new and improved professional development and to ensure availability in all areas of the state provided in a variety of mediums. This group created the requirements for Ohio Approved Training which outlines the individual training criteria that must be met to be considered as acceptable professional development for the state.

X Continuing education unit trainings and credit-bearing professional development. Describe Courses that are offered through the OCCRRA and the CCR&Rs may offer CEUs if they meet additional criteria.

X State-approved trainings. Describe The "Ohio Approved" designation represents the state’s consolidated professional development approval process and is minimally accepted for the ODEs Early Learning and School Readiness, the Ohio Department of Health’s (ODH) Help Me Grow and the ODJFS’s Step Up To Quality (SUTQ) approval processes. Agencies will continue to set agency-specific credential requirements. Certain professional development offerings may not receive the Ohio Approved designation, yet may be accepted by the credentialing agency.
☐ Inclusion in state and/or regional workforce and economic development plans. 

Describe _____

☐ Other. Describe _____

6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC. The ECAC and state agencies partner on a Professional Development workgroup to determine needs and next steps for creating new and improved professional development and to ensure availability in all areas of the state provided in a variety of mediums. This group created the requirements for Ohio Approved Training which outlines the individual training criteria that must be met to be considered as acceptable professional development for the state. This also involved making changes to Ohio Administrative Code which was reviewed by the Rules Committee of the Child Care Advisory Council.

6.1.4 Describe how the State/Territory incorporates knowledge and application of the State’s early learning and developmental guidelines (where applicable), the State/Territory’s health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements (see Information Memorandum on Children’s Social Emotional and Behavioral Health http://www.acf.hhs.gov/programs/occ/resource/im-2015-01 ). The CCR&Rs provide training on Ohio’s Early Learning and Development Standards which includes social-emotional development and provides additional trainings that are specific to behavioral and mental health interventions. Ohio also has Health Consultants and Mental Health Consultants that providers may utilize by contacting their local CCR&R or SST for more targeted technical assistance.

6.1.5 Describe how the State’s training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable) NA

6.1.6 Describe how the State/Territory’s training and professional development requirements are appropriate, to the extent practicable, for child care providers caring 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 disabilities, and Native Americans, including Indians and Native Hawaiians. Training and professional development opportunities in all of the areas above that apply to the population in the community are offered by the CCR&Rs. The SSTs provide training and professional development opportunities for ODE licensed providers.

6.1.7 Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. Check all that apply and describe.

☐ Financial assistance for attaining credentials and post-secondary degrees. Describe Ohio offers TEACH scholarships for individuals to obtain an associates or bachelors degree in
the field of early childhood education. Attaining a Career Pathway Level, Ohio’s credential, may be completed at no cost if the individual attends free courses offered by the CCR&Rs or approved trainings from community partners and accumulates the required level of points. Program also receive additional payment from ODJFS for serving children in the publicly funded child care (PFCC) program if they are accredited by an approved organization or participate in SUTQ.

X Financial incentives linked to education attainment and retention. Describe Staff education is a requirement to receive a star rating in SUTQ. Programs that participate in SUTQ, receive a Quality Achievement Award and an enhanced rate of payment for serving children in the PFCC program.

☐ Registered apprenticeship programs. Describe ______

☐ Outreach to high school (including career and technical) students. Describe ______

X Policies for paid sick leave. Describe Paid leave is an approved staff support in SUTQ, the more supports that programs offer may assist in obtaining a higher rating.

X Policies for paid annual leave. Describe Paid leave is an approved staff support in SUTQ, the more supports that programs offer may assist in obtaining a higher rating.

X Policies for health care benefits. Describe Health benefits are an approved staff support in SUTQ, the more supports that programs offer may assist in obtaining a higher rating.

X Policies for retirement benefits. Describe Retirement benefits are an approved staff support in SUTQ, the more supports that programs offer may assist in obtaining a higher rating.

X Support for providers’ mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services). Describe Ohio also has Health Consultants and Mental Health Consultants that providers may utilize by contacting their local CCR&R for more targeted technical assistance.

☐ Other. Describe ______

6.1.8 Describe how the State/Territory will recruit providers for whom English is not their first language, or who will serve and be available for families for whom English is not their first language

Ohio has interpretive services available to allow licensing staff to interact with providers for whom English is not their first language. The ODE utilizes interpretive services as determined by the school setting and need.

6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.

☐ Informational materials in non-English languages

☐ Training and technical assistance in non-English languages

☐ CCDF health and safety requirements in non-English languages

☐ Provider contracts or agreements in non-English languages

☐ Website in non-English languages
X Bilingual caseworkers or translators available. Translators are available if a provider has requested. Providers may also submit documentation in their native language.

☐ Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce

☐ Other ______

☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State has the ability to have translation/interpretation in all primary and secondary languages. The state has the ability to provide translation and interpreter services.

6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory’s training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

☐ Yes. The State certifies that no later than March 1, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families. Describe that training and technical assistance for providers ______

X No. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016)
  September 30, 2016
- Current Overall Status – Describe the State/Territory’s overall status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
  partially implemented
  o Implementation progress to date Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable. ODE: Each school district must have a liaison for children and youth experiencing homelessness. This role assists with coordinating services, enrollment, awareness and training activities.
  o Unmet requirement - Identify the requirement(s) not fully to be implemented. Mandatory orientation training for providers will
include strategies for identifying and serving homeless families and children.

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) update the orientation training
  o Projected start date for each activity in progress
  o Projected end date for each activity 9/30/2016
  o Agency – Who is responsible for complete implementation of this activity ODJFS
  o Partners – Who is the responsible agency partnering with to complete implementation of this activity Franklin County Community Shelter Board, ODE

6.2 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

States and Territories may use the quality set-aside discussed in detail in section 7 to support the training and professional development of the child care workforce.

6.2.1 Does the State/Territory fund the training and professional development of the child care workforce?

X Yes. If yes,

a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory.

The ODJFS contracts with the CCR&Rs to provide training and professional development to the child care workforce. One deliverable for the CCR&Rs includes assisting programs in preparation for SUTQ, which includes training and professional development. Quarterly reports are provided documenting training and professional development deliverables.

Ohio offers TEACH scholarships for individuals to obtain an associates or bachelors degree in the field of early childhood education. The ODJFS also funds the CCR&Rs and OCCRRA through contracts to provide professional development at little or no cost to providers. Programs also receive additional payment from ODJFS for serving children in the PFCC program if they are accredited by an approved organization or participate in SUTQ. Ohio’s tiered quality rating and improvement system (TQRIS) that may be used for professional development opportunities.

b) Indicate which funds will be used for this activity (check all that apply)
CCDF funds. Describe - Ohio uses CCDF funds to provide funding through the county department of job and family services (CDJFS) agencies and not for profit CCR&R agencies that serve regions in Ohio. The CCR&Rs provide training, technical assistance, and outreach services to the child care providers in their respective regions. In the areas of training, the CCR&R’s provide training in professional development such as general in service training, Child Development Associate National Credential Program, and training for administrators and staff of infant, toddler, pre-school and school aged children. The CRR&Rs also provide services around employer and provider outreach, SUTQ, licensing, and general technical assistance.

☐

☐ Other funds. Describe Race to the Top – Early Learning Challenge, TANF

c) Check which content is included in training and professional development activities. Check all that apply.

X Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c. Describe The CCR&Rs have network specialists that deliver training on age related topics: infant/toddler, preschool, afterschool and family child care specialists. Additionally, the ECMH consultants assist the CCR&Rs in delivering the ELDS training.

X Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social -emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2). Describe The CCR&Rs provide training on Ohio’s Early Learning and Development Standards (ELDS) which includes social-emotional development, approaches towards learning, cognitive development and general knowledge, language and literacy development, and physical well-being and motor-development by age group.

X 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 CCR&R’s and SSTs deliver training on Supporting English Language Learners, Family Engagement, Cultural Diversity, and Family Involvement specific to Ohio’s CKCs.

X Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments
that are aligned with the State/Territory Early Learning and Development Standards. Describe Ohio ELDS modules and Curriculum and Assessment modules all include cultural and linguistic sensitivity.

- On-site or accessible comprehensive services for children and community partnerships that promote families’ access to services that support their children’s learning and development. Describe CCR&R TA Specialists support families statewide and a Statewide Parent Services Committee plans services for families.

- Using data to guide program evaluation to ensure continuous improvement. Describe The OCCRA created Measures of Quality Modules to assist programs in utilizing assessment results for continuous improvement as well as using tools for self-assessment.

- Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe

- Caring for and supporting the development of children with disabilities and developmental delays. Describe Inclusive practice and the Universal Design for Learning (UDL) approaches are embedded in the Curriculum and Assessment series and the ELDS modules.

- Supporting positive development of school-age children. Describe CCR&Rs have Afterschool Specialists who deliver TA to programs on age related topics. Additionally, several training modules are available. Ohio has specific CKC’s for professionals working with children ages 5-12.

Other. Describe

d) Check how the State/Territory connects child care providers with available Federal and State/Territory financial aid, or other resources for pursuing postsecondary 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 postsecondary training including financial aid and academic counseling

- State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities

- Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education
X Other. Describe Ohio participates in TEACH to assist the child care workforce with postsecondary education

☐ No

6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular content areas? States and Territories are encouraged to consult with Caring for our Children for best practices and recommended time needed to address training hour requirements.

X Yes. If yes, describe:

a) Licensed Center-Based Care

1) Number of pre-service or orientation hours and any required areas/content
   All child care center programs must have a representative attend a plan of operation training and administrator training prior to obtaining a license. All administrators must attend administrator training within six months of their appointment. All child care staff members must complete orientation training as defined by the department within 90 days of hire.

2) Number of on-going hours and any required areas/content 15 hours annually until a total of forty-five hours have been completed. These hours include trainings in child development, health and safety, child abuse recognition/prevention, first aid and management of communicable disease. At least 20 hours must be in the area of child development. Effective Fall 2016, all child care staff members will have an annual professional development requirement of 6 hours.

b) Licensed Group Child Care Homes

1) Number of pre-service or orientation hours and any required areas/content Type A Home (Large family child care homes): All administrators must attend administrator training within six months of their appointment. All child care staff members must complete orientation training as defined by the department within 90 days of hire.

2) Number of on-going hours and any required areas/content Type A Home (Large family child care homes): 15 hours annually until a total of forty-five hours have been completed. These hours include trainings in child development, health and safety, child abuse recognition/prevention, first aid and management of communicable disease. At least 20 hours must be in the area of child development. Effective Fall 2016, all child care staff members will have an annual professional development requirement of 6 hours.

c) Licensed Family Child Care Provider

1) Number of pre-service or orientation hours and any required areas/content Type B Home: county orientation training, Health and Safety Training and be certified in CPR.

2) Number of on-going hours and any required areas/content Type B Homes: Must complete six hours of training each year in categories as determined by the department with at least two hours of training being in child growth
all child care staff members will have an annual professional development requirement of 6 hours. ODE preschool staff members and directors complete in-service training of fifteen hours until a total of forty-five hours has been completed, and ten hours annually after. In-service training will be in one or more of the following areas: Child development or early childhood education; Child abuse recognition and prevention; First aid; and/or Prevention, recognition, and management of communicable diseases.

d) Any other eligible CCDF provider

1) Number of pre-service or orientation hours and any required areas/content IHAs must complete a Health and Safety Training and be certified in CPR. There are no training requirements for Child Day Camps receiving CCDF from the ODJFS; however, they must meet all requirements as presented by the American Camping Association.

2) Number of on-going hours and any required areas/content No requirements. Effective Fall 2016, all child care staff members will have an annual professional development requirement of 6 hours.

□ No

6.2.3 Describe the status of the State/Territory’s policies and practices to strengthen provider’s business practices.

X Fully implemented as of March 1, 2016. Describe the State strategies including training, education, and technical assistance to strengthen provider’s business practices. This may include, but is not limited to, such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance

Currently all child care centers and Type A Homes must have a representative attend the Plan of Operation training and Administrator Rules training prior to becoming licensed. Both trainings include sections about business practices. The CCR&Rs offer a course about business practices for child care programs that is optional. The ODJFS also provides technical assistance documents on implementing policies and procedures for CCDF funds. Type B Family Child Care homes complete an orientation with the county prior to being licensed that includes business practices. In Fall 2016, business best practices will be included in a module in a training required prior to licensure. The ODE providers work with school district administrative personnel and boards of education on business practices.

□ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including
planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- **Overall Target Completion Date (no later than September 30, 2016) _____**
- **Current Overall Status** – Describe the State/Territory’s overall status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
  - Implementation progress to date – Identified any requirement(s) partially or substantially implemented to date if applicable _____
  - Unmet requirement - Identify the requirement(s) not fully to be implemented _____
- **Tasks/Activities** – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
  - Projected start date for each activity _____
  - Projected end date for each activity _____
  - Agency – Who is responsible for complete implementation of this activity _____
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

### 6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will 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, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.
6.3.1 Describe the status of the State/Territory’s early learning and development guidelines appropriate for children from birth to kindergarten entry.

X The State/Territory assures that the early learning and development guidelines are:

- Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
- Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
- Updated as determined by the State. List the date or frequency Updated October 9, 2012.

X Fully implemented and meeting all Federal requirements outlined above as of March 1, 2016. List the Lead Agency’s policy citation(s) and describe using 6.3.2 through 6.3.4 below

☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) ______
- Current Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) ______
  - Implementation progress to date – Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented to date if applicable ______
  - Unmet requirement - Identify the requirement(s) not fully to be implemented ______
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) ______
  - Projected start date for each activity ______
  - Projected end date for each activity ______
  - Agency – Who is responsible for complete implementation of this activity ______
Partners – Who is the responsible agency partnering with to complete implement this activity ______

6.3.2 Check for which age group(s) the State/Territory has established early learning and development guidelines:

☐ Birth-to-three. Provide a link ______

☐ Three-to-Five. Provide a link ______

X Birth-to-Five. Provide a link http://www.earlychildhoodohio.org/elds.php

☐ Five and older (check if State/Territory has standards for five and older that complement academic but cover child development areas not covered by k-12 academic standards). Describe and provide a link ______

☐ Other. Describe ______

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children’s cognitive, physical, social and emotional development and support children’s overall well-being?

X Yes, the State/Territory has a system of technical assistance operating State/Territory-wide

☐ Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities but not State/Territory-wide

☐ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to the technical assistance and describe.

X Child care providers are supported in developing and implementing curriculum/learning activities based on the State’s/Territory’s early learning and development guidelines. Describe The CCR&Rs provide technical assistance and training to providers throughout the state. Early Learning and Development Standards training is offered statewide to assist providers in implementing the standards. Additionally, those participating in SUTQ are required to be researching (1-star), purchasing (2-star) or utilizing (3-, 4- 5-star) a curriculum that aligns with the Early Learning and Development Standards. Technical assistance on this is available through the CCR&Rs and also by the state licensing specialists working with programs registering for or participating in SUTQ.

X The technical assistance is linked to the State’s/Territory’s quality rating and improvement system. Describe The CCR&Rs provide technical assistance and training to providers throughout the state to assist in preparing for or maintaining a
rating in the SUTQ program. Additionally, Ohio Approved and SUTQ approved trainings are offered through the OPR.

X Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines. Describe: The CCR&Rs provide technical assistance and training to providers throughout the state, and have Infant/Toddler Specialist on staff to focus on this age group. Early Learning and Development Standards training is offered statewide to assist providers in implementing the standards.

X Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines. Describe: The CCR&Rs provide technical assistance and training to providers throughout the state. Early Learning and Development Standards training is offered statewide to assist providers in implementing the standards.

X Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines. Describe: The CCR&Rs provide technical assistance and training to providers throughout the state. Early Learning and Development Standards training is offered statewide to assist providers in implementing the standards.

b) Indicate which funds are used for this activity (check all that apply)

X CCDF funds. Describe: CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

X Other funds. Describe: other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

6.3.4 Check here X to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- 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 effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF,
from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State’s/Territory’s needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

1) Supporting the training and professional development of the child care workforce (as described in Section 6)
2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)
3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services
4) Improving the supply and quality of child care programs and services for infants and toddlers
5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)
6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)
7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children
8) Supporting providers in the voluntary pursuit of accreditation
9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
10) 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, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds
to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

7.1 Activities to Improve the Quality of Child Care Services

7.1.1 What are your overarching goals for quality improvement? Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services To improve the quality of child care services and enhance the current SUTQ program. By 2020, Ohio requires that all publicly funded child care (PFCC) programs are participating in SUTQ. This requirement will further increase the quality of programming for all low income families and children, including infants and toddlers, across the state.

7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:

- Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2.
  - Indicate which funds will be used for this activity (check all that apply)
    - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) CCDF funds, Quality set aside (broken into Provider, Family, Community, Infant/Toddler, and School Age) are used to provide professional development for administrators and staff, technical assistance for Step Up To Quality processes, recruitment and outreach.
    - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) Race to the Top (RTT) Early Learning Challenge Grant (ELCG) funds are used to provide professional development for administrators and staff, TA for SUTQ and recruitment and outreach.

- Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3.
  - Indicate which funds will be used for this activity (check all that apply)
    - CCDF funds. Describe CCDF funds (e.g., quality set-aside, including whether designated infant- and toddler set aside, etc.) funds are being used along with other CCDF funds
    - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
☐ Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4.

☐ Indicate which funds will be used for this activity (check all that apply)
  ☐ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) _____
  ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5.

Indicate which funds will be used for this activity (check all that apply)
  ☐ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) _____
  ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

☐ Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6.

☐ Indicate which funds will be used for this activity (check all that apply)
  ☐ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) _____
  ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

☐ Supporting accreditation. If checked, respond to 7.7.

☐ Indicate which funds will be used for this activity (check all that apply)
  ☐ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) _____
  ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

☐ 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 7.8.

☐ Indicate which funds will be used for this activity (check all that apply)
☐ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

X Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9.

X Indicate which funds will be used for this activity (check all that apply)

X CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) CCDF, Quality set aside (broken into Provider, Family, Community, Infant/Toddler, and School Age), are used to provide professional development for administrators and staff, technical assistance for Step Up To Quality processes, recruitment and outreach.

X Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) ELCG Funds are used to training in professional development for administrators and staff, technical assistance for Step Up To Quality processes, recruitment and outreach.

TANF Funds

7.2 Quality Rating and Improvement System

7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?

X Yes, the State/Territory has a QRIS operating State/Territory-wide. Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available The Ohio Department of Job and Family Services and the Ohio Department of Education (ODE) administer SUTQ, Ohio’s tiered quality rating and improvement system (TQRIS). www.earlychildhoodohio.org

☐ Yes, the State/Territory has a QRIS operating as a pilot, in a few localities, or only a few levels but not fully operating State/Territory-wide. Provide a link, if available

☐ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development
a) If yes, check all that apply to your QRIS.

X Participation is voluntary

☐ Participation is mandatory for providers serving children receiving subsidy. If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.)

☐ Participation is required for all providers

X Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels

X Supports and assesses the quality of child care providers in the State/Territory

X Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers

☐ Embeds licensing into the QRIS. Describe

X Designed to improve the quality of different types of child care providers and services

☐ Describes the safety of child care facilities

X Addresses the business practices of programs

X Builds the capacity of State/Territory early childhood programs and communities to promote parents’ and families’ understanding of the State/Territory’s early childhood system and the ratings of the programs in which the child is enrolled

X Provides, to the maximum extent practicable, 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. If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality Ohio pays an enhanced rate for PFCC that is based on the program's rating 1-star: 5%, 2-star or accredited: 10%, 3-star: 15%, 4-star: 20%, 5-star: 25%

X Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating

b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State’s/Territory’s QRIS? Check all that apply.

X Licensed child care centers

X Licensed family child care homes

☐ License-exempt providers
X Early Head Start programs
X Head Start programs
X State pre-kindergarten or preschool program
X Local district supported pre-kindergarten programs
X Programs serving infants and toddlers
X Programs serving school-age children
X Faith-based settings
☐ Other. Describe. ____

7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory.

Ohio will require that all providers who receive public funds including CCDF funds, must be rated by July 2020. Beginning in July 2017 (25%) and ending in July 2025 (100%), Ohio also has incremental goals to have all centers and Type A Homes that receive public funds, including CCDF, to be highly rated (a 3-star, 4-star or 5-star rating).

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

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and 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.

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

☐ Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families. Describe

☐ Establishing or expanding the operation of community or neighborhood-based family child care networks. Describe
Providing training and professional development to promote and expand child care providers’ ability to provide developmentally appropriate services for infants and toddlers. Describe

Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care. Describe

Providing coaching and/or technical assistance on this age group’s unique needs from Statewide 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

Developing infant and toddler components within the State’s/Territory’s QRIS. Describe

Developing infant and toddler components within the State/Territory’s child care licensing regulations. Describe

Developing infant and toddler components within the early learning and development guidelines. Describe

Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care. Describe

Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being. Describe

Other. Describe

Describe the measures relevant to this activity that the State/Territory will use to evaluate the State’s progress in improving the quality of child care programs and services in the State/Territory

7.4 Child Care Resource & Referral

7.4.1 Describe the status of the child care resource and referral system (as discussed in Section 1.7)

State/Territory has a CCR&R system operating State/Territory-wide. Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated and if it is voluntary

State/Territory has a CCR&R system operating in a few localities but not fully operating State/Territory-wide. Describe

State/Territory is in the development phase
7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory.

7.5 Facilitating Compliance with State Standards

7.5.1 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 _____.

7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory _____.

7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings. Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children _____.

7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory _____.

7.7 Accreditation Support

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

- Yes, the State/Territory has supports operating State/Territory-wide. Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation _____.

- Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide. Describe _____.

- No, but the State/Territory is in the development phase

- No, the State/Territory has no plans for development

7.7.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory.

7.8 Program Standards
7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development? Please describe

7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory.

7.9 Other Quality Improvement Activities

7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory’s progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten. The ORC requires the ODJFS and the ODE programs receiving public dollars (including CCDF) to be participating in SUTQ by July 1, 2020. By July 1, 2017, 25% of all centers and family child care Type A homes receiving public funds must be highly rated, with 100% highly rated by July 1, 2025. The two departments are required to identify strategies to assist programs in increasing and maintain their star rating. Additionally, Ohio is preparing to release a statewide assessment tool and tracking system for all highly rated SUTQ programs, which will allow the state to evaluate the effectiveness of SUTQ in preparing children for kindergarten.

8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory’s policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory’s own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly “checking” on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.
8.1 Program Integrity

8.1.1 Describe how the State/Territory ensures that their definitions for violations have been modified, and program integrity procedures revised to reflect new requirements. Ohio child care eligibility, fraud and overpayment rules include the program integrity review requirements. The law and supporting materials are reviewed and revised when needed.

8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements. Check all that apply.

- X Issue policy change notices
- X Issue new policy manual
- X Staff training
  - X Orientations
  - X Onsite training
  - X Online training
- X Regular check-ins to monitor implementation of the new policies.

Describe Licensing has a unit that monitors the county department of job and family services (CDJFS) agencies and their regulation of Type B Homes to ensure the county is correctly inspecting those homes. Beginning in Fall 2016, the counties will be regulating Type A Homes as well and this unit will monitor that as well. The Ohio Department of Job and Family Services (ODJFS) also conducts monthly video conferences to provide training and technical assistance to all counties on CCDF eligibility processes as well as Type B (soon to be Type A as well) regulation.

- X Other. Describe Monthly video conferences are held with county agencies and technical assistance materials are posted online for providers and county/state staff.

8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF. The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements.

Ohio has promulgated rules dedicated to eligibility, fraud and overpayment. These rules define the CDJFS agency’s requirements when determining eligibility and authorizing children to eligible providers. The ODJFS has a program integrity unit that reviews manual and automated attendance records to research potential misuse of CCDF funds by caretakers or providers. The ODJFS also processes manual claims and adjustments for care not recorded in the Electronic Child Care system. These submissions are reviewed for quality control prior to payment.
The Child Care Resource and Referral (CCR&R) agencies and the Ohio Child Care Resource and Referral Association (OCCRRA) sign contracts with the ODJFS. Deliverables are identified and quarterly reports are provided.

**Definition:** “Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93). Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as “vendors”). The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified.”

8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

a) Check which activities the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.

- [ ] Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
- [ ] Run system reports that flag errors (include types). Describe _____
- [X] Review of enrollment documents, attendance or billing records
- [X] Conduct supervisory staff reviews or quality assurance reviews
- [X] Audit provider records
- [X] Train staff on policy and/or audits
- [ ] Other. Describe _____
- [ ] None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines _____

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

☐ Run system reports that flag errors (include types). Describe ______

☐ Review of enrollment documents, attendance or billing records

☐ Conduct supervisory staff reviews or quality assurance reviews

☐ Audit provider records

☐ Train staff on policy and/or audits

☐ Other. Describe ______

☐ None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines ______

8.1.5 Which activities (or describe under “Other”) the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory? The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under “Other”) the Lead Agency will use for unintentional program violations?

☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount 100.00

☐ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)

☐ Recover through repayment plans

☐ Reduce payments in subsequent months

☐ Recover through State/Territory tax intercepts

☐ Recover through other means

☐ Establish a unit to investigate and collect improper payments. Describe The agency has an investigative unit comprised of two investigators and a supervisor who are charged with investigating all referrals received by the agency of potential program violations or improper payments made to child care providers who provide publicly funded child care in the state.

☐ Other. Describe ______

☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines ______

b) Check which activities the Lead Agency will use for intentional program violations or fraud?

☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount 100.00
X Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)

X Recover through repayment plans

X Reduce payments in subsequent months

☐ Recover through State/Territory tax intercepts

☐ Recover through other means

X Establish a unit to investigate and collect improper payments. Describe composition of unit below

X Other. Describe The agency has an investigative unit comprised of two investigators and a supervisor who are charged with investigating all referrals received by the agency of potential program violations or improper payments made to child care providers who provide publicly funded child care in the state. Improper payments are collected by the CDJFS or ODJFS. In addition, if attempts to collect payments are unsuccessful, the collections is turned over the Ohio Attorney General’s Office to pursue payment.

☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, including action steps and completion timelines

c) Check which activities the Lead Agency will use for administrative error?

X Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount 100.00

☐ Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)

X Recover through repayment plans

☐ Reduce payments in subsequent months

☐ Recover through State/Territory tax intercepts

☐ Recover through other means

☐ Establish a unit to investigate and collect improper payments. Describe composition of unit below

☐ Other. Describe

☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines

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? The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

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

X Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified. Providers have the right to present a written appeal of a proposed termination of their provider agreement to the ODJFS
who reviews written records of the agency’s case and any material submitted by the provider before rendering a final decision on the provider’s appeal. This review of the written records and the appeal decision is made independent of the agency’s investigation unit.

X  Prosecute criminally

Other. Describe _____